

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493318059429

Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2018

Open to Public Inspection

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

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

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

A For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

AHC INC

Doing business as

Number and street (or P O box if mail is not delivered to street address)

Room/suite

2230 NORTH FAIRFAX DRIVE NO 100

City or town, state or province, country, and ZIP or foreign postal code

ARLINGTON, VA 22201

D Employer identification number

54-1026365

E Telephone number

(703) 486-0626

G Gross receipts \$ 34,560,913

F Name and address of principal officer

STEVE YEATMAN

2230 NORTH FAIRFAX DR

ARLINGTON, VA 22201

H(a) Is this a group return for subordinates?

☐ Yes ☒ No

H(b) Are all subordinates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) () ◀(insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.AHCINC.ORG

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1975

M State of legal domicile VA

Part I

Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities

AHC'S MISSION IS TO BUILD, PRESERVE AND PROVIDE HIGH QUALITY AFFORDABLE HOUSING TO LOW AND MODERATE INCOME FAMILIES AND INDIVIDUALS

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

3 Number of voting members of the governing body (Part VI, line 1a)

10

4 Number of independent voting members of the governing body (Part VI, line 1b)

9

5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)

85

6 Total number of volunteers (estimate if necessary)

412

7a Total unrelated business revenue from Part VIII, column (C), line 12

0

7b Net unrelated business taxable income from Form 990-T, line 34

27,240

Revenue

8 Contributions and grants (Part VIII, line 1h)

1,422,916

9 Program service revenue (Part VIII, line 2g)

25,844,951

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

372,617

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

0

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

27,640,484

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

0

14 Benefits paid to or for members (Part IX, column (A), line 4)

0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

9,302,974

16a Professional fundraising fees (Part IX, column (A), line 11e)

0

b Total fundraising expenses (Part IX, column (D), line 25) ▶315,420

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

15,034,292

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)

24,337,266

19 Revenue less expenses Subtract line 18 from line 12

3,303,218

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

233,966,178

21 Total liabilities (Part X, line 26)

131,456,338

22 Net assets or fund balances Subtract line 21 from line 20

102,509,840

Part II

Signature Block

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

Signature of officer

2019-11-07

Date

STEVE YEATMAN CFO

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if self-employed

PTIN P00849057

Firm's name ▶ HERTZBACH & COMPANY PA

Firm's EIN ▶ 52-1158459

Firm's address ▶ 800 RED BROOK BLVD SUITE 300

OWINGS MILLS, MD 21117

Phone no (410) 363-3200

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2018)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐ ☒**1** Briefly describe the organization's mission

AHC'S MISSION IS TO BUILD, PRESERVE AND PROVIDE HIGH QUALITY AFFORDABLE HOUSING TO LOW AND MODERATE INCOME FAMILIES AND INDIVIDUALS

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

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

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

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a	(Code)	(Expenses \$ 16,218,765	including grants of \$	(Revenue \$ 18,420,560)
See Additional Data				

4b	(Code)	(Expenses \$ 426,979	including grants of \$	(Revenue \$)
See Additional Data				

4c	(Code)	(Expenses \$ 5,199,270	including grants of \$	(Revenue \$ 4,370,532)
See Additional Data				

(Code)	(Expenses \$	including grants of \$	(Revenue \$)
SINGLE FAMILY HOME OWNERSHIP PROGRAMS - FUNDING FOR THE ACQUISITION, SUBSTANTIAL RENOVATION AND MAINTENANCE OF HOUSES IN TARGET AREAS & ELIGIBLE LOW INCOME PERSONS			

4d Other program services (Describe in Schedule O)

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

4e Total program service expenses 21,845,014

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9 Yes	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a Yes	
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	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	No
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 Yes	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	No
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a Yes	
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 Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
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	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	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	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	No

Part IV Checklist of Required Schedules (continued)

		Yes	No
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? <i>If "Yes," complete Schedule J</i>	Yes	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
24b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		No
25b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		No
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)		
28a	a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
28b	b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
28c	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
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? <i>If "Yes," complete Schedule R, Part I</i>	Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	Yes	
35b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		No
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? <i>If "Yes," complete Schedule R, Part VI</i>		No
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	Yes	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

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

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	85	2b	Yes	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)						
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?				3a		No
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O				3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?				4a		No
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 Accounts (FBAR)						
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				5a		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?				5b		No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?				5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?				6a		No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?				6b		
7 Organizations that may receive deductible contributions under section 170(c).						
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?				7a		No
b If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?				7c		No
d If "Yes," indicate the number of Forms 8282 filed during the year				7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?				7e		No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?				7f		No
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?				7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?				7h		
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		
9a 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?				9b		
10 Section 501(c)(7) organizations. Enter						
a Initiation fees and capital contributions included on Part VIII, line 12				10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				10b		
11 Section 501(c)(12) organizations. Enter						
a Gross income from members or shareholders				11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)				11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?						
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year				12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.						
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O				13a		
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		
c Enter the amount of reserves on hand				13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?				14a		No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O				14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N				15		No
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O				16		No

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

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	1a	10
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
b Enter the number of voting members included in line 1a, above, who are independent	1b	9
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6 Did the organization have members or stockholders?	6	Yes
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a The governing body?	8a	Yes
b Each committee with authority to act on behalf of the governing body?	8b	Yes
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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

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

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed: MD, VA

18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☒ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records:
STEVE YEATMAN 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 (703) 486-0626

Part VII**Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JUSTIN C OLIVER CHAIRMAN	1 00 0 00	X		X				0	0	0
(2) JOHN V SNYDER VICE CHAIRMAN	1 00 0 00	X		X				0	0	0
(3) DAVID BARSKY SECRETARY	1 00 0 00	X		X				0	0	0
(4) CC JENKINS TREASURER	1 00 0 00	X		X				0	0	0
(5) WALTER D WEBDALE PRESIDENT	30 00 10 00	X		X				409,828	0	92,386
(6) JASON C DALLEY DIRECTOR	1 00 0 00	X						0	0	0
(7) WANDA PIERCE DIRECTOR	1 00 0 00	X						0	0	0
(8) CATHERINE SADAAT DIRECTOR	1 00 0 00	X						0	0	0
(9) RACHEL SCHROEDER DIRECTOR	1 00 0 00	X						0	0	0
(10) ROBERT BUSHKOFF DIRECTOR	1 00 0 00	X						0	0	0
(11) SCOTT RITTER PARTIAL YEAR DIRECTOR	1 00 0 00	X						0	0	0
(12) THOMAS KLANDERMAN PARTIAL YEAR DIRECTOR	1 00 0 00	X						0	0	0
(13) STEVE YEATMAN ASSISTANT TREASURER / CFO	30 00 10 00			X				220,392	0	29,609
(14) STEPHEN SMITH EXECUTIVE VICE PRESIDENT	30 00 10 00			X				345,476	0	86,774
(15) JOHN WELSH VP, MULTIFAMILY DIVISION	40 00 0 00			X				212,721	0	67,617
(16) MICHAEL WARNER SENIOR VP, PROPERTY MANAGE	30 00 10 00			X				225,820	0	8,888
(17) CARLTON MILLER DIR SINGLE FAMILY DEVELOP	40 00 0 00				X			182,247	0	86,777

