

Return of Organization Exempt From Income Tax

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

2018

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

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

A For the 2018 calendar year, or tax year beginning **JUL 1, 2018** and ending **JUN 30, 2019**

B Check if applicable:	C Name of organization PACIFIC HOUSE, INC.	D Employer identification number 06-1144355
<input type="checkbox"/> Address change	Doing business as	E Telephone number 203-348-2792
<input type="checkbox"/> Name change	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 137 HENRY STREET 205	
<input type="checkbox"/> Initial return	City or town, state or province, country, and ZIP or foreign postal code STAMFORD, CT 06902	G Gross receipts \$ 4591506.
<input type="checkbox"/> Final return/terminated	F Name and address of principal officer: RAFAEL PAGAN, JR. 137 HENRY STREET, STAMFORD, CT 06902	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Amended return		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
<input type="checkbox"/> Application pending	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	H(c) Group exemption number ▶
J Website: ▶ WWW.PACIFICHOUSE.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1985 M State of legal domicile: CT

Part I Summary		
1	Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O	
2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
3	Number of voting members of the governing body (Part VI, line 1a)	3 11
4	Number of independent voting members of the governing body (Part VI, line 1b)	4 11
5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5 56
6	Total number of volunteers (estimate if necessary)	6 0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a 0.
b	Net unrelated business taxable income from Form 990-T, line 38	7b 0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 2296373. Current Year 3000206.
	9 Program service revenue (Part VIII, line 2g)	440643. 536250.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1165. 476.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	950925. 771022.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3689106. 4307954.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0. 0.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1895355. 2100991.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0. 0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 263271.	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1628153. 1476568.	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3523508. 3577559.	
19 Revenue less expenses. Subtract line 18 from line 12	165598. 730395.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 12647271. End of Year 14478019.
	21 Total liabilities (Part X, line 26)	9032633. 10132986.
	22 Net assets or fund balances. Subtract line 21 from line 20	3614638. 4345033.

Part II Signature Block				
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.				
Sign Here	Signature of officer RAFAEL PAGAN, JR., EXECUTIVE DIRECTOR	Date		
Paid Preparer Use Only	Print/Type preparer's name HAIMS, BUZZEO & CO. P.C.	Preparer's signature	Date 10/31/19	Check <input type="checkbox"/> if self-employed PTIN P00966355
	Firm's name ▶ HAIMS, BUZZEO & COMPANY, P.C.	Firm's EIN ▶ 06-1135365		
	Firm's address ▶ 666 SUMMER STREET STAMFORD, CT 06901	Phone no. (203) 324-5117		

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: PROVIDES EMERGENCY SHELTER AND PERMANENT SUPPORTIVE HOUSING WITH AN ARRAY OF SERVICES SUCH AS RECOVERY, DROP-IN CENTER, AND YOUNG ADULT SERVICES.

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

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

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 \$ 1566489. including grants of \$) (Revenue \$ 2806456.) EMERGENCY SHELTER-IS AN 82 BED FACILITY THAT IS OPEN 24/7,365 DAYS A YEAR PROVIDING A CLEAN SUPPORTIVE ENVIRONMENT,MEALS,AND SUPPORT SERVICES.PACIFIC HOUSE HAS A COMPREHENSIVE DELIVERY OF SERVICES WHICH INCLUDES CASE MANAGEMENT,RECOVERY PROGRAM & PACIFIC HOUSE HAS A 82 BED LOW BARRIER EMERGENCY SHELTER FOR MEN WITH SPECIALIZED SERVICES FOR YOUNG ADULTS (AGES 18 - 24), RECOVERY PROGRAM FOR INDIVIDUALS SUBSTANCE WITH ABUSE AND UNEMPLOYMENT WITH EMPHASIS PLACED ON DIVERSION, RAPID REHOUSING, HOUSING FOCUS CASE MANAGEMENT SERVICES AND HEALTH SERVICES. PRIMARY FOCUS IS TO HOUSE CLIENTS AS QUICKLY AS POSSIBLE.

4b (Code:) (Expenses \$ 1244959. including grants of \$) (Revenue \$ 1253482.) PERMANENT HOUSING-THE AGENCY PROVIDES,PERMANENT,DEEPLY AFFORDABLE,SUPPORTIVE HOUSING FOR HOMELESS INDIVIDUALS,WITH HOMES LOCATED IN BOTH STAMFORD AND NORWALK. PRIMARY FOCUS HAS BEEN THE DEVELOPMENT OF SMALL BUILDINGS INTERGRATED WITHIN THE COMMUNITY WITH MOST UNITS HAVING A BATHROOM IN EVERY BEDROOM TO MAXIMIZE PRIVACY.CASE MANAGEMENT SERVICES ARE FOR ALL TENANTS.IN THE LAST 4 YEARS PACIFIC HOUSE HAS DEVELOPED 5 NEW PROPERTIES LEADING TO THE DEVELOPMENT OF 25 DEEPLY AFFORDABLE UNITS IN STAMFORD AND ANOTHER 25 UNITS IN NORWALK. ITS PRIORITY HAS BEEN HOUSING THE CHRONIC HOMELESS.

HOUSING: PACIFIC HOUSE, INC. CURRENTLY HAS 55 TENANTS IN STAMFORD, CT, PLUS 16 TENANTS IN NORWALK, CT, FOR 72 UNITS FOR DEEPLY AFFORDABLE

4c (Code:) (Expenses \$ 201942. including grants of \$) (Revenue \$ 0.) HOUSING DEVELOPMENT-THE AGENCY IS COMMITTED TO DEVELOP DEEPLY AFFORDABLE HOUSING FOR THE HOMELESS.WE CURRENTLY HAVE 12 UNITS IN NORWALK AND 7 UNITS IN STAMFORD UNDER DEVELOPMENT.

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

4e Total program service expenses 3013390.

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	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? <i>If "Yes," complete Schedule C, Part II</i>		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
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		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d 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? If "Yes," complete Schedule L, Part I		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
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? If "Yes," complete Schedule L, Part II		X
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? If "Yes," complete Schedule L, Part III		X
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):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
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? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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

Table with columns for question number, question text, and Yes/No checkboxes. Includes questions 2a through 16 regarding employee reporting, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (11); 1b Enter the number of voting members included in line 1a, above, who are independent (11); 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? (X); 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? (X); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (X); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (X); 6 Did the organization have members or stockholders? (X); 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? (X); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (X); 8a The governing body? (X); 8b Each committee with authority to act on behalf of the governing body? (X); 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 (X).

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

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

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CT
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[X] Own website [] Another's website [X] 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
PACIFIC HOUSE, INC - 203-406-0017
137 HENRY STREET, ROOM 205, STAMFORD, CT 06902

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- 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 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) ROBERT S. RIMMER DIRECTOR	4.00	X					0.	0.	0.	
(2) CHRIS TATE CHAIRMAN	6.00	X					0.	0.	0.	
(3) PETER C. RUGEN TREASURER	6.00	X					0.	0.	0.	
(4) BRENDAN J. O'ROURKE, ESQ. DIRECTOR	4.00	X					0.	0.	0.	
(5) BILL MONTANA DIRECTOR	4.00	X					0.	0.	0.	
(6) JANE PELLETIER DIRECTOR	4.00	X					0.	0.	0.	
(7) BRAD MAHANEY SECRETARY	6.00	X					0.	0.	0.	
(8) MARC MALLOY DIRECTOR	4.00	X					0.	0.	0.	
(9) LEE TERRELL DIRECTOR	4.00	X					0.	0.	0.	
(10) RAFAEL PAGAN JR. EXECUTIVE DIRECTOR	40.00	X					160246.	0.	0.	
(11) JAMES CALCAGNINI DIRECTOR	4.00	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below 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			
1b Sub-total							160246.	0.	0.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							160246.	0.	0.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

	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		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

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

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a			
	b	Membership dues	1b			
	c	Fundraising events	1c			
	d	Related organizations	1d			
	e	Government grants (contributions)	1e	1904240.		
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	1095966.		
	g	Noncash contributions included in lines 1a-1f: \$		181227.		
	h	Total. Add lines 1a-1f		3000206.		
	Program Service Revenue	2 a	RENTAL INCOME	Business Code	536250.	536250.
			624200			
b						
c						
d						
e						
f		All other program service revenue				
g	Total. Add lines 2a-2f		536250.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		74.	74.	
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
	6 a	Gross rents	(i) Real			
		Less: rental expenses	(ii) Personal			
		Rental income or (loss)				
		Net rental income or (loss)				
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	31970.		
		Less: cost or other basis and sales expenses	(ii) Other	31568.		
		Gain or (loss)		402.		
		Net gain or (loss)		402.	402.	
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a	1023006.		
		Less: direct expenses	b	251984.		
		Net income or (loss) from fundraising events		771022.		771022.
	9 a	Gross income from gaming activities. See Part IV, line 19	a			
Less: direct expenses		b				
Net income or (loss) from gaming activities						
10 a	Gross sales of inventory, less returns and allowances	a				
	Less: cost of goods sold	b				
	Net income or (loss) from sales of inventory					
Miscellaneous Revenue			Business Code			
11 a						
	b					
	c					
	d	All other revenue				
	e	Total. Add lines 11a-11d				
12	Total revenue. See instructions		4307954.	536726.	0.	771022.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
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	1641726.	1299796.	133657.	208273.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	301133.	255878.	30833.	14422.
10 Payroll taxes	158132.	130787.	10711.	16634.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	31416.	15208.	15747.	461.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	349998.	332498.	14000.	3500.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	24613.	11120.	12784.	709.
20 Interest	51840.	51840.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	377469.	374278.	3191.	
23 Insurance	95421.	92005.	1708.	1708.
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 CLIENT SUPPORT-FOOD	181741.	175307.	4907.	1527.
b CONSULTANTS	164792.	125110.	39418.	264.
c PROGRAM AND HOUSEHOLD	87447.	80845.	6410.	192.
d PRO-BONO LEGAL	29727.	29727.	0.	0.
e All other expenses	82104.	38991.	27532.	15581.
25 Total functional expenses. Add lines 1 through 24e	3577559.	3013390.	300898.	263271.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year		
Assets	1	Cash - non-interest-bearing	1580827.	1	763606.	
	2	Savings and temporary cash investments	9267.	2	17060.	
	3	Pledges and grants receivable, net	1672570.	3	2334371.	
	4	Accounts receivable, net	5590.	4	10038.	
	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 instr). Complete Part II of Sch L		6		
	7	Notes and loans receivable, net		7		
	8	Inventories for sale or use		8		
	9	Prepaid expenses and deferred charges	44794.	9	41180.	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	14737780.		
	b	Less: accumulated depreciation	10b	3444777.		
				9274448.	10c	11293003.
	11	Investments - publicly traded securities		11		
	12	Investments - other securities. See Part IV, line 11		12		
	13	Investments - program-related. See Part IV, line 11		13		
	14	Intangible assets	19775.	14	18761.	
15	Other assets. See Part IV, line 11	40000.	15	0.		
16	Total assets. Add lines 1 through 15 (must equal line 34)	12647271.	16	14478019.		
Liabilities	17	Accounts payable and accrued expenses	345108.	17	272737.	
	18	Grants payable		18		
	19	Deferred revenue	4143293.	19	4621160.	
	20	Tax-exempt bond liabilities		20		
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22	Loans and other payables to 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	4544232.	23	5239089.	
	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		25		
	26	Total liabilities. Add lines 17 through 25	9032633.	26	10132986.	
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	3067770.	27	3302777.	
	28	Temporarily restricted net assets	546868.	28	1042256.	
	29	Permanently restricted net assets		29		
	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	3614638.	33	4345033.		
34	Total liabilities and net assets/fund balances	12647271.	34	14478019.		

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4307954.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3577559.
3	Revenue less expenses. Subtract line 2 from line 1	3	730395.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3614638.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain 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	4345033.

Part XII Financial Statements and Reporting

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

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

Form 990 (2018)

SCHEDULE A
(Form 990 or 990-EZ)

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 instructions and the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization: **PACIFIC HOUSE, INC.**
Employer identification number: **06-1144355**

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 **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

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

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization 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 grants.")	2309298.	2636667.	2780337.	2738181.	3536858.	14001341.
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	2309298.	2636667.	2780337.	2738181.	3536858.	14001341.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						14001341.

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	2309298.	2636667.	2780337.	2738181.	3536858.	14001341.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources					74.	74.
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						14001415.
12 Gross receipts from related activities, etc. (see instructions)					12	4169908.
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	100.00	%
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	99.97	%
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 in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	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>		
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>		
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>		
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>		
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>		
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>		
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>		
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>		
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>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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>		
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>		
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>		
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>		
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 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
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? If "Yes" to a, b, or c, provide detail in Part VI.		

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? 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.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

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)? 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).		

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? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

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? 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.		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
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? Provide details in Part VI.		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
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 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. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result 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			

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.)

Multiple horizontal lines for supplemental information.

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

Name of the organization

PACIFIC HOUSE, INC.

Employer identification number

06-1144355

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

PACIFIC HOUSE, INC.

06-1144355

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 10650.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 16000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	FOUNDATION 137 HENRY STREET STAMFORD, CT 06902	\$ 7100.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	FOUNDATION 137 HENRY STREET STAMFORD, CT 06902	\$ 10000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	FOUNDATION 137 HENRY STREET STAMFORD, CT 06902	\$ 35000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	FOUNDATION 137 HENRY STREET STAMFORD, CT 06902	\$ 26900.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

PACIFIC HOUSE, INC.

06-1144355

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 15000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	CORPORATION 137 HENRY STREET STAMFORD, CT 06902	\$ 10000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 11350.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 5399.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	FOUNDATION 137 HENRY STREET STAMFORD, CT 06902	\$ 20000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	FOUNDATION 137 HENRY STREET STAMFORD, CT 06902	\$ 12000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

PACIFIC HOUSE, INC.

06-1144355

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 5000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	FOUNDATION 137 HENRY STREET STAMFORD, CT 06902	\$ 5000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
15	CORPORATION 137 HENRY STREET STAMFORD, CT 06902	\$ 5000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
16	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 9000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
17	FOUNDATION 137 HENRY STREET STAMFORD, CT 06902	\$ 11000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
18	FOUNDATION 137 HENRY STREET STAMFORD, CT 06902	\$ 10000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization PACIFIC HOUSE, INC.	Employer identification number 06-1144355
--	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	FOUNDATION 137 HENRY STREET STAMFORD, CT 06902	\$ 5000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
20	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 10000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
21	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 5000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
22	FOUNDATION 137 HENRY STREET STAMFORD, CT 06902	\$ 15000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
23	CORPORATION 137 HENRY STREET STAMFORD, CT 06902	\$ 33333.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
24	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 5500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

PACIFIC HOUSE, INC.

06-1144355

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 5500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
26	FOUNDATION 137 HENRY STREET STAMFORD, CT 06902	\$ 15000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
27	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 10000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
28	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 5000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
29	FOUNDATION 137 HENRY STREET STAMFORD, CT 06902	\$ 5000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
30	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 5000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization PACIFIC HOUSE, INC.	Employer identification number 06-1144355
--	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31	<u>CORPORATION</u> <u>137 HENRY STREET</u> <u>STAMFORD, CT 06902</u>	\$ <u>35000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
32	<u>FOUNDATION</u> <u>137 HENRY STREET</u> <u>STAMFORD, CT 06902</u>	\$ <u>5000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
33	<u>FOUNDATION</u> <u>137 HENRY STREET</u> <u>STAMFORD, CT 06902</u>	\$ <u>5000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
34	<u>CORPORATION</u> <u>137 HENRY STREET</u> <u>STAMFORD, CT 06902</u>	\$ <u>10000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
35	<u>FOUNDATION</u> <u>137 HENRY STREET</u> <u>STAMFORD, CT 06902</u>	\$ <u>17000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
36	<u>INDIVIDUAL</u> <u>137 HENRY STREET</u> <u>STAMFORD, CT 06902</u>	\$ <u>6000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization PACIFIC HOUSE, INC.	Employer identification number 06-1144355
--	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
37	FOUNDATION 137 HENRY STREET STAMFORD, CT 06902	\$ 5000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
38	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 5000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
39	ANONYMOUS 137 HENRY STREET STAMFORD, CT 06902	\$ 5235.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
40	FOUNDATION 137 HENRY STREET STAMFORD, CT 06902	\$ 15000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
41	FOUNDATION 137 HENRY STREET STAMFORD, CT 06902	\$ 8000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
42	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 5000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

PACIFIC HOUSE, INC.