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) JAMES LOWE DIR PORTFOLIO MANAGEMENT	30 00 10 00				X			151,365	0	56,476
(19) ALAN I GOLDSTEIN DIR MULTIFAMILY DIVISION	40 00 0 00				X			169,944	0	25,088
(20) STANIA ROMAIN DIR HUMAN RESOURCES	40 00 0 00					X		138,835	0	16,171
(21) REGINA JACKSON SENIOR CONTROLLER	40 00 0 00					X		142,679	0	19,007
(22) BIBI Z KIRBY CONTROLLER	40 00 0 00					X		135,551	0	20,510
(23) JENNIFER ENDO DIRECTOR, RESIDENT SERVIC	40 00 0 00					X		145,391	0	22,752
(24) TERESA L WASHINGTON SENIOR COMMUNITY ASSOCIATION MANAGER	40 00 0 00					X		136,187	0	9,242

1b Sub-Total	▶			
c Total from continuation sheets to Part VII, Section A	▶			
d Total (add lines 1b and 1c)	▶	2,616,436	0	541,297

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 ▶ **22**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
CUNNINGHAM & QUILL ARCHITECTS 1054 31ST STREET NW 315 WASHINGTON, DC 20007	DESIGN SERVICES	643,668
HARKINS BUILDERS INC 10490 LITTLE PATUXENT PARKWAY SUIT COLUMBIA, MD 21044	CONSTRUCTION SERVICES	361,595
ACCESS DEMOLITION CONTRACTING INC 3437 9TH STREET BALTIMORE, MD 21225	CONSTRUCTION	321,039
HERTZBACH & COMPANY PA 800 RED BROOK BLVD SUITE 300 OWINGS MILLS, MD 21117	ACCOUNTING SERVICES	170,135
SHULMAN ROGERS 12505 PARK POTOMAC AVENUE 6TH FLOOR POTOMAC, MD 20854	ATTORNEY	128,415

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ **7**

Part VIII Statement of Revenue

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

Contributions, Gifts, Grants
and Other Similar Amounts

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
1a Federated campaigns . . .	1a				
b Membership dues . . .	1b				
c Fundraising events . . .	1c				
d Related organizations	1d				
e Government grants (contributions)	1e	174,144			
f All other contributions, gifts, grants, and similar amounts not included above	1f	3,907,531			
g Noncash contributions included in lines 1a - 1f \$ _____					
h Total. Add lines 1a-1f		4,081,675			

Program Service Revenue

	Business Code				
2a RENTAL INCOME	531390	10,495,937	10,495,937		
b FEE INCOME	531390	8,967,547	8,967,547		
c PROGRAM INTEREST INCOME	531390	2,682,868	2,682,868		
d FLOW THROUGH INCOME	531390	653,815	653,815		
e TENANT CHARGES	531390	293,493	293,493		
f All other program service revenue		258,046	258,046		
g Total. Add lines 2a-2f		23,351,706			

Other Revenue

3 Investment income (including dividends, interest, and other similar amounts)		462,532			462,532
4 Income from investment of tax-exempt bond proceeds					
5 Royalties					
6a Gross rents	(i) Real	(ii) Personal			
b Less rental expenses					
c Rental income or (loss)					
d Net rental income or (loss)					
7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
b Less cost or other basis and sales expenses		6,665,000			
c Gain or (loss)		7,225,614			
d Net gain or (loss)		-560,614	-560,614		
8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
b Less direct expenses	b				
c Net income or (loss) from fundraising events					
9a Gross income from gaming activities See Part IV, line 19	a				
b Less direct expenses	b				
c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances	a				
b Less cost of goods sold	b				
c Net income or (loss) from sales of inventory					
Miscellaneous Revenue	Business Code				
11a					
b					
c					
d All other revenue					
e Total. Add lines 11a-11d					
12 Total revenue. See Instructions		27,335,299	22,791,092	0	462,532

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.				
2 Grants and other assistance to domestic individuals. See Part IV, line 22.				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	2,371,409	1,634,203	665,393	71,813
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7 Other salaries and wages.	5,882,848	4,795,241	1,001,328	86,279
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	16,310	7,988	8,051	271
9 Other employee benefits.	814,576	398,940	402,093	13,543
10 Payroll taxes.	522,645	416,607	92,460	13,578
11 Fees for services (non-employees):				
a Management.				
b Legal.	288,638	234,131	48,817	5,690
c Accounting.	188,405	113,841	66,781	7,783
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	291,951	229,227	51,318	11,406
12 Advertising and promotion.	238,473	196,066	33,516	8,891
13 Office expenses.	448,852	420,569	24,959	3,324
14 Information technology.	307,890	243,319	56,744	7,827
15 Royalties.				
16 Occupancy.	7,962,406	7,962,406		
17 Travel.	61,841	40,871	18,533	2,437
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.				
20 Interest.	362,270	362,270		
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	3,359,019	3,296,035	56,162	6,822
23 Insurance.	146,266	81,391	57,733	7,142
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a RENT	539,741	445,603	82,699	11,439
b ABANDONED PREDEVELOPMENT	200,544	200,544		
c RESIDENT SERVICES COST	186,737	186,737		
d MEMBERSHIP & FEES	177,054	125,605	41,612	9,837
e All other expenses	632,250	453,420	131,492	47,338
25 Total functional expenses. Add lines 1 through 24e.	25,000,125	21,845,014	2,839,691	315,420
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		11,968,485	1	11,109,498
	2	Savings and temporary cash investments		20,618,087	2	26,463,580
	3	Pledges and grants receivable, net		98,562	3	125,852
	4	Accounts receivable, net		1,355,011	4	573,916
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net		39,168,735	7	42,650,911
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		460,192	9	348,532
	10a	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	10a	119,336,174		
	b	Less: accumulated depreciation	10b	14,716,157		
				107,780,252	10c	104,620,017
	11	Investments—publicly traded securities		971,267	11	1,157,346
	12	Investments—other securities. See Part IV, line 11			12	
	13	Investments—program-related. See Part IV, line 11		3,679,998	13	1,456,327
	14	Intangible assets		2,779,696	14	2,727,840
15	Other assets. See Part IV, line 11		45,085,893	15	42,174,868	
16	Total assets. Add lines 1 through 15 (must equal line 34)		233,966,178	16	233,408,687	
Liabilities	17	Accounts payable and accrued expenses		4,251,356	17	4,671,255
	18	Grants payable			18	
	19	Deferred revenue		10,128,292	19	8,468,147
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		363,556	21	440,386
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties		115,909,622	23	114,700,987
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		803,512	25	1,040,933
	26	Total liabilities. Add lines 17 through 25		131,456,338	26	129,321,708
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		98,065,836	27	101,299,542
	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets		4,444,004	29	2,787,437
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		102,509,840	33	104,086,979
	34	Total liabilities and net assets/fund balances		233,966,178	34	233,408,687

Part XI Reconciliation of Net AssetsCheck 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	27,335,299
2	Total expenses (must equal Part IX, column (A), line 25)	2	25,000,125
3	Revenue less expenses Subtract line 2 from line 1	3	2,335,174
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	102,509,840
5	Net unrealized gains (losses) on investments	5	-445,713
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	-312,322
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	104,086,979

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☒

	Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input checked="" type="checkbox"/> Both consolidated and separate basis	Yes	
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Additional Data

Software ID:
Software Version:
EIN: 54-1026365
Name: AHC INC

Form 990 (2018)

Form 990, Part III, Line 4a:

MULTIFAMILY HOUSING DEVELOPMENT - AHC PROVIDES AFFORDABLE HOUSING PARTICULARLY IN ARLINGTON, VIRGINIA, BUT ALSO IN OTHER COMMUNITIES IN THE DC METRO AREA, SUCH AS PRINCE GEORGE'S, MONTGOMERY, AND BALTIMORE COUNTIES IN MARYLAND, ALEXANDRIA AND FAIRFAX COUNTIES IN VIRGINIA, AND WASHINGTON, DC FOUNDED IN DECEMBER OF 1975, AHC TODAY OWNS 53 AFFORDABLE HOUSING COMPLEXES PROVIDING HOUSING FOR MORE THAN 18,000 FAMILIES AND INDIVIDUALS KNOWN IN THE EARLIER YEARS AS THE ARLINGTON HOUSING CORPORATION, AHC HAS GROWN FROM A GRASSROOTS ENTITY THAT PROVIDED A HOME IMPROVEMENT PROGRAM FOR LOW- AND MODERATE-INCOME HOMEOWNERS IN ARLINGTON TO A FULL-SERVICE ORGANIZATION OFFERING COMPREHENSIVE AFFORDABLE HOUSING, HIGH QUALITY PROPERTY MANAGEMENT SERVICES (SINCE 2001) AND AWARD-WINNING ONSITE RESIDENT SERVICES (SINCE 1993) THAT IMPROVE THE QUALITY OF OUR RESIDENTS' LIVES AHC PRIMARILY SERVES FAMILIES WHO EARN BETWEEN 30% AND 80% OF THE AREA MEDIAN INCOME AREA MEDIAN INCOME, OR AMI, IS THE MIDDLE INCOME IN A GIVEN AREA AND IS THE MEASUREMENT THAT QUALIFIES FAMILIES AND INDIVIDUALS FOR AFFORDABLE HOUSING

Form 990, Part III, Line 4b:

COMMUNITY RELATIONS - AHC'S COMMUNITY RELATIONS (CR) DIVISION PROVIDES SERVICES THAT CONTRIBUTE TO COMMUNITY UNDERSTANDING OF AFFORDABLE HOUSING AND RELATED ISSUES CR SEEKS TO BUILD POSITIVE, PRODUCTIVE RELATIONSHIPS WITH CUSTOMERS, COMMUNITIES, PARTNERS, AND LENDERS THAT WILL EXPAND SUPPORT FOR AHC ACTIVITIES COMMUNICATIONS OUTREACH INCLUDES TRADITIONAL MEDIA, SOCIAL MEDIA, AND PRINT MEDIA IN ADDITION, THE DIVISION SUPPORTS AHC'S RESIDENT SERVICES PROGRAMMING AND HELPS WITH CRISIS MANAGEMENT AND COMMUNICATIONS FOR AHC INC AND ITS AFFILIATES AHC'S AWARD-WINNING RESIDENT SERVICES PROGRAMMING GIVES RESIDENTS THE OPPORTUNITY TO THRIVE THROUGH PRIMARY PROGRAM AREAS EDUCATION, HEALTH AND WELLNESS, FINANCIAL CAPABILITY, AND COMMUNITY ENGAGEMENT

Form 990, Part III, Line 4c:

PROFESSIONAL SERVICES - AS PART OF ITS OVERALL PORTFOLIO, AHC PROVIDES PROFESSIONAL SERVICES TO APPROXIMATELY 36 AFFILIATED ORGANIZATIONS. THESE SERVICES INCLUDE ASSET MANAGEMENT, CONSTRUCTION MANAGEMENT, AND OTHER ADMINISTRATIVE SERVICES. THESE SERVICES GENERATE REVENUE FOR THE ORGANIZATION, WHICH CAN THEN BE RE-INVESTED IN THE DEVELOPMENT OR ACQUISITION OF AFFORDABLE HOUSING.

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization

AHC INC

Employer identification number

54-1026365

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

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

1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ))

3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9

☐

An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university

10

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

11

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

12

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g

a

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**

b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f

Enter the number of supported organizations

g

Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2018

Part II

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

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support							
	Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant ")	6,344,002	5,689,630	1,666,735	1,422,916	4,081,675	19,204,958
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	6,344,002	5,689,630	1,666,735	1,422,916	4,081,675	19,204,958
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)						8,395,866
6	Public support. Subtract line 5 from line 4						10,809,092

Section B. Total Support								
Calendar year (or fiscal year beginning in) ►		(a)2014	(b)2015	(c)2016	(d)2017	(e)2018	(f)Total	
7	Amounts from line 4	6,344,002	5,689,630	1,666,735	1,422,916	4,081,675	19,204,958	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	204,360	208,342	325,149	361,494	462,532	1,561,877	
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)							
11	Total support. Add lines 7 through 10						20,766,835	
12	Gross receipts from related activities, etc (see instructions)						12	110,205,141
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>							

Section C. Computation of Public Support Percentage		
14	Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14 52.050 %
15	Public support percentage for 2017 Schedule A, Part II, line 14	15 43.780 %
16a	33 1/3% support test—2018. 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. ► <input checked="" type="checkbox"/>	
b	33 1/3% support test—2017. 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. ► <input type="checkbox"/>	
17a	10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>	
b	10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>	
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. ► <input type="checkbox"/>	

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

b 33 1/3% support tests—2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>	1	
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>	3a	
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>	4b	
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>	5a	
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	
c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6	
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	7	
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	8	
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>	9a	
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>	9b	
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>	9c	
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>	10a	
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>	10b	

Part IV

Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations			
<div>1</div> <div><input type="checkbox"/></div> <div>Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.</div>			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<div><input type="checkbox"/></div> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).		