06-1144355

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
43	FOUNDATION 137 HENRY STREET STAMFORD, CT 06902	\$ 12000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
44	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 15000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
45	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 5000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
46	FOUNDATION 137 HENRY STREET STAMFORD, CT 06902	\$ 5000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
47	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 5750.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
48	FOUNDATION 137 HENRY STREET STAMFORD, CT 06902	\$ 5000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

PACIFIC HOUSE, INC.**06-1144355****Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
49	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 15215.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
50	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 22090.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
51	FOUNDATION 137 HENRY STREET STAMFORD, CT 06902	\$ 15000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
52	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 6000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
53	FOUNDATION 137 HENRY STREET STAMFORD, CT 06902	\$ 20000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
54	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 10000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization PACIFIC HOUSE, INC.	Employer identification number 06-1144355
--	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
55	<u>INDIVIDUAL</u> <u>137 HENRY STREET</u> <u>STAMFORD, CT 06902</u>	\$ <u>10780.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
56	<u>FOUNDATION</u> <u>137 HENRY STREET</u> <u>STAMFORD, CT 06902</u>	\$ <u>10000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
57	<u>INDIVIDUAL</u> <u>137 HENRY STREET</u> <u>STAMFORD, CT 06902</u>	\$ <u>105000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
58	<u>FOUNDATION</u> <u>137 HENRY STREET</u> <u>STAMFORD, CT 06902</u>	\$ <u>6000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
59	<u>INDIVIDUAL</u> <u>137 HENRY STREET</u> <u>STAMFORD, CT 06902</u>	\$ <u>5000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
60	<u>CORPORATION</u> <u>137 HENRY STREET</u> <u>STAMFORD, CT 06902</u>	\$ <u>8000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

PACIFIC HOUSE, INC.

06-1144355

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
61	FOUNDATION 137 HENRY STREET STAMFORD, CT 06902	\$ 5000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
62	CORPORATION 137 HENRY STREET STAMFORD, CT 06902	\$ 5000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
63	CORPORATION 137 HENRY STREET STAMFORD, CT 06902	\$ 30000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
64	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 5000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
65	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 8750.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
66	INDIVIDUAL 137 HENRY STREET STAMFORD, CT 06902	\$ 5500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization PACIFIC HOUSE, INC.	Employer identification number 06-1144355
--	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
67	<u>CORPORATION</u> <u>137 HENRY STREET</u> <u>STAMFORD, CT 06902</u>	\$ <u>15000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
68	<u>FOUNDATION</u> <u>137 HENRY STREET</u> <u>STAMFORD, CT 06902</u>	\$ <u>15000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
69	<u>FOUNDATION</u> <u>137 HENRY STREET</u> <u>STAMFORD, CT 06902</u>	\$ <u>8375.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
70	<u>FOUNDATION</u> <u>137 HENRY STREET</u> <u>STAMFORD, CT 06902</u>	\$ <u>5000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
71	<u>FOUNDATION</u> <u>137 HENRY STREET</u> <u>STAMFORD, CT 06902</u>	\$ <u>25000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
72	<u>FOUNDATION</u> <u>137 HENRY STREET</u> <u>STAMFORD, CT 06902</u>	\$ <u>6000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization PACIFIC HOUSE, INC.	Employer identification number 06-1144355
--	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
73	<u>FOUNDATION</u> <u>137 HENRY STREET</u> <u>STAMFORD, CT 06902</u>	\$ <u>7000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
74	<u>FOUNDATION</u> <u>137 HENRY STREET</u> <u>STAMFORD, CT 06902</u>	\$ <u>80000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
75	<u>ANONYMOUS</u> <u>137 HENRY STREET</u> <u>STAMFORD, CT 06902</u>	\$ <u>60000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization PACIFIC HOUSE, INC.	Employer identification number 06-1144355
--	---

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization PACIFIC HOUSE, INC.	Employer identification number 06-1144355
--	---

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—			
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
—			
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
—			
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
—			
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization

PACIFIC HOUSE, INC.

Employer identification number

06-1144355

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?		<input type="checkbox"/> Yes <input type="checkbox"/> No
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?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a 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	

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 Tax 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?

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)?

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	▶ \$ _____

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

Schedule D (Form 990) 2018

832051 10-29-18

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:

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

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

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

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	

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

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		1351117.		1351117.
b Buildings		12843598.	3072250.	9771348.
c Leasehold improvements				
d Equipment				
e Other		543065.	372527.	170538.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				11293003.

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.

Table with 3 columns: (a) Description of security or category, (b) Book value, (c) Method of valuation. Rows include (1) Financial derivatives, (2) Closely-held equity interests, (3) Other (A-H), and Total.

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.

Table with 3 columns: (a) Description of investment, (b) Book value, (c) Method of valuation. Rows (1) through (9) and Total.

Part IX Other Assets.

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

Table with 2 columns: (a) Description, (b) Book value. Rows (1) through (9) and Total.

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.

Table with 2 columns: (a) Description of liability, (b) Book value. Row 1 includes (1) Federal income taxes and rows (2) through (9). Total row at the bottom.

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.

Table with 5 main rows and sub-rows (a-e) for adjustments. Total revenue reported as 4307954.

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.

Table with 5 main rows and sub-rows (a-e) for adjustments. Total expenses reported as 3577559.

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.

Multiple horizontal lines provided for entering supplemental information.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

▶ 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 **PACIFIC HOUSE, INC.** Employer identification number **06-1144355**

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a** Mail solicitations
- b** Internet and email solicitations
- c** Phone solicitations
- d** In-person solicitations
- e** Solicitation of non-government grants
- f** Solicitation of government grants
- g** Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			

Total▶

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		GALA (event type)	ANNUAL APPEAL (event type)	(total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	499299.	471512.	52195.	1023006.
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	499299.	471512.	52195.	1023006.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	170810.	53796.	27378.	251984.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				251984.
	11 Net income summary. Subtract line 10 from line 3, column (d)				771022.

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d)					
8 Net gaming income summary. Subtract line 7 from line 1, column (d)					

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility 13a %

b An outside facility 13b %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2018

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization

PACIFIC HOUSE, INC.

Employer identification number

06-1144355

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"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (such as maid, chauffeur, chef)		
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	
3 Indicate which, if any, of the following the 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 type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations <input type="checkbox"/> Written employment contract <input type="checkbox"/> Compensation survey or study <input 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	X
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	X
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	X
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?	5a	X
b Any related organization?	5b	X
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	X
b Any related organization?	6b	X
If "Yes" on line 6a or 6b, describe in Part III.		
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7	X
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	X
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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

Schedule J (Form 990) 2018

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

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

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred 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				
(i) RAFAEL PAGAN JR. EXECUTIVE DIRECTOR	160246.	0.	0.	0.	0.	160246.	0.
(ii)	0.	0.	0.	0.	0.	0.	0.
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							

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.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization **PACIFIC HOUSE, INC.** Employer identification number **06-1144355**

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded				
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (<u>MEALS</u>)	X	1	151500.COST	
26	Other ▶ (<u>PRO BONO LEGA</u>)	X	1	29727.COST	
27	Other ▶ (_____)				
28	Other ▶ (_____)				

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

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

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

Name of the organization

PACIFIC HOUSE, INC.

Employer identification number

06-1144355

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE AGENCY PROVIDES EMERGENCY SHELTER & PERMANENT AFFORDABLE HOUSING TO HOMELESS & LOW INCOME INDIVIDUALS. PACIFIC HOUSE, INC. IS A SAFE AND CARING ENVIRONMENT THAT SERVES LOWER FAIRFIELD COUNTY BY PROVIDING HOUSING TO HOMELESS MEN, WOMEN & FAMILIES STRIVING TO OBTAIN PERMANENT SUPPORTIVE HOUSING AND SERVICES TAILORED TO MEET THEIR NEEDS, AND EMPOWERING PEOPLE TO HELP THEMSELVES ACHIEVE THEIR GREATEST LEVEL OF SELF-SUFFICIENCY."

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

HOUSING FOR HOMELESS INDIVIDUALS WITH PRIORITY FOR THOSE THAT ARE CHRONICALLY HOMELESS AND WITH A DISABILITY. CASE MANAGEMENT SERVICES IS AVAILABLE TO ALL TENANTS.

WE ALSO HAVE 8 UNITS OF TRANSITIONAL HOUSING FOR DMHAS CLIENTS WHO ARE HOMELESS.

FORM 990, PART VI, SECTION B, LINE 11B:

DRAFT 990 REVIEWED BY BOARD OF DIRECTORS BEFORE FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

CHAIRMAN REQUEST ALL BOARD MEMBERS TO REVIEW AND SIGN CONFLICT OF INTEREST POLICY ANNUALLY, IF ANY.

FORM 990, PART VI, SECTION B, LINE 15:

THE PROCESS FOR EXECUTIVE DIRECTOR REVIEW AND COMPENSATION IS AS FOLLOWS:

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

Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization PACIFIC HOUSE, INC.	Employer identification number 06-1144355
--	---

Ø SALARY DETERMINED BY CONTRACT WHICH WAS APPROVED BY CHAIR AND BOARD.

Ø THE BOARD CHAIR AND EXECUTIVE COMMITTEE DOES AN ANNUAL REVIEW OF PERFORMANCE.

Ø THEY RECOMMEND TO THE BOARD COMPENSATION FOR THAT TIME PERIOD.

Ø THE PROCESS HAS INCLUDED A CHAIR EVALUATION.

FORM 990, PART VI, SECTION C, LINE 19:

UPON REQUEST.

FORM 990, PART VII CONTACT ADDRESSES FOR OFFICERS, DIRECTORS, ETC:

RAFAEL PAGAN JR. - 137 HENRY STREET, STAMFORD, CT 06902

FORM 990, PART XII, LINE 2C:

THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

2018 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	BUILDINGS														
4	BATHROOM IMPROVEMENTS-STONE STREET	06/22/04	SL	39.00	MM16		9600.				9600.	2228.		246.	2474.
5	BUILDING-STONE STREET	04/12/07	SL	39.00	MM16		519817.				519817.	136622.		13329.	149951.
6	BUILDING-PACIFIC STREET	06/01/90	SL	31.50	16		1551326.				1551326.	1490919.		50801.	1541720.
7	IMPROVEMENTS-PACIFIC STREET	09/01/92	SL	31.50	16		1116.				1116.	905.		35.	940.
8	IMPROVEMENTS-PACIFIC STREET	01/01/95	SL	39.00	MM16		1135.				1135.	713.		29.	742.
9	IMPROVEMENTS-PACIFIC STREET	03/01/96	SL	39.00	MM16		870.				870.	599.		22.	621.
11	IMPROVEMENTS-PACIFIC STREET	07/01/96	SL	39.00	MM16		9943.				9943.	5599.		255.	5854.
12	IMPROVEMENTS-PACIFIC STREET	01/31/97	SL	39.00	MM16		8580.				8580.	5665.		220.	5885.
13	RENOVATION-PACIFIC STREET	04/01/99	SL	39.00	MM16		13678.				13678.	6757.		351.	7108.
14	IMPROVEMENTS-PACIFIC STREET	09/01/91	SL	31.50	16		3000.				3000.	2550.		95.	2645.
15	BUILDING-BERKELEY	11/01/99	SL	40.00	16		188300.				188300.	88729.		4708.	93437.
16	IMPROVEMENTS-BERKELEY	11/01/99	SL	40.00	16		373932.				373932.	175256.		8426.	183682.
22	IMPROVEMENTS-PACIFIC STREET	03/15/05	SL	39.00	MM16		115922.				115922.	41906.		2972.	44878.
23	BATHROOM	06/30/07	SL	39.00	MM16		105448.				105448.	30132.		2704.	32836.
24	IMPROVEMENTS-PACIFIC STREET	08/24/04	SL	39.00	MM16		1800.				1800.	636.		46.	682.
25	IMPROVEMENTS-PACIFIC STREET	08/24/04	SL	39.00	MM16		586.				586.	208.		15.	223.
26	IMPROVEMENTS-PACIFIC STREET	02/17/05	SL	39.00	MM16		900.				900.	307.		23.	330.

828111 04-01-18

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2018 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
27	IMPROVEMENTS-PACIFIC STREET	11/19/04	SL	39.00	MM	16	517.				517.	177.		13.	190.
28	IMPROVEMENTS-PACIFIC STREET	02/07/05	SL	39.00	MM	16	1703.				1703.	590.		44.	634.
29	IMPROVEMENTS-PACIFIC STREET	09/28/04	SL	39.00	MM	16	676.				676.	234.		17.	251.
30	IMPROVEMENTS-PACIFIC STREET-HVAC	06/30/07	SL	20.00	16		30868.				30868.	16923.		1543.	18466.
31	IMPROVEMENTS-BATHROOM BUILDING	11/15/06	SL	39.00	MM	16	243202.				243202.	72743.		6236.	78979.
32	REPAIRS-STONE ST	09/01/06	SL	39.00	MM	16	13018.				13018.	3609.		334.	3943.
62	IMPROVEMENTS-STONE STREET	01/01/08	SL	39.00	MM	16	4000.				4000.	1021.		103.	1124.
63	IMPROVEMENTS	04/10/08	SL	39.00	MM	16	33675.				33675.	16770.		863.	17633.
65	PACIFIC STREET BOILER 137 HENRY STREET	04/01/09	SL	30.00	16		13115.				13115.	4042.		437.	4479.
66	IMPROVEMENTS	04/01/09	SL	39.00	MM	16	34357.				34357.	8206.		881.	9087.
70	HVAC PROJECT-PACIFIC STREET 137 HENRY STREET	09/13/09	SL	39.00	MM	16	1800.				1800.	358.		46.	404.
74	IMPROVEMENTS 137 HENRY STREET	07/01/09	SL	39.00	MM	16	692.				692.	138.		18.	156.
75	IMPROVEMENTS	07/01/09	SL	39.00	MM	16	4650.				4650.	714.		119.	833.
77	BERKLEY ST NEW ROOM	01/19/11	SL	27.50	MM	16	2300.				2300.	832.		84.	916.
81	HVAC PROJECT-PACIFIC STREET	07/01/10	SL	27.00	16		3200.				3200.	1401.		119.	1520.
82	HVAC PACIFIC STREET	03/12/12	SL	20.00	16		331793.				331793.	103364.		16590.	119954.
83	38 ANN STREET-NEW STEPS	06/01/12	SL	20.00	16		1500.				1500.	251.		55.	306.
85	38 ANN STREET-BUILDING	02/29/12	SL	27.50	MM	16	194545.				194545.	22698.		7074.	29772.