Part V

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2018			
a From 2013.			
b From 2014.			
c From 2015.			
d From 2016.			
e From 2017.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2018 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2019. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2014.			
b Excess from 2015.			
c Excess from 2016.			
d Excess from 2017.			
e Excess from 2018.			

Additional Data

Software ID:
Software Version:
EIN: 54-1026365
Name: AHC INC

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

Facts And Circumstances Test

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93493318059429	
<div>SCHEDULE D (Form 990)</div> <div>Department of the Treasury Internal Revenue Service</div>		<div>Supplemental Financial Statements</div> <div>▶ 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 the latest information.</div>			<div>OMB No 1545-0047</div> <div>2018</div> <div>Open to Public Inspection</div>
Name of the organization AHC INC				Employer identification number 54-1026365	
Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.					
		(a) Donor advised funds		(b) Funds and other accounts	
1		Total number at end of year			
2		Aggregate value of contributions to (during year)			
3		Aggregate value of grants from (during year)			
4		Aggregate value at end of year			
5		Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>			
6		Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>			
Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.					
1 Purpose(s) of conservation easements held by the organization (check all that apply) <div><input type="checkbox"/> Preservation of land for public use (e g , recreation or education) <input type="checkbox"/> Preservation of an historically important land area <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure <input type="checkbox"/> Preservation of open space</div>					
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year					
				Held at the End of the Year	
a Total number of conservation easements				2a	
b Total acreage restricted by conservation easements				2b	
c Number of conservation easements on a certified historic structure included in (a)				2c	
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register				2d	
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶					
4 Number of states where property subject to conservation easement is located ▶					
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>					
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶					
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$					
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>					
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements					
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.					
1a If the organization elected, as permitted under SFAS 116 (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 SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items					
(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$					
(ii) Assets included in Form 990, Part X ▶ \$					
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items					
a Revenue included on Form 990, Part VIII, line 1 ▶ \$					
b Assets included in Form 990, Part X ▶ \$					
For Paperwork Reduction Act Notice, see the Instructions for Form 990.					
		Cat No 52283D		Schedule D (Form 990) 2018	

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

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

- a** ☐ Public exhibition
- b** ☐ Scholarly research
- c** ☐ Preservation for future generations
- d** ☐ Loan or exchange programs
- e** ☐ Other

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

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

Part IV Escrow and Custodial Arrangements.

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes ☒ No

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

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

	Amount
1c	
1d	
1e	
1f	

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

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

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

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

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

a Board designated or quasi-endowment ▶

b Permanent endowment ▶

c Temporarily restricted endowment ▶

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

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

(i) unrelated organizations

(ii) related organizations

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

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		31,173,530		31,173,530
b Buildings		77,939,955	8,660,374	69,279,581
c Leasehold improvements		527,989	335,171	192,818
d Equipment		6,420,742	4,704,941	1,715,801
e Other		3,273,958	1,015,671	2,258,287
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				104,620,017

Part VII

Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b.
See Form 990, Part X, line 12.

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

Part VIII

Investments—Program Related.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX

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

(a) Description	(b) Book value
(1) DEFERRED DEVELOPMENT FEES	9,229,037
(2) PREDEVELOPMENT COSTS	4,005,258
(3) DUE FROM AFFILIATES	11,353,939
(4) INTEREST RECEIVABLE	15,744,357
(5) REPLACEMENT RESERVES	311,669
(6) ESCROWS	1,091,267
(7) SECURITY DEPOSITS	439,341
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	42,174,868

Part X

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
DEFERRED COMPENSATION LIABILITY	960,715
DUE TO AFFILIATE	80,218
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	1,040,933

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☐

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

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

1	Total revenue, gains, and other support per audited financial statements	1	12,169,331
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	-445,713
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	-743,602
e	Add lines 2a through 2d	2e	-1,189,315
3	Subtract line 2e from line 1	3	13,358,646
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	13,976,653
c	Add lines 4a and 4b	4c	13,976,653
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	27,335,299

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

1	Total expenses and losses per audited financial statements	1	10,614,198
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	2,629,207
e	Add lines 2a through 2d	2e	2,629,207
3	Subtract line 2e from line 1	3	7,984,991
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	17,015,134
c	Add lines 4a and 4b	4c	17,015,134
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	25,000,125

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 54-1026365
Name: AHC INC

Supplemental Information

Return Reference	Explanation
PART IV, LINE 2B	THE ORGANIZATION HOLDS FUNDS DEPOSITED IN A SAVINGS ACCOUNT WITH A BALANCE WHICH IS AT LEAST EQUAL TO THE TENANTS' SECURITY DEPOSITS TENANT SECURITY DEPOSITS ARE HELD IN A FEDERALLY INSURED BANK

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	ELIMINATION OF INTERCOMPANY TRANSACTIONS 2,276,582 ELIMINATION OF AFFILIATES' REVENUE -3,020,184

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	AFFILIATE REVENUE 13,976,653

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	ELIMINATION OF INTERCOMPANY ACTIVITY 2,629,207

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS	AFFILIATE EXPENSES 17,015,134

Supplemental Information	
Return Reference	Explanation
SCHEDULE D PART XI AND XII LINES 4B	THE AUDITED FINANCIAL STATEMENTS INCLUDE ONLY THE ACTIVITY OF AHC, INC THE AFFILIATE REVE NUE AND EXPENSE ADJUSTMENTS REPRESENT ACTIVITY FROM ENTITIES AHC WHOLLY OWNS OR CONTROLS

Schedule J (Form 990)	<div>Compensation Information</div> <div>For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees</div> <div>▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990.</div> <div>▶ Go to www.irs.gov/Form990 for instructions and the latest information.</div>	OMB No 1545-0047
		2018
		Open to Public Inspection

Department of the Treasury Internal Revenue Service	Name of the organization AHC INC	Employer identification number 54-1026365
--	-------------------------------------	--

Part I Questions Regarding Compensation		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.			
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use		
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence		
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes in 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, officers, including the CEO/Executive Director, regarding the items checked in line 1a?		2	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract		
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study		
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> 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:			
a Receive a severance payment or change-of-control payment?		4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b	Yes
c Participate in, or receive payment from, an equity-based compensation arrangement?		4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
Only 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:			
a The organization?		5a	No
b Any related organization?		5b	No
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:			
a The organization?		6a	No
b Any related organization?		6b	No
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 in lines 5 and 6? If "Yes," describe in Part III.		7	No
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	No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		9	

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 are not 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.