828111 04-01-18

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2018 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
89	PACIFIC HOUSE-TILING	04/02/13	SL	27.50	MM	16	10569.				10569.	784.		384.	1168.
90	PACIFIC HOUSE-GAS LINE BURNERS	09/07/12	SL	27.50	MM	16	6668.				6668.	1037.		242.	1279.
91	PACIFIC HOUSE-EXTERIOR REPAIRS	03/07/13	SL	27.50	MM	16	27475.				27475.	2474.		999.	3473.
92	PACIFIC HOUSE-FLOOR REPLACEMENT	03/14/13	SL	27.50	MM	16	86151.				86151.	8588.		3133.	11721.
93	PACIFIC HOUSE-REPOINTING	05/22/13	SL	27.50	MM	16	41040.				41040.	11047.		1492.	12539.
94	38 ANN STREET-DEMOLITION	06/11/13	SL	27.50	MM	16	35360.				35360.	4445.		1286.	5731.
97	BUILDING-23 SPRUCE STREET	02/13/13	SL	27.50	MM	16	170935.				170935.	170935.		0.	170935.
98	38 ANN STREET-CONSULTING FEES	06/30/13	SL	27.50	MM	16	43450.				43450.	5464.		1580.	7044.
99	38 ANN STREET-CONSTRUCTION COSTS	06/30/13	SL	27.50	MM	16	26529.				26529.	3337.		965.	4302.
100	CONSTRUCTION COSTS-23 SPRUCE STREET	06/30/13	SL	27.50	MM	16	12111.				12111.	678.		440.	1118.
102	BUILDING-HALFWAY HOUSE 100 SOUTH MAIN	05/16/14	SL	27.50	MM	17	65466.				65466.	9819.		2381.	12200.
103	BUILDING-APTS 100 SOUTH MAIN STREET-FRONT BLDG	05/16/14	SL	27.50	MM	17	45950.				45950.			0.	
104	BUILDING COSTS-100 SOUTH MAIN STREET	06/30/14	SL	27.50	MM	17	1237.				1237.	178.		45.	223.
105	LINE ASSOC COSTS-100 SOUTH MAIN STREET	06/30/14	SL	27.50	MM	17	12737.				12737.	1833.		463.	2296.
106	BUILDING-190 STILLWATER AVE	06/05/14	SL	27.50	MM	17	42209.				42209.			0.	
107	ARCH & ENG COSTS-190 STILLWATER AVE	06/05/14	SL	27.50	MM	17	45463.				45463.			0.	
109	BUILDING-190 STILLWATER AVE	06/05/14	SL	27.50	MM	17	15095.				15095.			0.	
110	BUILDING-104 RICHMOND HILL	05/01/14	SL	27.50	MM	17	134302.				134302.			3460.	3460.

828111 04-01-18

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2018 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
111	BUILDING COSTS-104 RICHMOND HILL	06/30/14	SL	27.50	MM	17	278.				278.			7.	7.
112	LINE ASSOC FEES-104 RICHMOND HILL	06/30/14	SL	27.50	MM	17	12737.				12737.			328.	328.
113	BUILDING COSTS-23 SPRUCE ST	07/01/13	SL	27.50	MM	17	33421.				33421.	1772.		1215.	2987.
114	BUILDING COSTS-23 SPRUCE ST	06/30/14	SL	27.50	MM	17	2556.				2556.	86.		43.	129.
115	RELOCATION COSTS-23 SPRUCE ST	06/30/14	SL	27.50	MM	17	29118.				29118.	1544.		1059.	2603.
116	ARCH & ENG COSTS-23 SPRUCE ST	06/30/14	SL	27.50	MM	17	64224.				64224.	3406.		2335.	5741.
117	CLOSING COSTS-23 SPRUCE ST	08/23/13	SL	27.50	MM	17	14740.				14740.	782.		536.	1318.
118	BERKLEY HOUSE-ENVIRONMENTAL	06/30/14	SL	27.50	MM	17	1800.				1800.	65.		65.	130.
119	BERKLEY HOUSE-ENGINEER	06/30/14	SL	27.50	MM	17	1550.				1550.	56.		56.	112.
124	KITCHEN UPGRADE-PACIFIC HOUSE	04/23/14	SL	27.50	MM	17	7950.				7950.	439.		289.	728.
125	RENOVATIONS-PACIFIC HOUSE	03/10/14	SL	27.50	MM	17	51269.				51269.	3224.		1864.	5088.
126	RENOVATION-PACIFIC STREET	03/10/14	SL	27.50	MM	17	7930.				7930.	498.		288.	786.
127	EXTERNAL REPAIR-PACIFIC HOUSE	08/28/13	SL	27.50	MM	17	15485.				15485.	1797.		563.	2360.
135	IMPROVEMENTS-STONE STREET	04/10/08	SL	39.00	MM	16	3226.				3226.	1599.		83.	1682.
136	BUILDING COSTS-38 ANN STREET	07/01/13	SL	27.50	MM	17	57045.				57045.	7175.		2074.	9249.
137	IMPROVEMENTS-ANN STREET	06/30/14	SL	27.50	MM	17	450104.				450104.	56600.		16367.	72967.
138	ARCH & ENG COSTS-38 ANN STREET	06/30/14	SL	27.50	MM	17	4378.				4378.	550.		159.	709.
139	BUILDING COSTS-38 ANN STREET	06/30/14	SL	27.50	MM	17	7654.				7654.	962.		278.	1240.

828111 04-01-18

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2018 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
141	HVAC PACIFIC STREET	07/01/13	SL	10.00		HY17	9709.				9709.	5221.		971.	6192.
142	137 HENRY STREET IMPROVEMENTS	07/23/14	SL	39.00		MM17	4643.				4643.	714.		119.	833.
143	LOCKERS PACIFIC STREET	11/17/14	SL	15.00		HY17	5468.				5468.	653.		365.	1018.
144	KITCHEN UPGRADE-PACIFIC STREET	12/11/14	SL	27.50		MM17	25380.				25380.	2195.		923.	3118.
145	PROFESSIONAL FEES PACIFIC STREET	05/21/15	SL	27.50		MM17	11335.				11335.	511.		412.	923.
146	PROFESSIONAL FEES PACIFIC STREET-GENERATOR	05/21/15	SL	27.50		MM17	1350.				1350.	111.		49.	160.
148	RECORDING FEES 38 ANN STREET	10/22/14	SL	27.50		MM17	58.				58.	7.		2.	9.
149	ENVIRONMENTAL FEES 38 ANN STREET	07/23/14	SL	27.50		MM17	1800.				1800.	225.		65.	290.
150	ARCHITECT & ENGINEERING FEES 38 ANN STREET	07/22/14	SL	27.50		MM17	6700.				6700.	846.		244.	1090.
151	CONSULTING FEES 38 ANN STREET	05/06/15	SL	27.50		MM17	11200.				11200.	1408.		407.	1815.
152	BUILDING COSTS-38 ANN STREET	11/21/14	SL	27.50		MM17	118077.				118077.	14848.		4294.	19142.
155	CAPITALIZED MORTGAGE INTEREST-38 ANN STREET	02/28/15	SL	27.50		MM17	11738.				11738.	1477.		427.	1904.
156	BUILDING COSTS-38 ANN STREET	02/28/15	SL	27.50		MM17	55646.				55646.	6997.		2023.	9020.
157	FIRE & SECURITY-104 RICHMOND HILL	10/31/14	SL	15.00		HY17	4300.				4300.			0.	
158	INSURANCE-104 RICHMOND HILL	06/30/15	SL	27.50		MM17	4169.				4169.			107.	107.
159	BUILDING COSTS-104 RICHMOND HILL	06/30/15	SL	27.50		MM17	60210.				60210.			1551.	1551.
162	BUILDING COSTS-100 SOUTH MAIN STREET	06/30/15	SL	27.50		MM17	13559.				13559.	1951.		493.	2444.
163	BUILDING COSTS-190 STILLWATER	06/30/15	SL	27.50		MM17	63686.				63686.			0.	

828111 04-01-18

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2018 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
164	CAPITALIZED INSURANCE-23 SPRUCE STREET	06/30/15	SL	27.50	MM	17	5500.				5500.	292.		200.	492.
165	BUILDING COSTS-23 SPRUCE ST	06/30/15	SL	27.50	MM	17	479666.				479666.	25438.		17442.	42880.
167	BUILDING COSTS-BERKLEY	06/30/15	SL	27.50	MM	17	64318.				64318.	2339.		2339.	4678.
168	CAPITALIZED MORTGAGE INTEREST-BERKLEY	06/30/15	SL	27.50	MM	17	2964.				2964.	108.		108.	216.
170	BUILDING COSTS-190 STILLWATER	06/30/16	SL	27.50	MM	17	34563.				34563.			0.	
171	CAPITALIZED INSURANCE-23 SPRUCE STREET	06/30/16	SL	27.50	MM	17	9731.				9731.	516.		354.	870.
172	C.I.P.-LIGHTHOUSE	06/30/16	SL	20.00		16	18323.				18323.			0.	
173	GENERATOR-PACIFIC STREET	07/29/15	SL	27.50	MM	17	67806.				67806.	7192.		2466.	9658.
174	ARCH & CONSULTING FEES-PACIFIC STREET	01/01/16	SL	27.50	MM	17	18884.				18884.	618.		687.	1305.
175	ALARM SYSTEM UPGRADE-PACIFIC STREET	09/01/15	SL	20.00	HY	17	9975.				9975.	1499.		499.	1998.
176	LIGHTING FIXTURES-PACIFIC STREET	10/01/15	SL	27.50	MM	17	46144.				46144.	4056.		1678.	5734.
177	ROOF-PACIFIC STREET	11/01/15	SL	27.50	MM	17	44750.				44750.	3661.		1627.	5288.
178	LAUNDRY ROOM UPGRADE-PACIFIC STREET	12/01/15	SL	27.50	MM	17	55058.				55058.	3238.		2002.	5240.
179	DAY ROOM UPGRADE-PACIFIC STREET	12/01/15	SL	27.50	MM	17	9089.				9089.	531.		331.	862.
180	ELEVATOR PROJECT-PACIFIC STREET	04/01/16	SL	27.50	MM	17	40000.				40000.	1455.		1455.	2910.
183	CAPITALIZED INSURANCE-104 RICHMOND HILL	06/30/16	SL	27.50	MM	17	3628.				3628.			93.	93.
184	CAPITALIZED MORTGAGE INTEREST-104 RICHMOND HILL	06/30/16	SL	27.50	MM	17	9068.				9068.			234.	234.
185	CAPITALIZED BUILDING COSTS-104 RICHMOND HILL	06/30/16	SL	27.50	MM	17	29386.				29386.			757.	757.

628111 04-01-18

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2018 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
186	ROOF REPLACEMENT-100 S. MAIN STREET	10/01/15	SL	27.50		MM17	17800.				17800.	1563.		647.	2210.
187	WINDOW REPLACEMENT-100 S. MAIN STREET	10/01/15	SL	27.50		MM17	37665.				37665.	3310.		1370.	4680.
188	SIDING REPLACEMENT-100 S. MAIN STREET	10/01/15	SL	27.50		MM17	67800.				67800.	5725.		2465.	8190.
189	ARCHITECT FEES-100 S. MAIN STREET	10/01/15	SL	27.50		MM17	9961.				9961.	880.		362.	1242.
190	LINE ASSOC COSTS-100 S. MAIN STREET	06/30/16	SL	27.50		MM17	2000.				2000.	177.		73.	250.
191	CAPITALIZED INSURANCE-100 S. MAIN STREET-FRONT	06/30/16	SL	27.50		MM17	2080.				2080.			0.	
192	CAPITALIZED MORTGAGE INTEREST-23 SPRUCE STREET	06/30/16	SL	27.50		MM17	40661.				40661.	2157.		1479.	3636.
193	BUILDING COSTS-23 SPRUCE ST	06/30/16	SL	27.50		MM17	1168553.				1168553.	61973.		42493.	104466.
194	BUILDING COSTS-BERKLEY	06/30/16	SL	27.50		MM17	201768.				201768.	7337.		7337.	14674.
195	APPLIANCES-BERKLEY CAPITALIZED MORTGAGE	06/30/16	SL	27.50		MM17	4667.				4667.	170.		170.	340.
200	INTEREST-38 ANN STREET CAPITALIZED INSURANCE-104	06/30/17	SL	27.50		MM17	4503.				4503.	164.		164.	328.
201	RICHMOND HILL CAPITALIZED BUILDING	06/30/17	SL	27.50		MM17	5696.				5696.			147.	147.
202	COSTS-104 RICHMOND HILL CAPITALIZED MORTGAGE	06/30/17	SL	27.50		MM17	23630.				23630.			609.	609.
203	INTEREST-104 RICHMOND HILL CAPITALIZED INSURANCE-100	06/30/17	SL	27.50		MM17	7564.				7564.			195.	195.
205	S. MAIN STREET ARCHITECT FEES-100 S. MAIN STREET	06/30/17	SL	27.50		MM17	3628.				3628.			0.	
206	LINE ASSOC COSTS-100 S. MAIN STREET	06/30/17	SL	27.50		MM17	9343.				9343.			0.	
207	GUTTERS & LEADERS 100 S. MAIN STREET	06/30/17	SL	27.50		MM17	9720.				9720.			0.	
208	MAIN STREET	11/07/16	SL	27.50		MM17	2683.				2683.	178.		98.	276.

826111 04-01-18

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2018 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
209	ARCHITECT FEES-100 S.MAIN STREET	12/12/16	SL	27.50	MM	17	4620.				4620.	688.		168.	856.
210	CAPITALIZED INSURANCE-190 STILLWATER	06/30/17	SL	27.50	MM	17	12659.				12659.			0.	0.
211	BUILDING COSTS-190 STILLWATER	06/30/17	SL	27.50	MM	17	24484.				24484.			0.	0.
212	ARCHITECT & ENGINEERING FEES-190 STILLWATER	06/30/17	SL	27.50	MM	17	64431.				64431.			0.	0.
213	CAPITALIZED INSURANCE-23 SPRUCE STREET	06/30/17	SL	27.50	MM	17	3150.				3150.	168.		115.	283.
215	SHED-23 SPRUCE STREET	12/28/16	SL	10.00	HY	17	4988.				4988.	998.		499.	1497.
216	FENCE-23 SPRUCE STREET	07/22/16	SL	10.00	HY	17	25100.				25100.	5020.		2510.	7530.
217	BLACKTOP-23 SPRUCE STREET	09/06/16	SL	20.00	HY	17	17100.				17100.	1795.		855.	2650.
220	CONSTRUCTION COSTS-23 SPRUCE STREET	12/31/16	SL	27.50	MM	17	5687.				5687.	302.		207.	509.
221	CAPITALIZED MORTGAGE INTEREST-23 SPRUCE STREET	06/30/17	SL	27.50	MM	17	1493.				1493.	54.		54.	108.
222	BUILDING COSTS-BERKLEY ENTRY WAY CONSTRUCTION - PACIFIC STREET	06/30/17	SL	27.50	MM	17	324552.				324552.	4295.		11802.	16097.
223	ENGINEERING FEES- PACIFIC STREET	04/18/17	SL	27.50	MM	17	23410.				23410.	1028.		851.	1879.
225	APPRAISAL- PACIFIC STREET	01/22/17	SL	27.50	MM	17	8141.				8141.	358.		296.	654.
227	ENTRY WAY CONSTRUCTION - PACIFIC STREET	01/18/17	SL	27.50	MM	17	3500.				3500.	152.		127.	279.
230	ARCHITECT FEES- PACIFIC STREET	06/10/17	SL	27.50	MM	17	27523.				27523.	1001.		1001.	2002.
231	ENTRY WAY CONSTRUCTION - PACIFIC STREET	04/30/17	SL	27.50	MM	17	4070.				4070.	179.		148.	327.
232	FRONT BUILDING-100 S.MAIN STREET	06/30/18	SL	27.50	MM	17	7878.				7878.	131.		286.	417.
233		06/30/18	SL	27.50	MM	17	36762.				36762.			0.	0.

828111 04-01-18

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2018 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
234	REAR BUILDING-100 S.MAIN STREET	06/30/18	SL	27.50		MM17	10082.				10082.	132.		327.	459.
235	ARCHITECT FEES- PACIFIC STREET	06/30/18	SL	27.50		MM17	9679.				9679.	161.		352.	513.
236	ELEVATOR PROJECT-PACIFIC STREET	06/30/18	SL	27.50		MM17	28113.				28113.	469.		469.	938.
237	INTERIOR RENOVATIONS-PACIFIC STREET	06/30/18	SL	27.50		MM17	51053.				51053.			1857.	1857.
238	FLOORING-PACIFIC STREET	06/30/18	SL	27.50		MM17	100066.				100066.			3679.	3679.
240	SOLAR PROJECT-PACIFIC STREET	06/30/18	SL	27.50		MM17	156917.				156917.			5706.	5706.
242	CAPITALIZED MORTGAGE INTEREST-38 ANN STREET	06/30/18	SL	27.50		MM17	10920.				10920.	152.		397.	549.
243	BUILDING COSTS-104 RICHMOND HILL	06/30/18	SL	27.50		MM17	960586.				960586.			24745.	24745.
244	MAIL BOXES-104 RICHMOND HILL	06/30/18	SL	27.50		MM17	1200.				1200.			31.	31.
245	BUILDING COSTS-190 STILLWATER	06/30/18	SL	27.50		MM17	86007.				86007.			0.	0.
246	BUILDING COSTS-23 SPRUCE ST	06/30/18	SL	27.50		MM17	24714.				24714.	382.		959.	1341.
247	BUILDING COSTS-BERKLEY	06/30/18	SL	27.50		MM17	76775.				76775.	1324.		2980.	4304.
248	BUILDING COSTS-FAIRFIELD COMMONS	06/30/19	SL	27.50		HY19H	5058.				5058.			0.	0.
249	BUILDING COSTS-36 ANN STREET	06/30/19	SL	27.50		HY19H	179264.				179264.			0.	0.
250	CAPITALIZED LOAN COSTS-100 SOUTH MAIN	06/30/18	SL	27.50		MM17	4250.				4250.			0.	0.
253	SECURITY SYSTEM-100 SOUTH MAIN	06/30/19	SL	27.50		MM19H	95250.				95250.			2579.	2579.
255	GENERATOR-PACIFIC STREET	10/31/18	SL	27.50		MM19H	28540.				28540.			1038.	1038.
256	FLOORING-PACIFIC STREET	10/24/18	SL	27.50		MM19H	4004.				4004.			146.	146.

826111 04-01-18

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2018 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
257	SOLAR PROJECT-PACIFIC STREET	10/24/18	SL	27.50		MM19H	4658.				4658.			169.	169.
259	INTERIOR RENOVATIONS-PACIFIC STREET	12/11/18	SL	27.50		MM19H	40000.				40000.			1855.	1855.
260	ARCHITECT FEES- PACIFIC STREET-DEPOSIT	06/23/19	SL	27.50		HY19H	11000.				11000.			0.	0.
264	BUILDING COSTS-38 ANN STREET	06/30/12	SL	27.50		MM17	5006.				5006.	330.		182.	512.
266	BUILDING COSTS-104 RICHMOND HILL	06/30/19	SL	27.50		MM19H	169247.				169247.			4359.	4359.
267	BUILDING COSTS-190 STILLWATER	06/30/18	SL	27.50		MM17	86007.				86007.			0.	0.
268	BUILDING COSTS-100 SOUTH MAIN STREET	06/30/19	SL	27.50		HY19H	90434.				90434.			0.	0.
269	BUILDING COSTS-190 STILLWATER	06/30/19	SL	27.50		HY19H	1512252.				1512252.			0.	0.
270	BUILDING COSTS-190 STILLWATER	06/30/17	SL	27.50		MM16	105589.				105589.			0.	0.
	* 990 PAGE 10 TOTAL BUILDINGS						12843598.				12843598.	2735836.		336414.	3072250.
	LAND														
33	LAND-PACIFIC	06/01/90	L				200000.				200000.			0.	0.
34	LAND-BERKELEY	11/01/99	L				80700.				80700.			0.	0.
35	LAND-STONE STREET	04/12/07	L				120000.				120000.			0.	0.
84	38 ANN STREET-LAND	02/29/12	L				194545.				194545.			0.	0.
96	LAND-23 SPRUCE STREET	02/13/13	L				139848.				139848.			0.	0.
121	LAND-104 RICHMOND HILL	05/01/14	L				151447.				151447.			0.	0.
122	LAND-100 SOUTH MAIN STREET	05/16/14	L				21222.				21222.			0.	0.

828111 04-01-18

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2018 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation	
123	LAND-190 STILLWATER	05/16/14	L				237290.				237290.			0.		
254	LAND-36 ANN STREET	05/10/19	L				206065.				206065.			0.		
	* 990 PAGE 10 TOTAL LAND						1351117.				1351117.	0.		0.	0.	
	OTHER															
1	COPIER DL55	11/01/02	SL	5.00		16	7150.				7150.	7150.		0.	7150.	
2	WASHER	04/28/04	SL	5.00		16	6704.				6704.	6704.		0.	6704.	
3	COMPUTER SERVER	06/30/04	SL	5.00		16	10170.				10170.	10170.		0.	10170.	
17	SECURITY SYSTEM-PACIFIC STREET	04/17/00	SL	20.00		16	5088.				5088.	4594.		254.	4848.	
18	FENCE-BERKELEY	02/28/00	SL	20.00		16	4660.				4660.	4234.		233.	4467.	
19	SECURITY SYSTEM-BERKELEY	02/28/00	SL	20.00		16	10110.				10110.	9194.		506.	9700.	
20	AIR CONDITIONER-PACIFIC STREET	08/04/99	SL	5.00		16	6970.				6970.	6970.		0.	6970.	
21	ALARM CONTROL PANEL	03/28/01	SL	20.00		16	910.				910.	614.		46.	660.	
36	OFFICE EQUIPMENT-PACIFIC	01/01/92	SL	7.00		16	600.				600.	600.		0.	600.	
37	OFFICE EQUIPMENT-PACIFIC	11/01/93	SL	7.00		16	1720.				1720.	1720.		0.	1720.	
38	OFFICE EQUIPMENT-PACIFIC	05/01/95	SL	7.00		16	1442.				1442.	1442.		0.	1442.	
39	OFFICE EQUIPMENT-PACIFIC	09/01/95	SL	7.00		16	12629.				12629.	12629.		0.	12629.	
40	OFFICE EQUIPMENT-PACIFIC	06/01/90	SL	7.00		16	29575.				29575.	29575.		0.	29575.	
41	TELEPHONE SYSTEM-PACIFIC	05/01/00	SL	5.00		16	9850.				9850.	9850.		0.	9850.	

828111 04-01-18

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2018 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
42	FILES/CHAIRS/DESKS	03/06/01	SL	7.00		16	2400.				2400.	2400.		0.	2400.
43	DESKS	06/25/01	SL	7.00		16	878.				878.	878.		0.	878.
44	DESK/FILE	03/07/01	SL	7.00		16	800.				800.	800.		0.	800.
45	MAHOGANY DESK	08/20/01	SL	7.00		16	285.				285.	285.		0.	285.
46	DESK AND CHAIR (GREY)	11/29/01	SL	7.00		16	380.				380.	380.		0.	380.
47	DESK AND CHAIR (BLACK)	11/29/01	SL	7.00		16	409.				409.	409.		0.	409.
48	MISC-ADDITION	01/01/07	SL	5.00		16	7058.				7058.	7058.		0.	7058.
49	COMPUTER EQUIPMENT-PACIFIC	02/01/96	SL	5.00		16	1428.				1428.	1428.		0.	1428.
50	COMPUTERS-PACIFIC	01/01/99	SL	5.00		16	43801.				43801.	43801.		0.	43801.
51	SYSTEM SERVER	06/30/01	SL	5.00		16	2026.				2026.	2026.		0.	2026.
52	COMPUTER (J. KARAS)	01/07/02	SL	5.00		16	634.				634.	634.		0.	634.
53	COMPUTER	12/13/01	SL	5.00		16	1224.				1224.	1224.		0.	1224.
54	COMPUTER-BERKELEY	01/28/02	SL	5.00		16	639.				639.	639.		0.	639.
56	FREEZER-PACIFIC	11/17/99	SL	5.00		16	2550.				2550.	2550.		0.	2550.
57	COMPUTERS-PACIFIC	02/04/00	SL	3.00		16	1250.				1250.	1250.		0.	1250.
58	MITSUBISHI VCR-PACIFIC	12/15/99	SL	3.00		16	100.				100.	100.		0.	100.
59	MITSUBISHI 60"TV-PACIFIC	12/15/99	SL	3.00		16	2460.				2460.	2460.		0.	2460.
60	SAMSUNG VCR-BERKELEY	12/15/99	SL	3.00		16	300.				300.	300.		0.	300.

828111 04-01-18

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2018 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
61	PIANO-PACIFIC	12/07/99	SL	5.00		16	1000.				1000.	1000.	0.	0.	1000.
64	COMPUTER	01/01/08	SL	3.00		16	8000.				8000.	8000.	0.	0.	8000.
67	REFRIGERATOR-PACIFIC	01/01/09	SL	10.00		16	2117.				2117.	2014.	103.	103.	2117.
68	COMPUTER EQUIPMENT	01/01/09	SL	3.00		16	9578.				9578.	9578.	0.	0.	9578.
69	JEEP	05/01/09	SL	5.00		16	21430.				21430.	15068.	0.	0.	15068.
71	BACKUP SERVER-HENRY STREET STEAM SANITATION	03/26/10	SL	3.00		16	1218.				1218.	1218.	0.	0.	1218.
76	SYSTEM-PACIFIC STREET	02/03/11	SL	5.00		16	2950.				2950.	2950.	0.	0.	2950.
78	PACIFIC STREET FREEZER	08/01/10	SL	10.00		16	2785.				2785.	1640.	279.	279.	1919.
79	PACIFIC STREET FURNITURE & FIXTURES	11/21/10	SL	7.00		16	36391.				36391.	30034.	5199.	5199.	35233.
80	PORTABLE WATER SYSTEM	07/01/10	SL	5.00		16	1671.				1671.	1671.	0.	0.	1671.
86	PACIFIC HOUSE-65" TV	01/30/13	SL	10.00		16	1290.				1290.	774.	129.	129.	903.
87	PACIFIC HOUSE-REFRIGERATOR	05/10/13	SL	10.00		16	2959.				2959.	1776.	296.	296.	2072.
88	PACIFIC HOUSE-FLOOR POLISHER	11/29/12	SL	5.00		16	1065.				1065.	1065.	0.	0.	1065.
95	PACIFIC HOUSE-BEDS	06/01/13	SL	15.00		16	6399.				6399.	1492.	427.	427.	1919.
130	COMPUTER	07/11/13	SL	3.00	HY17	16	1250.				1250.	1250.	0.	0.	1250.
133	PROGRAM EQUIPMENT	06/30/01	SL	5.00		16	2944.				2944.	2944.	0.	0.	2944.
140	MORTGAGE COSTS-BEACON 11	01/28/14		240M	HY43		20282.				20282.	507.	1014.	1014.	1521.
147	COMPUTER	09/30/14	SL	3.00	HY17	16	8980.				8980.	8980.	0.	0.	8980.

8328111 04-01-18

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2018 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No.	Description	Date Acquired	Method	Life	Convention	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
153	FENCE-38 ANN STREET	09/17/14	SL	15.00	HY	17	19457.				19457.	3684.		1297.	4981.
154	FURNITURE-38 ANN STREET	12/05/14	SL	7.00	HY	17	4677.				4677.	1676.		668.	2344.
160	FIRE SYSTEM-100 SOUTH MAIN STREET	06/30/15	SL	7.00	HY	17	625.				625.	484.		56.	540.
169	COPIER DL55	11/01/02	SL	5.00		16	7150.				7150.	7150.		0.	7150.
181	TELEPHONE	03/14/16	SL	7.00		16	7800.				7800.	2228.		1114.	3342.
182	WASHER & DRYER-STONE STREET	04/05/16	SL	10.00		16	1169.				1169.	351.		117.	468.
197	HONDA ODESSY	11/21/16	SL	5.00		16	28889.				28889.	11556.		5778.	17334.
198	HONDA CRV	11/21/16	SL	5.00		16	26602.				26602.	10640.		5320.	15960.
199	APPLIANCES-38 ANN STREET	01/10/17	SL	10.00	HY	17	2118.				2118.	424.		212.	636.
204	WASHER & DRYER-100 SOUTH MAIN STREET	06/30/17	SL	10.00	HY	17	2324.				2324.	464.		232.	696.
214	FURNITURE-23 SPRUCE STREET	12/28/16	SL	7.00	HY	17	29754.				29754.	8502.		4251.	12753.
218	APPLIANCES-23 SPRUCE STREET	09/06/16	SL	10.00	HY	17	15500.				15500.	3100.		1550.	4650.
219	SECURITY CAMERA-23 SPRUCE STREET	09/06/16	SL	15.00	HY	17	19641.				19641.	3143.		1309.	4452.
226	COMPRESSOR- PACIFIC STREET	01/16/17	SL	10.00	HY	17	7301.				7301.	1460.		730.	2190.
228	CAMERAS- PACIFIC STREET	03/22/17	SL	10.00	HY	17	15289.				15289.	3058.		1529.	4587.
229	2 STEAMCLEANERS- PACIFIC STREET	09/15/16	SL	10.00	HY	17	7390.				7390.	1478.		739.	2217.
239	(3)DRYERS-PACIFIC STREET	06/30/18	SL	3.00	MC	17	2258.				2258.	753.		226.	979.
241	WASHER & DRYER-STONE STREET	06/30/18	SL	10.00	MC	17	1356.				1356.			136.	136.

828111 04-01-18

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2018 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No.	Description	Date Acquired	Method	Life	Con v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
251	FURNITURE-100 SOUTH MAIN	11/02/18	SL	7.00		HY19C	11508.				11508.			2054.	2054.
252	FIRE PANEL-100 SOUTH MAIN	06/30/19	SL	10.00		HY19D	5249.				5249.			525.	525.
258	WASHER & DRYER-PACIFIC STREET	11/19/18	SL	10.00		HY19D	18274.				18274.			1827.	1827.
261	COMPUTER DOOR TO SERVER	11/13/09	SL	10.00		HY17	1900.				1900.	1520.		190.	1710.
262	TELEPHONE-PACIFIC STREET	04/27/10	SL	7.00		HY17	5300.				5300.	5300.		0.	5300.
263	WEBSITE-137 HENRY STREET	07/31/18	SL	3.00		HY19A	2112.				2112.			704.	704.
265	FURNITURE-104 RICHMOND HILL	12/14/18	SL	7.00		HY19C	11195.				11195.			1998.	1998.
	* 990 PAGE 10 TOTAL OTHER						563347.				563347.	333000.		41048.	374048.
	* GRAND TOTAL 990 PAGE 10 DEPR & AMORT						14758062.				14758062.	3068836.		377462.	3446298.
	CURRENT YEAR ACTIVITY														
	BEGINNING BALANCE						12363952.			0.	12363952.	3068836.			3429044.
	ACQUISITIONS						2394110.			0.	2394110.	0.			17254.
	DISPOSITIONS						0.			0.	0.	0.			0.
	ENDING BALANCE						14758062.			0.	14758062.	3068836.			3446298.
	ENDING ACCUM DEPR											3446298.			
	ENDING BOOK VALUE											11311764.			

Depreciation and Amortization
(Including Information on Listed Property) **990**

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service (99)

Name(s) shown on return

Business or activity to which this form relates

Identifying number

PACIFIC HOUSE, INC.

FORM 990 PAGE 10

06-1144355

Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount (see instructions)	1	1000000.
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation	3	2500000.
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property. Enter the amount from line 29	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2017 Form 4562	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13 Carryover of disallowed deduction to 2019. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	149258.