See Additional Data Table**Schedule J (Form 990) 2018**

Part III **Supplemental Information**

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

Return Reference	Explanation
PART I, LINE 4B	EFFECTIVE JANUARY 1, 2015, AHC ESTABLISHED A SENIOR MANAGEMENT DEFERRED COMPENSATION PLAN THAT QUALIFIES AS A "TOP-HAT PLAN" UNDER IRC 457(F). UNDER THE PLAN, AHC WILL PROVIDE A DEFERRED COMPENSATION BENEFIT TO LONG-TERM SENIOR MANAGEMENT EMPLOYEES WHO ARE DESIGNATED FOR PARTICIPATION, AND WHO HAVE AND ARE EXPECTED TO MATERIALLY CONTRIBUTE TO THE CONTINUED GROWTH, DEVELOPMENT AND SUCCESS OF THE ORGANIZATION. THE DEFERRED COMPENSATION EXPENSE IS ACCRUED OVER THE PERIOD BEGINNING AT THE ENTRY DATE FOR EACH PARTICIPANT THROUGH THE DATE THAT EACH PARTICIPANT IS 100% VESTED. THE PRIMARY VESTING DATE FOR PARTICIPANTS IS THE LATER OF THE DATE THEY REACH 65 YEARS OF AGE, THE DATE THEY HAVE BEEN EMPLOYED BY AHC, INC. FOR 15 YEARS, AND JANUARY 1, 2020. THE CURRENT PARTICIPANTS THAT WILL VEST BENEFITS UNDER THE DEFERRED COMPENSATION PLAN WHEN THEIR PRIMARY VESTING DATE HAS BEEN REACHED ARE JIM LOWE (\$69,268), CARLTON MILLER (\$199,922), STEPHEN SMITH (\$285,603), WALTER WEBDALE (\$285,603) AND JOHN WELSH (\$120,320).



Additional Data

Software ID:
Software Version:
EIN: 54-1026365
Name: AHC INC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
WALTER D WEBDALE PRESIDENT	(i)	334,828	75,000	0	89,886	2,500	502,214	0
	(ii)	0	0	0	0	0	0	0
STEVE YEATMAN ASSISTANT TREASURER / CFO	(i)	212,280	8,112	0	19,672	9,937	250,001	0
	(ii)	0	0	0	0	0	0	0
STEPHEN SMITH EXECUTIVE VICE PRESIDENT	(i)	281,685	63,791	0	83,927	2,847	432,250	0
	(ii)	0	0	0	0	0	0	0
JOHN WELSH VP, MULTIFAMILY DIVISION	(i)	211,012	1,709	0	57,680	9,937	280,338	0
	(ii)	0	0	0	0	0	0	0
MICHAEL WARNER SENIOR VP, PROPERTY MANAGE	(i)	225,820	0	0	575	8,313	234,708	0
	(ii)	0	0	0	0	0	0	0
CARLTON MILLER DIR SINGLE FAMILY DEVELOP	(i)	171,715	10,532	0	83,919	2,858	269,024	0
	(ii)	0	0	0	0	0	0	0
JAMES LOWE DIR PORTFOLIO MANAGEMENT	(i)	151,365	0	0	45,644	10,832	207,841	0
	(ii)	0	0	0	0	0	0	0
ALAN I GOLDSTEIN DIR MULTIFAMILY DIVISION	(i)	169,399	545	0	12,518	12,570	195,032	0
	(ii)	0	0	0	0	0	0	0
STANIA ROMAIN DIR HUMAN RESOURCES	(i)	129,226	9,609	0	9,100	7,071	155,006	0
	(ii)	0	0	0	0	0	0	0
REGINA JACKSON SENIOR CONTROLLER	(i)	139,509	3,170	0	9,729	9,278	161,686	0
	(ii)	0	0	0	0	0	0	0
BIBI Z KIRBY CONTROLLER	(i)	131,051	4,500	0	9,699	10,811	156,061	0
	(ii)	0	0	0	0	0	0	0
JENNIFER ENDO DIRECTOR, RESIDENT SERVIC	(i)	143,808	1,583	0	10,222	12,530	168,143	0
	(ii)	0	0	0	0	0	0	0