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2018	17	209936.
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	<input type="checkbox"/>	

Section B - Assets Placed in Service During 2018 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property		2112.	3 YRS.	HY	SL	704.
b 5-year property						
c 7-year property		22703.	7 YRS.	HY	SL	4052.
d 10-year property		23523.	10 YRS.	HY	SL	2352.
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/	STATEMENT 1	27.5 yrs.	MM	S/L	10146.
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year	/		30 yrs.	MM	S/L	
d 40-year	/		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	376448.
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No

Table with 10 columns: (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation deduction, (i) Elected section 179 cost. Includes rows 25-29.

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

Table with 6 main columns: (a) Vehicle, (b) Vehicle, (c) Vehicle, (d) Vehicle, (e) Vehicle, (f) Vehicle. Includes rows 30-36.

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons.

Table with 2 columns: Yes, No. Includes rows 37-41.

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

Table with 6 columns: (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year. Includes rows 42-44.

FORM 4562

PART III - RESIDENTIAL RENTAL PROPERTY

STATEMENT 1

(A) DESCRIPTION OF PROPERTY	(B) MO/YR	(C) BASIS	(G) DEDUCTION
SECURITY SYSTEM-100 SOUTH MAIN	06/19	95250.	2579.
GENERATOR-PACIFIC STREET	10/18	28540.	1038.
FLOORING-PACIFIC STREET	10/18	4004.	146.
SOLAR PROJECT-PACIFIC STREET	10/18	4658.	169.
INTERIOR RENOVATIONS-PACIFIC STREET	12/18	40000.	1855.
BUILDING COSTS-104 RICHMOND HILL	06/19	169247.	4359.
TOTAL TO FORM 4562, PART III, LINE 19H		341699.	10146.

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

		Enter filer's identifying number
Type or print	Name of exempt organization or other filer, see instructions. PACIFIC HOUSE, INC.	Employer identification number (EIN) or 06-1144355
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 137 HENRY STREET, NO. 205	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. STAMFORD, CT 06902	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

PACIFIC HOUSE, INC

- The books are in the care of ▶ **137 HENRY STREET, ROOM 205 - STAMFORD, CT 06902**
Telephone No. ▶ **203-406-0017** Fax No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **MAY 15, 2020**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year _____ or
 ▶ tax year beginning **JUL 1, 2018**, and ending **JUN 30, 2019**.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

2018 DEPRECIATION AND AMORTIZATION REPORT
 - CURRENT YEAR FEDERAL - PACIFIC HOUSE, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis *	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
4	BUILDINGS BATHROOM IMPROVEMENTS-STONE	062204SL		39.0016		9600.			9600.	2228.		246.
5	BUILDING-STONE STREET	041207SL		39.0016		519817.			519817.	136622.		13329.
6	BUILDING-PACIFIC STREET	060190SL		31.5016		1551326.			1551326.	1490919.		50801.
7	IMPROVEMENTS-PACIFI C STREET	090192SL		31.5016		1116.			1116.	905.		35.
8	IMPROVEMENTS-PACIFI C STREET	010195SL		39.0016		1135.			1135.	713.		29.
9	IMPROVEMENTS-PACIFI C STREET	030196SL		39.0016		870.			870.	599.		22.
11	IMPROVEMENTS-PACIFI C STREET	070196SL		39.0016		9943.			9943.	5599.		255.
12	IMPROVEMENTS-PACIFI C STREET	013197SL		39.0016		8580.			8580.	5665.		220.
13	RENOVATION-PACIFIC STREET	040199SL		39.0016		13678.			13678.	6757.		351.
14	IMPROVEMENTS-PACIFI C STREET	090191SL		31.5016		3000.			3000.	2550.		95.
15	BUILDING-BERKELEY IMPROVEMENTS-BERKEL	110199SL		40.0016		188300.			188300.	88729.		4708.
16	EY IMPROVEMENTS-PACIFI	110199SL		40.0016		373932.			373932.	175256.		8426.
22	C STREET BATHROOM	031505SL		39.0016		115922.			115922.	41906.		2972.
23	IMPROVEMENTS-PACIFI	063007SL		39.0016		105448.			105448.	30132.		2704.
24	C STREET IMPROVEMENTS-PACIFI	082404SL		39.0016		1800.			1800.	636.		46.
25	C STREET IMPROVEMENTS-PACIFI	082404SL		39.0016		586.			586.	208.		15.
26	C STREET IMPROVEMENTS-PACIFI	021705SL		39.0016		900.			900.	307.		23.

828102 04-01-18 (D) - Asset disposed * ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2018 DEPRECIATION AND AMORTIZATION REPORT
 - CURRENT YEAR FEDERAL - PACIFIC HOUSE, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
27	IMPROVEMENTS-PACIFI C STREET	111904SL		39.00	16	517.			517.	177.		13.
28	IMPROVEMENTS-PACIFI C STREET	020705SL		39.00	16	1703.			1703.	590.		44.
29	IMPROVEMENTS-PACIFI C STREET	092804SL		39.00	16	676.			676.	234.		17.
30	IMPROVEMENTS-PACIFI C STREET-HVAC BUILDING	063007SL		20.00	16	30868.			30868.	16923.		1543.
31	IMPROVEMENTS-BATHRO	111506SL		39.00	16	243202.			243202.	72743.		6236.
32	REPAIRS-STONE ST IMPROVEMENTS-STONE	090106SL		39.00	16	13018.			13018.	3609.		334.
62	STREET	010108SL		39.00	16	4000.			4000.	1021.		103.
63	IMPROVEMENTS PACIFIC STREET	041008SL		39.00	16	33675.			33675.	16770.		863.
65	BOILER 137 HENRY STREET	040109SL		30.00	16	13115.			13115.	4042.		437.
66	IMPROVEMENTS HVAC	040109SL		39.00	16	34357.			34357.	8206.		881.
70	PROJECT-PACIFIC STR 137 HENRY STREET	091309SL		39.00	16	1800.			1800.	358.		46.
74	IMPROVEMENTS 137 HENRY STREET	070109SL		39.00	16	692.			692.	138.		18.
75	IMPROVEMENTS	070109SL		39.00	16	4650.			4650.	714.		119.
77	BERKLEY ST NEW ROOM HVAC	011911SL		27.50	16	2300.			2300.	832.		84.
81	PROJECT-PACIFIC STR HVAC	070110SL		27.00	16	3200.			3200.	1401.		119.
82	HVAC PACIFIC STREET 38 ANN STREET-NEW	031212SL		20.00	16	331793.			331793.	103364.		16590.
83	STEPS 38 ANN	060112SL		20.00	16	1500.			1500.	251.		55.
85	STREET-BUILDING	022912SL		27.50	16	194545.			194545.	22698.		7074.

2018 DEPRECIATION AND AMORTIZATION REPORT
 - CURRENT YEAR FEDERAL - PACIFIC HOUSE, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
89	PACIFIC HOUSE-TILING	040213SL		27.5016		10569.			10569.	784.		384.
90	PACIFIC HOUSE-GAS LINE BURNERS	090712SL		27.5016		6668.			6668.	1037.		242.
91	PACIFIC HOUSE-EXTERIOR REPAIR	030713SL		27.5016		27475.			27475.	2474.		999.
92	PACIFIC HOUSE-FLOOR REPLACEMENT	031413SL		27.5016		86151.			86151.	8588.		3133.
93	PACIFIC HOUSE-REPOINTING	052213SL		27.5016		41040.			41040.	11047.		1492.
94	38 ANN STREET-DEMOLITION	061113SL		27.5016		35360.			35360.	4445.		1286.
97	BUILDING-23 SPRUCE STREET	021313SL		27.5016		170935.			170935.	170935.		0.
98	38 ANN STREET-CONSULTING	F063013SL		27.5016		43450.			43450.	5464.		1580.
99	38 ANN STREET-CONSTRUCTION	063013SL		27.5016		26529.			26529.	3337.		965.
100	COSTS-23 SPRUCE STREET	063013SL		27.5016		12111.			12111.	678.		440.
102	BUILDING-HALFWAY HOUSE 100 SOUTH MAIN	051614SL		27.5017		65466.			65466.	9819.		2381.
103	BUILDING-APTS 100 SOUTH MAIN STREET	F051614SL		27.5017		45950.			45950.			0.
104	BUILDING COSTS-100 SOUTH MAIN STREET	063014SL		27.5017		1237.			1237.	178.		45.
105	LINE ASSOC COSTS-100 SOUTH MAIN	063014SL		27.5017		12737.			12737.	1833.		463.
106	BUILDING-190 STILLWATER AVE	060514SL		27.5017		42209.			42209.			0.
107	ARCH & ENG COSTS-190 STILLWATER	060514SL		27.5017		45463.			45463.			0.
109	BUILDING-190 STILLWATER AVE	060514SL		27.5017		15095.			15095.			0.
110	BUILDING-104 RICHMOND HILL	050114SL		27.5017		134302.			134302.			3460.

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction
 (D) - Asset disposed

2018 DEPRECIATION AND AMORTIZATION REPORT
 - CURRENT YEAR FEDERAL - PACIFIC HOUSE, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
111	BUILDING COSTS-104 RICHMOND HILL	063014SL		27.5017		278.			278.			7.
112	LINE ASSOC FEES-104 RICHMOND HILL	063014SL		27.5017		12737.			12737.			328.
113	BUILDING COSTS-23 SPRUCE ST	070113SL		27.5017		33421.			33421.	1772.		1215.
114	BUILDING COSTS-23 SPRUCE ST	063014SL		27.5017		2556.			2556.	86.		43.
115	RELOCATION COSTS-23 SPRUCE ST	063014SL		27.5017		29118.			29118.	1544.		1059.
116	ARCH & ENG COSTS-23 SPRUCE ST	063014SL		27.5017		64224.			64224.	3406.		2335.
117	CLOSING COSTS-23 SPRUCE ST	082313SL		27.5017		14740.			14740.	782.		536.
118	BERKLEY HOUSE-ENVIRONMENTAL	063014SL		27.5017		1800.			1800.	65.		65.
119	BERKLEY HOUSE-ENGINEER	063014SL		27.5017		1550.			1550.	56.		56.
124	KITCHEN UPGRADE-PACIFIC HOUSE	042314SL		27.5017		7950.			7950.	439.		289.
125	RENOVATIONS-PACIFIC HOUSE	031014SL		27.5017		51269.			51269.	3224.		1864.
126	RENOVATION-PACIFIC STREET	031014SL		27.5017		7930.			7930.	498.		288.
127	EXTERNAL REPAIR-PACIFIC HOUSE	082813SL		27.5017		15485.			15485.	1797.		563.
135	IMPROVEMENTS-STONE STREET	041008SL		39.0016		3226.			3226.	1599.		83.
136	BUILDING COSTS-38 ANN STREET	070113SL		27.5017		57045.			57045.	7175.		2074.
137	IMPROVEMENTS-ANN STREET	063014SL		27.5017		450104.			450104.	56600.		16367.
138	ARCH & ENG COSTS-38 ANN STREET	063014SL		27.5017		4378.			4378.	550.		159.
139	BUILDING COSTS-38 ANN STREET	063014SL		27.5017		7654.			7654.	962.		278.

2018 DEPRECIATION AND AMORTIZATION REPORT
 - CURRENT YEAR FEDERAL - PACIFIC HOUSE, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
141	HVAC PACIFIC STREET	070113SL		10.00	17	9709.			9709.	5221.		971.
137	HENRY STREET											
142	IMPROVEMENTS	072314SL		39.00	17	4643.			4643.	714.		119.
143	LOCKERS PACIFIC STREET	111714SL		15.00	17	5468.			5468.	653.		365.
144	KITCHEN											
144	UPGRADE-PACIFIC STREET	121114SL		27.50	17	25380.			25380.	2195.		923.
145	PROFESSIONAL FEES											
145	PACIFIC STREET	052115SL		27.50	17	11335.			11335.	511.		412.
146	PROFESSIONAL FEES											
146	PACIFIC STREET-GENERAL RECORDING FEES 38	052115SL		27.50	17	1350.			1350.	111.		49.
148	ANN STREET	102214SL		27.50	17	58.			58.	7.		2.
149	ENVIRONMENTAL FEES											
149	38 ANN STREET	072314SL		27.50	17	1800.			1800.	225.		65.
150	ARCHITECT & ENGINEERING FEES 38	072214SL		27.50	17	6700.			6700.	846.		244.
151	CONSULTING FEES 38											
151	ANN STREET	050615SL		27.50	17	11200.			11200.	1408.		407.
152	BUILDING COSTS-38											
152	ANN STREET	112114SL		27.50	17	118077.			118077.	14848.		4294.
155	CAPITALIZED MORTGAGE INTEREST-38	022815SL		27.50	17	11738.			11738.	1477.		427.
156	BUILDING COSTS-38											
156	ANN STREET	022815SL		27.50	17	55646.			55646.	6997.		2023.
157	FIRE & SECURITY-104											
157	RICHMOND HILL	103114SL		15.00	17	4300.			4300.			0.
158	INSURANCE-104											
158	RICHMOND HILL	063015SL		27.50	17	4169.			4169.			107.
159	BUILDING COSTS-104											
159	RICHMOND HILL	063015SL		27.50	17	60210.			60210.			1551.
162	BUILDING COSTS-100											
162	SOUTH MAIN STREET	063015SL		27.50	17	13559.			13559.	1951.		493.
163	BUILDING COSTS-190											
163	STILLWATER	063015SL		27.50	17	63686.			63686.			0.

828102 04-01-18 (D) - Asset disposed * ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2018 DEPRECIATION AND AMORTIZATION REPORT
 - CURRENT YEAR FEDERAL - PACIFIC HOUSE, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
164	CAPITALIZED INSURANCE-23 SPRUCE BUILDING COSTS-23	063015SL	SL	27.50	17	5500.			5500.	292.		200.
165	SPRUCE ST BUILDING	063015SL	SL	27.50	17	479666.			479666.	25438.		17442.
167	COSTS-BERKLEY CAPITALIZED	063015SL	SL	27.50	17	64318.			64318.	2339.		2339.
168	MORTGAGE INTEREST-BUILDING COSTS-190	063015SL	SL	27.50	17	2964.			2964.	108.		108.
170	STILLWATER CAPITALIZED	063016SL	SL	27.50	17	34563.			34563.	0.		0.
171	INSURANCE-23 SPRUCE	063016SL	SL	27.50	17	9731.			9731.	516.		354.
172	C.I.P.-LIGHTHOUSE GENERATOR-PACIFIC	063016SL	SL	20.00	16	18323.			18323.	0.		0.
173	STREET ARCH & CONSULTING	072915SL	SL	27.50	17	67806.			67806.	7192.		2466.
174	FEES-PACIFIC STREET ALARM SYSTEM	101116SL	SL	27.50	17	18884.			18884.	618.		687.
175	UPGRADE-PACIFIC LIGHTING	090115SL	SL	20.00	17	9975.			9975.	1499.		499.
176	FIXTURES-PACIFIC	100115SL	SL	27.50	17	46144.			46144.	4056.		1678.
177	ROOF-PACIFIC LAUNDRY ROOM	110115SL	SL	27.50	17	44750.			44750.	3661.		1627.
178	UPGRADE-PACIFIC DAY ROOM	120115SL	SL	27.50	17	55058.			55058.	3238.		2002.
179	UPGRADE-PACIFIC ELEVATOR	120115SL	SL	27.50	17	9089.			9089.	531.		331.
180	PROJECT-PACIFIC CAPITALIZED	040116SL	SL	27.50	17	40000.			40000.	1455.		1455.
183	INSURANCE-104 CAPITALIZED	063016SL	SL	27.50	17	3628.			3628.	0.		93.
184	MORTGAGE INTEREST CAPITALIZED	1063016SL	SL	27.50	17	9068.			9068.	0.		234.
185	BUILDING COSTS-104	063016SL	SL	27.50	17	29386.			29386.	0.		757.

828102 04-01-18 (D) - Asset disposed * ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2018 DEPRECIATION AND AMORTIZATION REPORT
 - CURRENT YEAR FEDERAL - PACIFIC HOUSE, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
186	ROOF REPLACEMENT-100 S.M100115SL WINDOW	100115SL		27.50	17	17800.			17800.	1563.		647.
187	REPLACEMENT-100 S.M100115SL SIDING	100115SL		27.50	17	37665.			37665.	3310.		1370.
188	REPLACEMENT-100 S.M100115SL ARCHITECT FEES-100	100115SL		27.50	17	67800.			67800.	5725.		2465.
189	S.MAIN STREET LINE ASSOC	100115SL		27.50	17	9961.			9961.	880.		362.
190	COSTS-100 S. MAIN CAPITALIZED	063016SL		27.50	17	2000.			2000.	177.		73.
191	INSURANCE-100 S.MAI CAPITALIZED	063016SL		27.50	17	2080.			2080.			0.
192	MORTGAGE INTEREST-20 BUILDING COSTS-23	2063016SL		27.50	17	40661.			40661.	2157.		1479.
193	SPRUCE ST BUILDING	063016SL		27.50	17	1168553.			1168553.	61973.		42493.
194	COSTS-BERKLEY	063016SL		27.50	17	201768.			201768.	7337.		7337.
195	APPLIANCES-BERKLEY CAPITALIZED	063016SL		27.50	17	4667.			4667.	170.		170.
200	MORTGAGE INTEREST-30 CAPITALIZED	3063017SL		27.50	17	4503.			4503.	164.		164.
201	INSURANCE-104 RICHM CAPITALIZED	063017SL		27.50	17	5696.			5696.			147.
202	BUILDING COSTS-104 CAPITALIZED	063017SL		27.50	17	23630.			23630.	609.		609.
203	MORTGAGE INTEREST-10 CAPITALIZED	1063017SL		27.50	17	7564.			7564.	195.		195.
205	INSURANCE-100 S.MAI ARCHITECT FEES-100	063017SL		27.50	17	3628.			3628.	0.		0.
206	S.MAIN STREET LINE ASSOC	063017SL		27.50	17	9343.			9343.	0.		0.
207	COSTS-100 S. MAIN GUTTERS & LEADERS	063017SL		27.50	17	9720.			9720.	0.		0.
208	100 S. MAIN STREET	110716SL		27.50	17	2683.			2683.	178.		98.

2018 DEPRECIATION AND AMORTIZATION REPORT
 - CURRENT YEAR FEDERAL - PACIFIC HOUSE, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
209	ARCHITECT FEES-100 S.MAIN STREET CAPITALIZED	121216SL		27.5017		4620.			4620.	688.		168.
210	INSURANCE-190 STILL BUILDING COSTS-190	063017SL		27.5017		12659.			12659.			0.
211	STILLWATER ARCHITECT &	063017SL		27.5017		24484.			24484.			0.
212	ENGINEERING FEES-190 CAPITALIZED	063017SL		27.5017		64431.			64431.			0.
213	INSURANCE-23 SPRUCE SHED-23 SPRUCE	063017SL		27.5017		3150.			3150.	168.		115.
215	STREET FENCE-23 SPRUCE	122816SL		10.0017		4988.			4988.	998.		499.
216	STREET BLACKTOP-23 SPRUCE	072216SL		10.0017		25100.			25100.	5020.		2510.
217	STREET CONSTRUCTION	090616SL		20.0017		17100.			17100.	1795.		855.
220	COSTS-23 SPRUCE STR CAPITALIZED	123116SL		27.5017		5687.			5687.	302.		207.
221	MORTGAGE INTEREST-20 BUILDING	063017SL		27.5017		1493.			1493.	54.		54.
222	COSTS-BERKLEY ENTRY WAY	063017SL		27.5017		324552.			324552.	4295.		11802.
223	CONSTRUCTION - PACI ENGINEERING FEES-	041817SL		27.5017		23410.			23410.	1028.		851.
225	PACIFIC STREET APPRAISAL- PACIFIC	012217SL		27.5017		8141.			8141.	358.		296.
227	STREET ENTRY WAY	011817SL		27.5017		3500.			3500.	152.		127.
230	CONSTRUCTION - PACI ARCHITECT FEES-	061017SL		27.5017		27523.			27523.	1001.		1001.
231	PACIFIC STREET ENTRY WAY	043017SL		27.5017		4070.			4070.	179.		148.
232	CONSTRUCTION - PACI FRONT BUILDING-100	063018SL		27.5017		7878.			7878.	131.		286.
233	S.MAIN STREET	063018SL		27.5017		36762.			36762.			0.

2018 DEPRECIATION AND AMORTIZATION REPORT
 - CURRENT YEAR FEDERAL - PACIFIC HOUSE, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
234	REAR BUILDING-100 S.MAIN STREET	063018SL		27.5017		10082.			10082.	132.		327.
235	ARCHITECT FEES- PACIFIC STREET	063018SL		27.5017		9679.			9679.	161.		352.
236	PROJECT-PACIFIC STR ELEVATOR	063018SL		27.5017		28113.			28113.	469.		469.
237	RENOVATIONS-PACIFIC INTERIOR	063018SL		27.5017		51053.			51053.			1857.
238	FLOORING-PACIFIC STREET	063018SL		27.5017		100066.			100066.			3679.
240	PROJECT-PACIFIC STR SOLAR	063018SL		27.5017		156917.			156917.			5706.
242	CAPITALIZED MORTGAGE INTEREST-38 ANN ST	063018SL		27.5017		10920.			10920.	152.		397.
243	BUILDING COSTS-104 RICHMOND HILL	063018SL		27.5017		960586.			960586.			24745.
244	MAIL BOXES-104 RICHMOND HILL	063018SL		27.5017		1200.			1200.			31.
245	BUILDING COSTS-190 STILLWATER	063018SL		27.5017		86007.			86007.			0.
246	BUILDING COSTS-23 SPRUCE ST	063018SL		27.5017		24714.			24714.	382.		959.
247	BUILDING COSTS-BERKLEY	063018SL		27.5017		76775.			76775.	1324.		2980.
248	BUILDING COSTS-FAIRFIELD COM	063019SL		27.5019H		5058.			5058.			0.
249	BUILDING COSTS-36 ANN STREET	063019SL		27.5019H		179264.			179264.			0.
250	CAPITALIZED LOAN COSTS-100 SOUTH MAI	063018SL		27.5017		4250.			4250.			0.
253	SECURITY SYSTEM-100 SOUTH MAIN	063019SL		27.5019H		95250.			95250.			2579.
255	GENERATOR-PACIFIC STREET	103118SL		27.5019H		28540.			28540.			1038.
256	FLOORING-PACIFIC STREET	102418SL		27.5019H		4004.			4004.			146.

2018 DEPRECIATION AND AMORTIZATION REPORT
 - CURRENT YEAR FEDERAL - PACIFIC HOUSE, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
257	SOLAR PROJECT-PACIFIC STR INTERIOR	10/24/18	SL	27.50	19H	4658.			4658.			169.
259	RENOVATIONS-PACIFIC ARCHITECT FEES-	12/11/18	SL	27.50	19H	40000.			40000.			1855.
260	PACIFIC STREET-DEPO BUILDING COSTS-38	06/23/19	SL	27.50	19H	11000.			11000.			0.
264	ANN STREET BUILDING COSTS-104	06/30/12	SL	27.50	17	5006.			5006.	330.		182.
266	RICHMOND HILL BUILDING COSTS-190	06/30/19	SL	27.50	19H	169247.			169247.			4359.
267	STILLWATER BUILDING COSTS-100	06/30/18	SL	27.50	17	86007.			86007.			0.
268	SOUTH MAIN STREET BUILDING COSTS-190	06/30/19	SL	27.50	19H	90434.			90434.			0.
269	STILLWATER BUILDING COSTS-190	06/30/19	SL	27.50	19H	1512252.			1512252.			0.
270	STILLWATER BUILDING COSTS-190	06/30/17	SL	27.50	16	105589.			105589.			0.
	* 990 PAGE 10 TOTAL BUILDINGS					12843598.		0.	12843598.	2735836.		336414.
	LAND											
33	LAND-PACIFIC	06/01/90	L			200000.			200000.			0.
34	LAND-BERKELEY	11/01/99	L			80700.			80700.			0.
35	LAND-STONE STREET	04/12/07	L			120000.			120000.			0.
8438	ANN STREET-LAND	02/29/12	L			194545.			194545.			0.
96	LAND-23 SPRUCE STREET	02/13/13	L			139848.			139848.			0.
121	LAND-104 RICHMOND HILL	05/01/14	L			151447.			151447.			0.
122	LAND-100 SOUTH MAIN STREET	05/16/14	L			21222.			21222.			0.

828102 04-01-18 (D) - Asset disposed * ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2018 DEPRECIATION AND AMORTIZATION REPORT
 - CURRENT YEAR FEDERAL - PACIFIC HOUSE, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
123	LAND-190 STILLWATER	051614L				237290.			237290.			0.
254	LAND-36 ANN STREET	051019L				206065.			206065.			0.
	* 990 PAGE 10 TOTAL LAND					1351117.		0.	1351117.	0.		0.
	OTHER											
1	COPIER DL55	110102SL		5.00	16	7150.			7150.	7150.		0.
2	WASHER	042804SL		5.00	16	6704.			6704.	6704.		0.
3	COMPUTER SERVER SECURITY	063004SL		5.00	16	10170.			10170.	10170.		0.
17	SYSTEM-PACIFIC STREET	041700SL		20.00	16	5088.			5088.	4594.		254.
18	FENCE-BERKELEY SECURITY	022800SL		20.00	16	4660.			4660.	4234.		233.
19	SYSTEM-BERKELEY AIR	022800SL		20.00	16	10110.			10110.	9194.		506.
20	CONDITIONER-PACIFIC	080499SL		5.00	16	6970.			6970.	6970.		0.
21	ALARM CONTROL PANEL OFFICE	032801SL		20.00	16	910.			910.	614.		46.
36	EQUIPMENT-PACIFIC OFFICE	010192SL		7.00	16	600.			600.	600.		0.
37	EQUIPMENT-PACIFIC OFFICE	110193SL		7.00	16	1720.			1720.	1720.		0.
38	EQUIPMENT-PACIFIC OFFICE	050195SL		7.00	16	1442.			1442.	1442.		0.
39	EQUIPMENT-PACIFIC OFFICE	090195SL		7.00	16	12629.			12629.	12629.		0.
40	EQUIPMENT-PACIFIC TELEPHONE	060190SL		7.00	16	29575.			29575.	29575.		0.
41	SYSTEM-PACIFIC	050100SL		5.00	16	9850.			9850.	9850.		0.

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction
 (D) - Asset disposed

2018 DEPRECIATION AND AMORTIZATION REPORT
 - CURRENT YEAR FEDERAL - PACIFIC HOUSE, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
42	FILES/CHAIRS/DESKS	030601SL		7.00	16	2400.			2400.	2400.		0.
43	DESKS	062501SL		7.00	16	878.			878.	878.		0.
44	DESK/FILE	030701SL		7.00	16	800.			800.	800.		0.
45	MAHOGANY DESK DESK AND CHAIR	082001SL		7.00	16	285.			285.	285.		0.
46	(GREY) DESK AND CHAIR	112901SL		7.00	16	380.			380.	380.		0.
47	(BLACK)	112901SL		7.00	16	409.			409.	409.		0.
48	MISC-ADDITION COMPUTER	010107SL		5.00	16	7058.			7058.	7058.		0.
49	EQUIPMENT-PACIFIC	020196SL		5.00	16	1428.			1428.	1428.		0.
50	COMPUTERS-PACIFIC	010199SL		5.00	16	43801.			43801.	43801.		0.
51	SYSTEM SERVER	063001SL		5.00	16	2026.			2026.	2026.		0.
52	COMPUTER (J.KARAS)	010702SL		5.00	16	634.			634.	634.		0.
53	COMPUTER	121301SL		5.00	16	1224.			1224.	1224.		0.
54	COMPUTER-BERKELEY	012802SL		5.00	16	639.			639.	639.		0.
56	FREEZER-PACIFIC	111799SL		5.00	16	2550.			2550.	2550.		0.
57	COMPUTERS-PACIFIC MITSUBISHI	020400SL		3.00	16	1250.			1250.	1250.		0.
58	VCR-PACIFIC MITSUBISHI	121599SL		3.00	16	100.			100.	100.		0.
59	60" TV-PACIFIC SAMSUNG	121599SL		3.00	16	2460.			2460.	2460.		0.
60	VCR-BERKELEY	121599SL		3.00	16	300.			300.	300.		0.

828102 04-01-16 (D) - Asset disposed * ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2018 DEPRECIATION AND AMORTIZATION REPORT
 - CURRENT YEAR FEDERAL - PACIFIC HOUSE, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
61	PIANO-PACIFIC	120799SL		5.00	16	1000.			1000.	1000.		0.
64	COMPUTER REFRIGERATOR-PACIFI	010108SL		3.00	16	8000.			8000.	8000.		0.
67C		010109SL		10.00	16	2117.			2117.	2014.		103.
68	COMPUTER EQUIPMENT	010109SL		3.00	16	9578.			9578.	9578.		0.
69	JEEP BACKUP SERVER-HENRY	050109SL		5.00	16	21430.			21430.	15068.		0.
71	STREET STEAM SANITATION	032610SL		3.00	16	1218.			1218.	1218.		0.
76	SYSTEM-PACIFIC STREET	020311SL		5.00	16	2950.			2950.	2950.		0.
78	FREEZER PACIFIC STREET	080110SL		10.00	16	2785.			2785.	1640.		279.
79	FURNITURE & FIXTURE	112110SL		7.00	16	36391.			36391.	30034.		5199.
80	PORTABLE WATER SYSTEM	070110SL		5.00	16	1671.			1671.	1671.		0.
86	PACIFIC HOUSE-65 "TV	013013SL		10.00	16	1290.			1290.	774.		129.
87	HOUSE-REFRIGERATOR	051013SL		10.00	16	2959.			2959.	1776.		296.
88	PACIFIC HOUSE-FLOOR	112912SL		5.00	16	1065.			1065.	1065.		0.
95	PACIFIC HOUSE-BEDS	060113SL		15.00	16	6399.			6399.	1492.		427.
130	COMPUTER	071113SL		3.00	17	1250.			1250.	1250.		0.
133	PROGRAM EQUIPMENT	063001SL		5.00	16	2944.			2944.	2944.		0.
140	COSTS-BEACON 11	012814		240M	43	20282.			20282.	507.		1014.
147	COMPUTER	093014SL		3.00	17	8980.			8980.	8980.		0.

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

(D) - Asset disposed

2018 DEPRECIATION AND AMORTIZATION REPORT
 - CURRENT YEAR FEDERAL - PACIFIC HOUSE, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis *	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
153	FENCE-38 ANN STREET	091714SL		15.00	17	19457.			19457.	3684.		1297.
154	FURNITURE-38 ANN STREET	120514SL		7.00	17	4677.			4677.	1676.		668.
160	FIRE SYSTEM-100 SOUTH MAIN STREET	063015SL		7.00	17	625.			625.	484.		56.
169	COPIER DL55	110102SL		5.00	16	7150.			7150.	7150.		0.
181	TELEPHONE WASHER &	031416SL		7.00	16	7800.			7800.	2228.		1114.
182	DRYER-STONE STREET	040516SL		10.00	16	1169.			1169.	351.		117.
197	HONDA ODESSY	112116SL		5.00	16	28889.			28889.	11556.		5778.
198	HONDA CRV	112116SL		5.00	16	26602.			26602.	10640.		5320.
199	APPLIANCES-38 ANN STREET	011017SL		10.00	17	2118.			2118.	424.		212.
204	WASHER & DRYER-100 SOUTH MAIN STREET	063017SL		10.00	17	2324.			2324.	464.		232.
214	FURNITURE-23 SPRUCE STREET	122816SL		7.00	17	29754.			29754.	8502.		4251.
218	APPLIANCES-23 SPRUCE STREET	090616SL		10.00	17	15500.			15500.	3100.		1550.
219	SECURITY CAMERA-23 SPRUCE STREET	090616SL		15.00	17	19641.			19641.	3143.		1309.
226	COMPRESSOR- PACIFIC STREET	011617SL		10.00	17	7301.			7301.	1460.		730.
228	CAMERAS- PACIFIC STREET	032217SL		10.00	17	15289.			15289.	3058.		1529.
229	2 STEAMCLEANERS- PACIFIC STREET	091516SL		10.00	17	7390.			7390.	1478.		739.
239	(3) DRYERS-PACIFIC STREET	063018SL		3.00	17	2258.			2258.	753.		226.
241	DRYER-STONE STREET	063018SL		10.00	17	1356.			1356.			136.