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization
AHC INC

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

2018

Open to Public Inspection

Employer identification number

54-1026365

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	THE BOARD OF DIRECTORS IS COMPOSED OF UP TO EIGHTEEN MEMBERS THE OFFICERS INCLUDE PRESIDENT OF THE CORPORATION, CHAIR, VICE CHAIR, ONE OR MORE VICE-PRESIDENTS, TREASURER, SECRETARY AND OTHER OFFICERS IF NECESSARY THE EXECUTIVE COMMITTEE, COMPOSED OF CHAIR, VICE CHAIR, PRESIDENT AND TWO OTHER MEMBERS OF THE BOARD, HAS AUTHORITY BETWEEN BOARD MEETINGS TO MAKE DECISIONS ON ITS OWN SUBSEQUENTLY, EACH BOARD MEMBER SHALL BE PROMPTLY NOTIFIED OF SUCH ACTION OTHER COMMITTEES, ESTABLISHED BY THE BOARD, ARE COMPOSED OF MEMBERS OF THE BOARD OF DIRECTORS IN ADDITION TO THE BOARD OF DIRECTORS, THE ORGANIZATION IS COMPOSED OF MEMBERS THERE ARE THREE LEVELS OF MEMBERSHIP BASED ON THE AMOUNT OF ANNUAL DUES PAID EACH MEMBER HAS THE SAME RIGHTS AND PRIVILEGES AND IS ENTITLED TO ONE VOTE THE LESSER OF 25 MEMBERS OR 10% OF THE MEMBERSHIP, MAY, BY WRITTEN NOTICE, REQUIRE THE BOARD OF DIRECTORS TO ORDER A SPECIAL MEETING OF THE MEMBERS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	AHC HAS BETWEEN 300-400 MEMBERS THE MEMBERS PARTICIPATE IN THE GOVERNANCE OF THE ORGANIZATION IN THEIR CAPACITY TO ELECT THE BOARD OF DIRECTORS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	AHC HAS BETWEEN 300-400 MEMBERS THE MEMBERS PARTICIPATE IN THE GOVERNANCE OF THE ORGANIZA TION IN THEIR CAPACITY TO ELECT THE BOARD OF DIRECTORS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE DRAFT TAX RETURN IS REVIEWED BY THE CORPORATE OFFICERS WHO RESOLVE ANY QUESTIONS BEFORE FINALIZING THE RETURN. A COPY OF THE FINALIZED 990 IS PROVIDED TO THE FULL BOARD OF DIRECTORS BEFORE FILING WITH THE IRS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	AHC, INC MONITORS AND ENFORCES COMPLIANCE THROUGH CONTRACTS MANAGEMENT OR SELF DISCLOSURE , CONFLICTS ARE IDENTIFIED AND RELATED PARTIES ARE EXCLUDED FROM THE DECISION MAKING PROCE SS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	A COMPENSATION STUDY ANALYSIS IS PERFORMED FOR TOP POSITIONS A COMPENSATION CONSULTANT WAS USED TO DETERMINE MARKET RATE COMPENSATION AS RELATED TO JOB DESCRIPTIONS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THESE DOCUMENTS ARE AVAILABLE UPON REQUEST

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX, LINE 16 OCCUPANCY EXPENSE	MODEL UNIT \$ 17,070 UTILITIES 1,247,361 REPAIRS AND MAINTENANCE 759,938 REAL ESTATE TAXES 771,844 PROPERTY AND LIABILITY INSURANCE 300,464 CONTRACTS 869,037 MORTGAGE INTEREST EXPEN SE 3,894,677 CONDOMINIUM FEES 102,015 _____ TOTAL OCCUPANCY EXPENSE \$ 7,962,406

990 Schedule O, Supplemental Information

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

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493318059429

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
AHC INC

Employer identification number
54-1026365

Part I Identification of Disregarded Entities

Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

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

Part II Identification of Related Tax-Exempt Organizations

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)WESTOVER HOUSING ASSOCIATES INC 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 54-1346831	REAL ESTATE	VA	501(C)(3)	LINE 12A, I	AHC INC	Yes	
(2)LEE GARDENS HOUSING CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 54-1516042	REAL ESTATE	VA	501(C)(3)	LINE 10	AHC INC	Yes	
(3)KEY BOULEVARD HOUSING DEVELOPMENT CORP 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 54-1251222	REAL ESTATE	VA	501(C)(3)	LINE 10	AHC INC	Yes	
(4)JORDAN MANOR HOUSING CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 54-1528338	REAL ESTATE	VA	501(C)(3)	LINE 7	AHC INC	Yes	
(5)GREATER BALTIMORE AHC INC 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 33-1084573	REAL ESTATE	VA	501(C)(3)	LINE 12A, I	AHC INC	Yes	
(6)AHC SERVICE CORP 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 54-1192975	REAL ESTATE	VA	501(C)(3)	LINE 10	AHC INC	Yes	
(7)AHC PRINCE GEORGES 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 46-1068345	REAL ESTATE	VA	501(C)(3)	LINE 10	AHC INC	Yes	

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

See Additional Data Table

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

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

See Additional Data Table

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a Yes	
b Gift, grant, or capital contribution to related organization(s)	1b	No
c Gift, grant, or capital contribution from related organization(s)	1c Yes	
d Loans or loan guarantees to or for related organization(s)	1d Yes	
e Loans or loan guarantees by related organization(s)	1e	No
f Dividends from related organization(s)	1f	No
g Sale of assets to related organization(s)	1g	No
h Purchase of assets from related organization(s)	1h	No
i Exchange of assets with related organization(s)	1i	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k Lease of facilities, equipment, or other assets from related organization(s)	1k Yes	
l Performance of services or membership or fundraising solicitations for related organization(s)	1l Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m Yes	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	No
o Sharing of paid employees with related organization(s)	1o	No
p Reimbursement paid to related organization(s) for expenses	1p	No
q Reimbursement paid by related organization(s) for expenses	1q Yes	
r Other transfer of cash or property to related organization(s)	1r Yes	
s Other transfer of cash or property from related organization(s)	1s Yes	

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) KEY BOULEVARD HOUSING DEVELOPMENT CORP	A	60,500	FAIR MARKET VALUE
(2) AHC LIMITED PARTNERSHIP -3	A	383,433	FAIR MARKET VALUE
(3) AHC LIMITED PARTNERSHIP -2	A	127,928	FAIR MARKET VALUE
(4) FHG LIMITED PARTNERSHIP	A	15,309	FAIR MARKET VALUE
(5) WESTOVER HOUSING ASSOCIATES INC	C	2,125,578	FAIR MARKET VALUE

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.

[illegible]