2018 DEPRECIATION AND AMORTIZATION REPORT
 - CURRENT YEAR FEDERAL - PACIFIC HOUSE, INC.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
251	FURNITURE-100 SOUTH MAIN	110218SL		7.00	19C	11508.			11508.			2054.
	FIRE PANEL-100											
252	SOUTH MAIN WASHER &	063019SL		10.00	19D	5249.			5249.			525.
258	DRYER-PACIFIC STREET	111918SL		10.00	19D	18274.			18274.			1827.
261	COMPUTER DOOR TO SERVER	111309SL		10.00	17	1900.			1900.	1520.		190.
262	TELEPHONE-PACIFIC STREET	042710SL		7.00	17	5300.			5300.	5300.		0.
263	WEBSITE-137 HENRY STREET	073118SL		3.00	19A	2112.			2112.			704.
265	FURNITURE-104 RICHMOND HILL	121418SL		7.00	19C	11195.			11195.			1998.
	* 990 PAGE 10 TOTAL OTHER					563347.		0.	563347.	333000.		41048.
	* GRAND TOTAL 990 PAGE 10 DEPR & AMOR					14758062.		0.	14758062.	3068836.		377462.
	CURRENT YEAR ACTIVITY											
	BEGINNING BALANCE					12363952.		0.	12363952.	3068836.		
	ACQUISITIONS					2394110.		0.	2394110.	0.		
	DISPOSITIONS					0.		0.	0.	0.		
	ENDING BALANCE					14758062.		0.	14758062.	3068836.		

- NEXT YEAR FEDERAL - PACIFIC HOUSE, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
	BUILDINGS								
4	BATHROOM IMPROVEMENTS-STONE STREET	062204SL		39.00	9600.		9600.	2474.	246.
5	BUILDING-STONE STREET	041207SL		39.00	519817.		519817.	149951.	13329.
6	BUILDING-PACIFIC STREET	060190SL		31.50	1551326.		1551326.	1541720.	9606.
7	IMPROVEMENTS-PACIFIC STREET	090192SL		31.50	1116.		1116.	940.	35.
8	IMPROVEMENTS-PACIFIC STREET	010195SL		39.00	1135.		1135.	742.	29.
9	IMPROVEMENTS-PACIFIC STREET	030196SL		39.00	870.		870.	621.	22.
11	IMPROVEMENTS-PACIFIC STREET	070196SL		39.00	9943.		9943.	5854.	255.
12	IMPROVEMENTS-PACIFIC STREET	013197SL		39.00	8580.		8580.	5885.	220.
13	RENOVATION-PACIFIC STREET	040199SL		39.00	13678.		13678.	7108.	351.
14	IMPROVEMENTS-PACIFIC STREET	090191SL		31.50	3000.		3000.	2645.	95.
15	BUILDING-BERKELEY	110199SL		40.00	188300.		188300.	93437.	4708.
16	IMPROVEMENTS-BERKELEY	110199SL		40.00	373932.		373932.	183682.	9348.
22	IMPROVEMENTS-PACIFIC STREET	031505SL		39.00	115922.		115922.	44878.	2972.
23	BATHROOM IMPROVEMENTS-PACIFIC STREET	063007SL		39.00	105448.		105448.	32836.	2704.
24	IMPROVEMENTS-PACIFIC STREET	082404SL		39.00	1800.		1800.	682.	46.
25	IMPROVEMENTS-PACIFIC STREET	082404SL		39.00	586.		586.	223.	15.
26	IMPROVEMENTS-PACIFIC STREET	021705SL		39.00	900.		900.	330.	23.
27	IMPROVEMENTS-PACIFIC STREET	111904SL		39.00	517.		517.	190.	13.
28	IMPROVEMENTS-PACIFIC STREET	020705SL		39.00	1703.		1703.	634.	44.
29	IMPROVEMENTS-PACIFIC STREET	092804SL		39.00	676.		676.	251.	17.
30	IMPROVEMENTS-PACIFIC STREET-HVAC	063007SL		20.00	30868.		30868.	18466.	1543.
31	BUILDING IMPROVEMENTS-BATHROOM	111506SL		39.00	243202.		243202.	78979.	6236.
32	REPAIRS-STONE ST	090106SL		39.00	13018.		13018.	3943.	334.
62	IMPROVEMENTS-STONE STREET	010108SL		39.00	4000.		4000.	1124.	103.
63	IMPROVEMENTS	041008SL		39.00	33675.		33675.	17633.	863.
65	PACIFIC STREET BOILER	040109SL		30.00	13115.		13115.	4479.	437.
66	137 HENRY STREET IMPROVEMENTS	040109SL		39.00	34357.		34357.	9087.	881.
70	HVAC PROJECT-PACIFIC STREET	091309SL		39.00	1800.		1800.	404.	46.
74	137 HENRY STREET IMPROVEMENTS	070109SL		39.00	692.		692.	156.	18.
75	137 HENRY STREET IMPROVEMENTS	070109SL		39.00	4650.		4650.	833.	119.
77	BERKLEY ST NEW ROOM	011911SL		27.50	2300.		2300.	916.	84.
81	HVAC PROJECT-PACIFIC STREET	070110SL		27.00	3200.		3200.	1520.	119.
82	HVAC PACIFIC STREET	031212SL		20.00	331793.		331793.	119954.	16590.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

- NEXT YEAR FEDERAL - PACIFIC HOUSE, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
8338	ANN STREET-NEW STEPS	060112SL		20.00	1500.		1500.	306.	75.
8538	ANN STREET-BUILDING	022912SL		27.50	194545.		194545.	29772.	7074.
89	PACIFIC HOUSE-TILING	040213SL		27.50	10569.		10569.	1168.	384.
90	PACIFIC HOUSE-GAS LINE BURNERS	090712SL		27.50	6668.		6668.	1279.	242.
91	PACIFIC HOUSE-EXTERIOR REPAIRS	030713SL		27.50	27475.		27475.	3473.	999.
92	PACIFIC HOUSE-FLOOR REPLACEMENT	031413SL		27.50	86151.		86151.	11721.	3133.
93	PACIFIC HOUSE-REPOINTING	052213SL		27.50	41040.		41040.	12539.	1492.
9438	ANN STREET-DEMOLITION	061113SL		27.50	35360.		35360.	5731.	1286.
97	BUILDING-23 SPRUCE STREET	021313SL		27.50	170935.		170935.	170935.	0.
9838	ANN STREET-CONSULTING FEES	063013SL		27.50	43450.		43450.	7044.	1580.
9938	ANN STREET-CONSTRUCTION COSTS	063013SL		27.50	26529.		26529.	4302.	965.
100	CONSTRUCTION COSTS-23 SPRUCE STREET	063013SL		27.50	12111.		12111.	1118.	440.
102	BUILDING-HALFWAY HOUSE 100 SOUTH MAIN	051614SL		27.50	65466.		65466.	12200.	2381.
103	BUILDING-APTS 100 SOUTH MAIN	051614SL		27.50	45950.		45950.		1671.
104	BUILDING COSTS-100 SOUTH MAIN STREET	063014SL		27.50	1237.		1237.	223.	45.
105	LINE ASSOC COSTS-100 SOUTH MAIN STREET	063014SL		27.50	12737.		12737.	2296.	463.
106	BUILDING-190 STILLWATER AVE	060514SL		27.50	42209.		42209.		1535.
107	ARCH & ENG COSTS-190 STILLWATER AVE	060514SL		27.50	45463.		45463.		1653.
109	BUILDING-190 STILLWATER AVE	060514SL		27.50	15095.		15095.		549.
110	BUILDING-104 RICHMOND HILL	050114SL		27.50	134302.		134302.	3460.	4884.
111	BUILDING COSTS-104 RICHMOND HILL	063014SL		27.50	278.		278.	7.	10.
112	LINE ASSOC FEES-104 RICHMOND HILL	063014SL		27.50	12737.		12737.	328.	463.
113	BUILDING COSTS-23 SPRUCE ST	070113SL		27.50	33421.		33421.	2987.	1215.
114	BUILDING COSTS-23 SPRUCE ST	063014SL		27.50	2556.		2556.	129.	93.
115	RELOCATION COSTS-23 SPRUCE ST	063014SL		27.50	29118.		29118.	2603.	1059.
116	ARCH & ENG COSTS-23 SPRUCE ST	063014SL		27.50	64224.		64224.	5741.	2335.
117	CLOSING COSTS-23 SPRUCE ST	082313SL		27.50	14740.		14740.	1318.	536.
118	BERKLEY HOUSE-ENVIRONMENTAL	063014SL		27.50	1800.		1800.	130.	65.
119	BERKLEY HOUSE-ENGINEER	063014SL		27.50	1550.		1550.	112.	56.
124	KITCHEN UPGRADE-PACIFIC HOUSE	042314SL		27.50	7950.		7950.	728.	289.
125	RENOVATIONS-PACIFIC HOUSE	031014SL		27.50	51269.		51269.	5088.	1864.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2019 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL - PACIFIC HOUSE, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
126	RENOVATION-PACIFIC STREET	031014SL		27.50	7930.		7930.	786.	288.
127	EXTERNAL REPAIR-PACIFIC HOUSE	082813SL		27.50	15485.		15485.	2360.	563.
135	IMPROVEMENTS-STONE STREET	041008SL		39.00	3226.		3226.	1682.	83.
136	BUILDING COSTS-38 ANN STREET	070113SL		27.50	57045.		57045.	9249.	2074.
137	IMPROVEMENTS-ANN STREET	063014SL		27.50	450104.		450104.	72967.	16367.
138	ARCH & ENG COSTS-38 ANN STREET	063014SL		27.50	4378.		4378.	709.	159.
139	BUILDING COSTS-38 ANN STREET	063014SL		27.50	7654.		7654.	1240.	278.
141	HVAC PACIFIC STREET	070113SL		10.00	9709.		9709.	6192.	971.
142	137 HENRY STREET IMPROVEMENTS	072314SL		39.00	4643.		4643.	833.	119.
143	LOCKERS PACIFIC STREET	111714SL		15.00	5468.		5468.	1018.	365.
144	KITCHEN UPGRADE-PACIFIC STREET	121114SL		27.50	25380.		25380.	3118.	923.
145	PROFESSIONAL FEES PACIFIC STREET	052115SL		27.50	11335.		11335.	923.	412.
	PROFESSIONAL FEES PACIFIC								
146	STREET-GENERATOR	052115SL		27.50	1350.		1350.	160.	49.
148	RECORDING FEES 38 ANN STREET	102214SL		27.50	58.		58.	9.	2.
149	ENVIRONMENTAL FEES 38 ANN STREET	072314SL		27.50	1800.		1800.	290.	65.
	ARCHITECT & ENGINEERING FEES 38 ANN								
150	STREET	072214SL		27.50	6700.		6700.	1090.	244.
151	CONSULTING FEES 38 ANN STREET	050615SL		27.50	11200.		11200.	1815.	407.
152	BUILDING COSTS-38 ANN STREET	112114SL		27.50	118077.		118077.	19142.	4294.
	CAPITALIZED MORTGAGE INTEREST-38 ANN								
155	STREET	022815SL		27.50	11738.		11738.	1904.	427.
156	BUILDING COSTS-38 ANN STREET	022815SL		27.50	55646.		55646.	9020.	2023.
157	FIRE & SECURITY-104 RICHMOND HILL	103114SL		15.00	4300.		4300.	287.	287.
158	INSURANCE-104 RICHMOND HILL	063015SL		27.50	4169.		4169.	107.	152.
159	BUILDING COSTS-104 RICHMOND HILL	063015SL		27.50	60210.		60210.	1551.	2189.
162	BUILDING COSTS-100 SOUTH MAIN STREET	063015SL		27.50	13559.		13559.	2444.	493.
163	BUILDING COSTS-190 STILLWATER	063015SL		27.50	63686.		63686.		2316.
	CAPITALIZED INSURANCE-23 SPRUCE								
164	STREET	063015SL		27.50	5500.		5500.	492.	200.
165	BUILDING COSTS-23 SPRUCE ST	063015SL		27.50	479666.		479666.	42880.	17442.
167	BUILDING COSTS-BERKLEY	063015SL		27.50	64318.		64318.	4678.	2339.
	CAPITALIZED MORTGAGE								
168	INTEREST-BERKLEY	063015SL		27.50	2964.		2964.	216.	108.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

- NEXT YEAR FEDERAL - PACIFIC HOUSE, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Jr Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
170	BUILDING COSTS-190 STILLWATER CAPITALIZED INSURANCE-23 SPRUCE	063016SL		27.50	34563.		34563.		1257.
171	STREET	063016SL		27.50	9731.		9731.	870.	354.
172	C.I.P.-LIGHTHOUSE	063016SL		20.00	18323.		18323.		916.
173	GENERATOR-PACIFIC STREET ARCH & CONSULTING FEES-PACIFIC	072915SL		27.50	67806.		67806.	9658.	2466.
174	STREET	010116SL		27.50	18884.		18884.	1305.	687.
175	ALARM SYSTEM UPGRADE-PACIFIC STREET	090115SL		20.00	9975.		9975.	1998.	499.
176	LIGHTING FIXTURES-PACIFIC STREET	100115SL		27.50	46144.		46144.	5734.	1678.
177	ROOF-PACIFIC STREET	110115SL		27.50	44750.		44750.	5288.	1627.
178	LAUNDRY ROOM UPGRADE-PACIFIC STREET	120115SL		27.50	55058.		55058.	5240.	2002.
179	DAY ROOM UPGRADE-PACIFIC STREET	120115SL		27.50	9089.		9089.	862.	331.
180	ELEVATOR PROJECT-PACIFIC STREET CAPITALIZED INSURANCE-104 RICHMOND	040116SL		27.50	40000.		40000.	2910.	1455.
183	HILL	063016SL		27.50	3628.		3628.	93.	132.
184	RICHMOND HILL CAPITALIZED MORTGAGE INTEREST-104	063016SL		27.50	9068.		9068.	234.	330.
185	RICHMOND HILL CAPITALIZED BUILDING COSTS-104	063016SL		27.50	29386.		29386.	757.	1069.
186	ROOF REPLACEMENT-100 S.MAIN STREET	100115SL		27.50	17800.		17800.	2210.	647.
187	WINDOW REPLACEMENT-100 S.MAIN STREET	100115SL		27.50	37665.		37665.	4680.	1370.
188	SIDING REPLACEMENT-100 S.MAIN STREET	100115SL		27.50	67800.		67800.	8190.	2465.
189	ARCHITECT FEES-100 S.MAIN STREET	100115SL		27.50	9961.		9961.	1242.	362.
190	LINE ASSOC COSTS-100 S. MAIN STREET CAPITALIZED INSURANCE-100 S.MAIN	063016SL		27.50	2000.		2000.	250.	73.
191	STREET-FRONT	063016SL		27.50	2080.		2080.		76.
192	SPRUCE STREET CAPITALIZED MORTGAGE INTEREST-23	063016SL		27.50	40661.		40661.	3636.	1479.
193	BUILDING COSTS-23 SPRUCE ST	063016SL		27.50	1168553.		1168553.	104466.	42493.
194	BUILDING COSTS-BERKLEY	063016SL		27.50	201768.		201768.	14674.	7337.
195	APPLIANCES-BERKLEY CAPITALIZED MORTGAGE INTEREST-38 ANN	063016SL		27.50	4667.		4667.	340.	170.
200	STREET	063017SL		27.50	4503.		4503.	328.	164.