Part VII **Supplemental Information**

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

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 54-1026365
Name: AHC INC

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Total income	(e) End-of-year assets	(f) Direct Controlling Entity
(1) AHC ASHMORE AT GERMANTOWN LLC 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 26-4020782	RENTAL REAL ESTATE	VA	378,660	4,842,438	AHC INC
(1) AHC CARMEL CROSSING LAND LLC 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 47-3714569	RENTAL REAL ESTATE	VA	0	4,187,357	AHC INC
(2) AHC GATEWAY COMMONS LLC 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 26-4693224	RENTAL REAL ESTATE	VA	0	0	AHC INC
(3) AHC HAMPTONS HOUSING MANAGER LLC 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 45-4382019	RENTAL DEVELOPMENT	VA	270,536	-7,755,876	AHC INC
(4) AHC LEAMAN FARMS LLC 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 26-4748705	RENTAL DEVELOPMENT	VA	0	0	AHC INC
(5) AHC-LW-CP LLC 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 47-3172184	RENTAL DEVELOPMENT	DC	-9	-921	AHC INC
(6) AHC MANAGEMENT LLC 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 54-2007447	RENTAL MANAGEMENT	VA	3,600,570	2,783,886	AHC INC
(7) AHC MARYLAND HOME OWNERSHIP LLC 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 26-4512015	RENTAL DEVELOPMENT	VA	0	0	AHC INC
(8) AHC SERRANO LLC 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 46-5260690	RENTAL REAL ESTATE	VA	4,971,068	51,376,460	AHC INC
(9) AHC SPECTRUM LLC 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 47-1974088	RENTAL REAL ESTATE	VA	1,823,911	20,167,554	AHC INC
(10) FILLMORE LAND HOLDINGS LLC 2231 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22202 47-5128489	RENTAL REAL ESTATE	VA	-470,699	0	AHC INC
(11) HOMES FOR SILVER SPRING LLC 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 75-3149679	RENTAL REAL ESTATE	VA	3,064,510	20,395,994	AHC INC
(12) AHC LAFAYETTE LLC 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 81-3430630	RENTAL REAL ESTATE	VA	-204,665	167,686	AHC INC
(13) BERKELEY HOUSING LIMITED PARTNER LLC 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 82-2619880	RENTAL REAL ESTATE	VA	0	1,042,943	AHC INC
(14) FILLMORE HOUSING LLC 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 46-5497184	RENTAL REAL ESTATE	VA	0	0	AHC INC
(15) SAINT JAMES PLAZA LAND LLC 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 81-4389579	RENTAL REAL ESTATE	VA	237,550	2,852,495	AHC INC
(16) BUCKNELL 2231 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22202 82-4248123	RENTAL REAL ESTATE	VA	487,373	6,137,013	AHC INC

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) AHC HAMPTONS LIMITED PARTNERSHIP 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 37-1663574	RENTAL REAL ESTATE	VA	AHC HAMPTONS HOUSING MANAGER LLC	RELATED	200,610	90,804,881		No			No	99 990 %
(1) AHC LIMITED PARTNERSHIP - 1 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 54-1981577	RENTAL REAL ESTATE	VA	BERKLEY HOUSING CORPORATION	RELATED	1,555,028	269,015		No			No	0 010 %
(2) AHC LIMITED PARTNERSHIP - 2 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 54-2039704	RENTAL REAL ESTATE	VA	COLONIAL VILLAGE HOUSING CORPORATION	RELATED	460	6,464,201		No			No	0 010 %
(3) AHC LIMITED PARTNERSHIP - 3 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 54-2039705	RENTAL REAL ESTATE	VA	ARLINGTON VIEW TERRACE HOUSING CORPORATION	RELATED	-11	5,077,241		No			No	0 010 %
(4) AHC LIMITED PARTNERSHIP - 5 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 26-0044168	RENTAL REAL ESTATE	VA	HUNTER'S PARK AT CHERRYDALE CORPORATION	RELATED	-274,209	1,363,500		No			No	0 010 %
(5) AHC LIMITED PARTNERSHIP - 6 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 20-1390221	RENTAL REAL ESTATE	VA	HARVEY HALL MANAGEMENT CORPORATION	RELATED	-11	1,713,866		No			No	
(6) AHC LIMITED PARTNERSHIP - 7 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 20-1390255	RENTAL REAL ESTATE	VA	WOODBURY NORTH HOUSING CORPORATION	RELATED	-23	9,568,184		No			No	
(7) AHC LIMITED PARTNERSHIP - 8 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 75-3165018	RENTAL REAL ESTATE	VA	LANDSDOWNE HOUSING CORPORATION	RELATED	-21	796,040		No			No	0 010 %
(8) AHC LIMITED PARTNERSHIP - 10 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 20-1907282	RENTAL REAL ESTATE	VA	NEW GATES CORPORATION	RELATED	-167	4,078,031		No			No	0 010 %
(9) AHC LIMITED PARTNERSHIP - 11 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 20-1907309	RENTAL REAL ESTATE	VA	HISTORIC GATES CORPORATION	RELATED	-48	647,361		No			No	0 010 %
(10) AHC LIMITED PARTNERSHIP - 15 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 16-1750986	RENTAL REAL ESTATE	VA	SUNSET PARK HOUSING CORPORATION	RELATED	-33	3,980,159		No			No	
(11) AHC LIMITED PARTNERSHIP - 20 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 26-4307815	RENTAL REAL ESTATE	VA	JORDAN HOUSING CORPORATION	RELATED		372,600		No			No	0 010 %
(12) AHC LIMITED PARTNERSHIP - 26 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 47-3369874	RENTAL REAL ESTATE	VA	FILLMORE AVENUE HOUSING CORPORATION	RELATED		2,032,664		No			No	0 010 %
(13) AHC LIMITED PARTNERSHIP - 27 - 4 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 82-2626881	RENTAL REAL ESTATE	VA	GLEBE ROAD 4 HOUSING CORPORATION	RELATED	-28	5,005,429		No			No	0 010 %
(14) AHC LIMITED PARTNERSHIP - 27 - 9 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 36-4873460	RENTAL REAL ESTATE	VA	GLEBE ROAD 9 HOUSING CORPORATION	RELATED	-227,357	3,106,830		No			No	0 010 %

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(16) AHC LIMITED PARTNERSHIP - 28 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 82-2589353	RENTAL REAL ESTATE	VA	CV HOUSING CORPORATION	RELATED		4,778,288		No			No	
(1) BROOK RUN SOMERSET LLC PO BOX 79 STERLING, VA 20617 30-0423413	RENTAL REAL ESTATE	VA	BROOK RUN HOUSING CORPORATION	RELATED	-865	169,218		No			No	0 010 %
(2) FHG LIMITED PARTNERSHIP 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 22-3494087	RENTAL REAL ESTATE	VA	FORT HENRY MANAGEMENT CORPORATION	RELATED	-5,202	434,653		No			No	1 000 %
(3) KATE'S TRACE LP 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 54-1995665	RENTAL REAL ESTATE	VA	KATE'S TRACE HOUSING CORPORATION	RELATED	-11	2,436,759		No			No	0 010 %
(4) NAUCK DEVELOPMENT PARTNERS-1 LP 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 26-1931307	RENTAL REAL ESTATE	VA	SHIRLINGTON ROAD DEVELOPMENT CORPORATION	RELATED	-40	194,851		No			No	0 010 %
(5) PC PHASE 4 LLC 175 COCHRANE DRIVE 201 ANNAPOLIS, MD 21401 52-2331064	RENTAL REAL ESTATE	VA	WOODS AT VICTORIA PARK HOUSING CORPORATION	RELATED		-160		No			No	10 000 %
(6) PERSHING DRIVE ASSOCIATES LP 1415 NORTH TAFT STREET ARLINGTON, VA 22201 54-1943367	RENTAL REAL ESTATE	VA	VILLAGES OF BUCKINGHAM MANAGEMENT CORPORATION	RELATED	1,363,692	10,220,556		No			No	50 000 %
(7) ROYAL OAKS ASSOCIATES LP 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 52-2241056	RENTAL REAL ESTATE	MD	ROYAL OAKS MANAGEMENT CORPORATION	RELATED	-318,480	931,008		No			No	60 400 %
(8) TRIANGLE PARTNERS LP 8521 SIX FORKS ROAD RALEIGH, NC 27615 54-2049487	RENTAL REAL ESTATE	VA	OLD TRIANGLE HOUSING CORPORATION	RELATED		6,560		No			No	0 010 %
(9) VIRGINIA GARDENS ASSOCIATES LP 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 54-1744084	RENTAL REAL ESTATE	VA	VIRGINIA GARDENS MANAGEMENT CORPORATION	RELATED	820	376,705		No			No	1 000 %

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1) ARLINGTON VIEW TERRACE HOUSING CORP 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 54-2051429	INVESTMENT	VA	AHC INC	C		648,884	100 000 %		No
(1) BERKELEY HOUSING CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 54-2006956	INVESTMENT	VA	AHC INC	C	1,556,359	537,469	100 000 %		No
(2) BROOK RUN HOUSING CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 80-0142259	INVESTMENT	VA	AHC INC	C	-865	169,218	100 000 %		No
(3) COLONIAL VILLAGE HOUSING CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 54-2051427	INVESTMENT	VA	AHC INC	C	47	660,696	100 000 %		No
(4) EAST REED HOUSING CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 46-2986327	INVESTMENT	VA	AHC INC	C	7,900	7,900	79 000 %		No
(5) FILLMORE AVENUE HOUSING CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 47-3185519	INVESTMENT	VA	AHC INC	C			100 000 %		No
(6) FORT HENRY MANAGEMENT CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 54-1841275	INVESTMENT	VA	AHC INC	C	1,776	-30,334	100 000 %		No
(7) HARVEY HALL MANAGEMENT CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 20-1390133	INVESTMENT	VA	AHC INC	C		573,492	100 000 %		No
(8) HISTORIC GATES OF BALLSTON CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 20-1907212	INVESTMENT	VA	AHC INC	C	4	-265	100 000 %		No
(9) HOLLYBROOKE HOUSING CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 26-0129780	INVESTMENT	VA	AHC INC	C	1	-794,452	76 000 %		No
(10) HOLLYBROOKE II HOUSING CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 56-2573803	INVESTMENT	VA	AHC INC	C	657,965	331,983	76 000 %		No
(11) HUNTER'S PARK AT CHERRYDALE CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 26-0044188	INVESTMENT	VA	AHC INC	C	74,890	-973,680	100 000 %		No
(12) JORDAN HOUSING CORPOATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 26-3946038	INVESTMENT	VA	AHC INC	C			100 000 %		No
(13) KATE'S TRACE HOUSING CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 54-2026416	INVESTMENT	VA	AHC INC	C		495,066	100 000 %		No
(14) LANDSDOWNE HOUSING CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 75-3165020	INVESTMENT	VA	AHC INC	C	22,704	133,530	100 000 %		No

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust									
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(16) MAGNOLIA COMMONS HOUSING CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 45-3454512	INVESTMENT	VA	AHC INC	C	1	-882	79 000 %		No
(1) NAUCK DEVELOPMENT MANAGEMENT CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 26-1926673	INVESTMENT	VA	AHC INC	C			51 000 %		No
(2) NEW GATES CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 20-1907164	INVESTMENT	VA	AHC INC	C	523,186	3,893,420	100 000 %		No
(3) NEW WESTOVER CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 26-0550154	INVESTMENT	VA	AHC INC	C	2	23,349	75 000 %		No
(4) OLD TRIANGLE HOUSING CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 54-2026414	INVESTMENT	VA	AHC INC	C			100 000 %		No
(5) ROYAL OAKS MANAGEMENT CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 52-2229011	INVESTMENT	VA	AHC INC	C		-1,196,676	100 000 %		No
(6) THE SHELL HOUSING CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 45-4798395	INVESTMENT	VA	AHC INC	C	9,360	12,378	79 000 %		No
(7) SHELTON DEVELOPMENT CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 16-1750981	INVESTMENT	VA	AHC INC	C		-65,379	75 000 %		No
(8) SHIRLINGTON ROAD DEVELOPMENT CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 26-1931307	INVESTMENT	VA	AHC INC	C	-2	71,395	100 000 %		No
(9) SUNSET PARK HOUSING CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 16-1750971	INVESTMENT	VA	AHC INC	C	1	-778	100 000 %		No
(10) TRIPOD HOUSING CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 27-3474203	INVESTMENT	VA	AHC INC	C		-35	79 000 %		No
(11) VILLAGES OF BUCKINGHAM MANAGEMENT CORP 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 54-1820967	INVESTMENT	VA	AHC INC	C	1,363,692	-15,468,323	100 000 %		No
(12) VIRGINIA GARDENS MANAGEMENT CORP 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 54-1744087	INVESTMENT	VA	AHC INC	C	147,510	-914,860	79 000 %		No
(13) WOODBURY PARK APARTMENTS HOUSING CORPORATION 2231 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22202 46-5431167	INVESTMENT	VA	AHC INC	C	20,166	19,601	100 000 %		No
(14) WOODBURY NORTH CONDO DEVELOPMENT INC 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 20-1390186	INVESTMENT	VA	AHC INC	C	921		100 000 %		No

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(31) WOODBURY NORTH HOUSING CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 72-1525802	INVESTMENT	VA	AHC INC	C	-2	-761	100 000 %		No
(1) WOODS AT VICTORIA PARK HOUSING CORP 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 30-0180524	INVESTMENT	VA	AHC INC	C		-160	100 000 %		No
(2) GLEBE ROAD 4 HOUSING CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 82-2438342	INVESTMENT	VA	AHC INC	C			100 000 %		No
(3) GLEBE ROAD 9 HOUSING CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 81-5465806	INVESTMENT	VA	AHC INC	C			100 000 %		No
(4) CV HOUSING CORPORATION 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 82-2553662	INVESTMENT	VA	AHC INC	C	1,836	1,836	100 000 %		No
(5) AHC HAMPTONS LIMITED PARTNER LLC 2230 NORTH FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22201 81-3418087	INVESTMENT	VA	AHC INC	C	6	162	100 000 %		No