2019 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL - PACIFIC HOUSE, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
201	CAPITALIZED INSURANCE-104 RICHMOND HILL	063017SL		27.50	5696.		5696.	147.	207.
202	CAPITALIZED BUILDING COSTS-104 RICHMOND HILL	063017SL		27.50	23630.		23630.	609.	859.
203	CAPITALIZED MORTGAGE INTEREST-104 RICHMOND HILL	063017SL		27.50	7564.		7564.	195.	275.
205	CAPITALIZED INSURANCE-100 S.MAIN STREET	063017SL		27.50	3628.		3628.		132.
206	ARCHITECT FEES-100 S.MAIN STREET	063017SL		27.50	9343.		9343.		340.
207	LINE ASSOC COSTS-100 S. MAIN STREET	063017SL		27.50	9720.		9720.		353.
208	GUTTERS & LEADERS 100 S. MAIN STREET	110716SL		27.50	2683.		2683.	276.	98.
209	ARCHITECT FEES-100 S.MAIN STREET	121216SL		27.50	4620.		4620.	856.	168.
210	CAPITALIZED INSURANCE-190 STILLWATER	063017SL		27.50	12659.		12659.		460.
211	BUILDING COSTS-190 STILLWATER ARCHITECT & ENGINEERING FEES-190	063017SL		27.50	24484.		24484.		890.
212	STILLWATER	063017SL		27.50	64431.		64431.		2343.
213	CAPITALIZED INSURANCE-23 SPRUCE STREET	063017SL		27.50	3150.		3150.	283.	115.
215	SHED-23 SPRUCE STREET	122816SL		10.00	4988.		4988.	1497.	499.
216	FENCE-23 SPRUCE STREET	072216SL		10.00	25100.		25100.	7530.	2510.
217	BLACKTOP-23 SPRUCE STREET	090616SL		20.00	17100.		17100.	2650.	855.
220	CONSTRUCTION COSTS-23 SPRUCE STREET CAPITALIZED MORTGAGE INTEREST-23	123116SL		27.50	5687.		5687.	509.	207.
221	SPRUCE STREET	063017SL		27.50	1493.		1493.	108.	54.
222	BUILDING COSTS-BERKLEY ENTRY WAY CONSTRUCTION - PACIFIC	063017SL		27.50	324552.		324552.	16097.	11802.
223	STREET	041817SL		27.50	23410.		23410.	1879.	851.
225	ENGINEERING FEES- PACIFIC STREET	012217SL		27.50	8141.		8141.	654.	296.
227	APPRAISAL- PACIFIC STREET ENTRY WAY CONSTRUCTION - PACIFIC	011817SL		27.50	3500.		3500.	279.	127.
230	STREET	061017SL		27.50	27523.		27523.	2002.	1001.
231	ARCHITECT FEES- PACIFIC STREET ENTRY WAY CONSTRUCTION - PACIFIC	043017SL		27.50	4070.		4070.	327.	148.
232	STREET	063018SL		27.50	7878.		7878.	417.	286.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2019 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL - PACIFIC HOUSE, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
233	FRONT BUILDING-100 S.MAIN STREET	063018SL		27.50	36762.		36762.		1337.
234	REAR BUILDING-100 S.MAIN STREET	063018SL		27.50	10082.		10082.	459.	367.
235	ARCHITECT FEES- PACIFIC STREET	063018SL		27.50	9679.		9679.	513.	352.
236	ELEVATOR PROJECT-PACIFIC STREET	063018SL		27.50	28113.		28113.	938.	1022.
237	INTERIOR RENOVATIONS-PACIFIC STREET	063018SL		27.50	51053.		51053.	1857.	1856.
238	FLOORING-PACIFIC STREET	063018SL		27.50	100066.		100066.	3679.	3639.
240	SOLAR PROJECT-PACIFIC STREET	063018SL		27.50	156917.		156917.	5706.	5706.
	CAPITALIZED MORTGAGE INTEREST-38 ANN STREET								
242	STREET	063018SL		27.50	10920.		10920.	549.	397.
243	BUILDING COSTS-104 RICHMOND HILL	063018SL		27.50	960586.		960586.	24745.	34930.
244	MAIL BOXES-104 RICHMOND HILL	063018SL		27.50	1200.		1200.	31.	44.
245	BUILDING COSTS-190 STILLWATER	063018SL		27.50	86007.		86007.		3128.
246	BUILDING COSTS-23 SPRUCE ST	063018SL		27.50	24714.		24714.	1341.	899.
247	BUILDING COSTS-BERKLEY	063018SL		27.50	76775.		76775.	4304.	2792.
248	BUILDING COSTS-FAIRFIELD COMMONS	063019SL		27.50	5058.		5058.		184.
249	BUILDING COSTS-36 ANN STREET	063019SL		27.50	179264.		179264.		6519.
	CAPITALIZED LOAN COSTS-100 SOUTH MAIN								
250	MAIN	063018SL		27.50	4250.		4250.		155.
253	SECURITY SYSTEM-100 SOUTH MAIN	063019SL		27.50	95250.		95250.	2579.	3464.
255	GENERATOR-PACIFIC STREET	103118SL		27.50	28540.		28540.	1038.	1038.
256	FLOORING-PACIFIC STREET	102418SL		27.50	4004.		4004.	146.	146.
257	SOLAR PROJECT-PACIFIC STREET	102418SL		27.50	4658.		4658.	169.	169.
259	INTERIOR RENOVATIONS-PACIFIC STREET	121118SL		27.50	40000.		40000.	1855.	1455.
	ARCHITECT FEES- PACIFIC STREET-DEPOSIT								
260	STREET-DEPOSIT	062319SL		27.50	11000.		11000.		400.
264	BUILDING COSTS-38 ANN STREET	063012SL		27.50	5006.		5006.	512.	182.
266	BUILDING COSTS-104 RICHMOND HILL	063019SL		27.50	169247.		169247.	4359.	6154.
267	BUILDING COSTS-190 STILLWATER	063018SL		27.50	86007.		86007.		3128.
268	BUILDING COSTS-100 SOUTH MAIN STREET	063019SL		27.50	90434.		90434.		3289.
269	BUILDING COSTS-190 STILLWATER	063019SL		27.50	1512252.		1512252.		54991.
270	BUILDING COSTS-190 STILLWATER	063017SL		27.50	105589.		105589.		3840.
	* 990 PAGE 10 TOTAL BUILDINGS LAND				12843598.		12843598.	3072250.	403824.
33	LAND-PACIFIC	060190L			200000.		200000.		0.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

- NEXT YEAR FEDERAL - PACIFIC HOUSE, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
34	LAND-BERKELEY	1110199L			80700.		80700.		0.
35	LAND-STONE STREET	041207L			120000.		120000.		0.
8438	ANN STREET-LAND	022912L			194545.		194545.		0.
96	LAND-23 SPRUCE STREET	021313L			139848.		139848.		0.
121	LAND-104 RICHMOND HILL	050114L			151447.		151447.		0.
122	LAND-100 SOUTH MAIN STREET	051614L			21222.		21222.		0.
123	LAND-190 STILLWATER	051614L			237290.		237290.		0.
254	LAND-36 ANN STREET	051019L			206065.		206065.		0.
	* 990 PAGE 10 TOTAL LAND				1351117.		1351117.	0.	0.
	OTHER								
1	COPIER DL55	1110102SL		5.00	7150.		7150.	7150.	0.
2	WASHER	042804SL		5.00	6704.		6704.	6704.	0.
3	COMPUTER SERVER	063004SL		5.00	10170.		10170.	10170.	0.
17	SECURITY SYSTEM-PACIFIC STREET	041700SL		20.00	5088.		5088.	4848.	240.
18	FENCE-BERKELEY	022800SL		20.00	4660.		4660.	4467.	193.
19	SECURITY SYSTEM-BERKELEY	022800SL		20.00	10110.		10110.	9700.	410.
20	AIR CONDITIONER-PACIFIC STREET	080499SL		5.00	6970.		6970.	6970.	0.
21	ALARM CONTROL PANEL	032801SL		20.00	910.		910.	660.	46.
36	OFFICE EQUIPMENT-PACIFIC	010192SL		7.00	600.		600.	600.	0.
37	OFFICE EQUIPMENT-PACIFIC	110193SL		7.00	1720.		1720.	1720.	0.
38	OFFICE EQUIPMENT-PACIFIC	050195SL		7.00	1442.		1442.	1442.	0.
39	OFFICE EQUIPMENT-PACIFIC	090195SL		7.00	12629.		12629.	12629.	0.
40	OFFICE EQUIPMENT-PACIFIC	060190SL		7.00	29575.		29575.	29575.	0.
41	TELEPHONE SYSTEM-PACIFIC	050100SL		5.00	9850.		9850.	9850.	0.
42	FILES/CHAIRS/DESKS	030601SL		7.00	2400.		2400.	2400.	0.
43	DESKS	062501SL		7.00	878.		878.	878.	0.
44	DESK/FILE	030701SL		7.00	800.		800.	800.	0.
45	MAHOGANY DESK	082001SL		7.00	285.		285.	285.	0.
46	DESK AND CHAIR (GREY)	112901SL		7.00	380.		380.	380.	0.
47	DESK AND CHAIR (BLACK)	112901SL		7.00	409.		409.	409.	0.
48	MISC-ADDITION	010107SL		5.00	7058.		7058.	7058.	0.
49	COMPUTER EQUIPMENT-PACIFIC	020196SL		5.00	1428.		1428.	1428.	0.
50	COMPUTERS-PACIFIC	010199SL		5.00	43801.		43801.	43801.	0.
51	SYSTEM SERVER	063001SL		5.00	2026.		2026.	2026.	0.

(D) - Asset disposed * ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

- NEXT YEAR FEDERAL - PACIFIC HOUSE, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
52	COMPUTER (J. KARAS)	010702SL		5.00	634.		634.	634.	0.
53	COMPUTER	121301SL		5.00	1224.		1224.	1224.	0.
54	COMPUTER-BERKELEY	012802SL		5.00	639.		639.	639.	0.
56	FREEZER-PACIFIC	111799SL		5.00	2550.		2550.	2550.	0.
57	COMPUTERS-PACIFIC	020400SL		3.00	1250.		1250.	1250.	0.
58	MITSUBISHI VCR-PACIFIC	121599SL		3.00	100.		100.	100.	0.
59	MITSUBISHI 60"TV-PACIFIC	121599SL		3.00	2460.		2460.	2460.	0.
60	SAMSUNG VCR-BERKELEY	121599SL		3.00	300.		300.	300.	0.
61	PIANO-PACIFIC	120799SL		5.00	1000.		1000.	1000.	0.
64	COMPUTER	010108SL		3.00	8000.		8000.	8000.	0.
67	REFRIGERATOR-PACIFIC	010109SL		10.00	2117.		2117.	2117.	0.
68	COMPUTER EQUIPMENT	010109SL		3.00	9578.		9578.	9578.	0.
69	JEEP	050109SL		5.00	21430.		21430.	15068.	0.
71	BACKUP SERVER-HENRY STREET STEAM SANITATION SYSTEM-PACIFIC	032610SL		3.00	1218.		1218.	1218.	0.
76	STREET	020311SL		5.00	2950.		2950.	2950.	0.
78	PACIFIC STREET FREEZER	080110SL		10.00	2785.		2785.	1919.	279.
79	PACIFIC STREET FURNITURE & FIXTURES	112110SL		7.00	36391.		36391.	35233.	0.
80	PORTABLE WATER SYSTEM	070110SL		5.00	1671.		1671.	1671.	0.
86	PACIFIC HOUSE-65"TV	013013SL		10.00	1290.		1290.	903.	129.
87	PACIFIC HOUSE-REFRIGERATOR	051013SL		10.00	2959.		2959.	2072.	296.
88	PACIFIC HOUSE-FLOOR POLISHER	112912SL		5.00	1065.		1065.	1065.	0.
95	PACIFIC HOUSE-BEDS	060113SL		15.00	6399.		6399.	1919.	427.
130	COMPUTER	071113SL		3.00	1250.		1250.	1250.	0.
133	PROGRAM EQUIPMENT	063001SL		5.00	2944.		2944.	2944.	0.
140	MORTAGE COSTS-BEACON 11	012814		240M	20282.		20282.	1521.	1014.
147	COMPUTER	093014SL		3.00	8980.		8980.	8980.	0.
153	FENCE-38 ANN STREET	091714SL		15.00	19457.		19457.	4981.	1297.
154	FURNITURE-38 ANN STREET	120514SL		7.00	4677.		4677.	2344.	668.
160	FIRE SYSTEM-100 SOUTH MAIN STREET	063015SL		7.00	625.		625.	540.	85.
169	COPIER DL55	110102SL		5.00	7150.		7150.	7150.	0.
181	TELEPHONE	031416SL		7.00	7800.		7800.	3342.	1114.
182	WASHER & DRYER-STONE STREET	040516SL		10.00	1169.		1169.	468.	117.
197	HONDA ODESSY	112116SL		5.00	28889.		28889.	17334.	5778.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

- NEXT YEAR FEDERAL - PACIFIC HOUSE, INC.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
198	HONDA CRV	112116SL		5.00	26602.		26602.	15960.	5320.
199	APPLIANCES-38 ANN STREET	011017SL		10.00	2118.		2118.	636.	212.
204	WASHER & DRYER-100 SOUTH MAIN STREET	063017SL		10.00	2324.		2324.	696.	232.
214	FURNITURE-23 SPRUCE STREET	122816SL		7.00	29754.		29754.	12753.	4251.
218	APPLIANCES-23 SPRUCE STREET	090616SL		10.00	15500.		15500.	4650.	1550.
219	SECURITY CAMERA-23 SPRUCE STREET	090616SL		15.00	19641.		19641.	4452.	1309.
226	COMPRESSOR- PACIFIC STREET	011617SL		10.00	7301.		7301.	2190.	730.
228	CAMERAS- PACIFIC STREET	032217SL		10.00	15289.		15289.	4587.	1529.
2292	STEAMCLEANERS- PACIFIC STREET	091516SL		10.00	7390.		7390.	2217.	739.
239(3)	DRYERS-PACIFIC STREET	063018SL		3.00	2258.		2258.	979.	753.
241	WASHER & DRYER-STONE STREET	063018SL		10.00	1356.		1356.	136.	136.
251	FURNITURE-100 SOUTH MAIN	110218SL		7.00	11508.		11508.	2054.	1644.
252	FIRE PANEL-100 SOUTH MAIN	063019SL		10.00	5249.		5249.	525.	525.
258	WASHER & DRYER-PACIFIC STREET	111918SL		10.00	18274.		18274.	1827.	1827.
261	COMPUTER DOOR TO SERVER	111309SL		10.00	1900.		1900.	1710.	190.
262	TELEPHONE-PACIFIC STREET	042710SL		7.00	5300.		5300.	5300.	0.
263	WEBSITE-137 HENRY STREET	073118SL		3.00	2112.		2112.	704.	704.
265	FURNITURE-104 RICHMOND HILL	121418SL		7.00	11195.		11195.	1998.	1599.
	* 990 PAGE 10 TOTAL OTHER				563347.		563347.	374048.	35343.
	* GRAND TOTAL 990 PAGE 10 DEPR & AMORT				14758062.		14758062.	3446298.	439167.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone