PUBLIC

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047 2022 Open to Public

Department of the Treasury

Inter	nal Revenue Servi	Go to www.irs.gov/Form990 for instructions and the latest	information.		Inspection
Α	For the 2022	calendar year, or tax year beginning , and ending			
В	Check if applicable:	C Name of organization DOWNSTREET HOUSING AND COMMUNITY		D Employe	r identification number
	Address change	DEVELOPMENT, INC.			
Ш	· ·	Doing business as		**_*	**3473
	Name change	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephon	
	Initial return	22 KEITH AVENUE, SUITE 100		802-	476-4493
H	Final return/	City or town, state or province, country, and ZIP or foreign postal code			
Ш	terminated	BARRE VT 05641-3709		<b>G</b> Gross rec	eipts\$ 6,278,005
	Amended return	F Name and address of principal officer:		G GIUSS IEC	eibiz
	Application pending		H(a) Is this a	group return for	subordinates Yes X No
	Application pending	ANGIE HARBIN (STARTED IN 2022)	11/15 4 11		luded? Yes No
		22 KEITH AVENUE, SUITE 100		ubordinates inc	.aasa.
		BARRE VT 05641-3709	If "No	o," attach a list.	See instructions
ı	Tax-exempt status	X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or 527			
J	Website:	WW.DOWNSTREET.ORG	H(c) Group ex	kemption numb	er
ĸ	Form of organizatio		Year of formation:		M State of legal domicile: VT
0000000000		ummary			
a)	-	escribe the organization's mission or most significant activities:			
ĕ		ISTREET STRENGTHENS THE COMMUNITIES OF CENTRAL VE			
na	PEOI	PLE, PROVIDING AFFORDABLE HOMES, AND CONNECTING P	EOPLE TO	THE RE	SOURCES
Æ	AND	SERVICES THEY NEED TO THRIVE.			
Governance	2 Check to	nis box if the organization discontinued its operations or disposed of more than it	25% of its net	assets.	
ø	3 Number	of voting members of the governing body (Part VI, line 1a)		3	14
Se		of independent voting members of the governing body (Part VI, line 1b)		4	14
Ę	5 Total nu	mber of individuals employed in calendar year 2022 (Part V, line 2a)		5	43
Activities		ashow of valuations (actimate if passessm)			15
ĕ		mber of volunteers (estimate if necessary)			
	/a rotal un	related business revenue from Part VIII, column (C), line 12		7a	-1,133
	<b>b</b> Net unre	lated business taxable income from Form 990-T, Part I, line 11			0
			Prior Y		Current Year
ne	8 Contribu	tions and grants (Part VIII, line 1h)		2,148	3,658,720
en	_	service revenue (Part VIII, line 2g)	•	2,897	2,255,193
Revenue		ent income (Part VIII, column (A), lines 3, 4, and 7d)		1,687	40,229
Œ	11 Other re	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		6,875	215,847
	12 Total rev	venue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,19	3,607	6,169,989
	13 Grants a	nd similar amounts paid (Part IX, column (A), lines 1–3)	70	4,429	416,808
		paid to or for members (Part IX, column (A), line 4)			0
s		, other compensation, employee benefits (Part IX, column (A), lines 5–10)	2 02	9,707	2,218,590
Se	16 Oddanes	onal fundraising face (Part IV, column (A), line 11a)	2,02	J, 101	<u> </u>
benses	I Tatal for	onal fundraising fees (Part IX, column (A), line 11e)			U
EX		idraising expenses (Part IX, column (D), line 25) 108, 185	1 00	4 001	1 005 600
ш		penses (Part IX, column (A), lines 11a–11d, 11f–24e)		4,991	1,995,690
	18 Total ex	penses. Add lines 13–17 (must equal Part IX, column (A), line 25)		9,127	4,631,088
<del></del>	19 Revenu	e less expenses. Subtract line 18 from line 12		4,480	1,538,901
Net Assets or	3		Beginning of C		End of Year
Sset	<b>20</b> Total as	sets (Part X, line 16)		8,701	17,964,468
ŽŽ.	21 Total lia	pilities (Part X, line 26)		0,658	4,202,956
<u> </u>	22 Net asse	ets or fund balances. Subtract line 21 from line 20	12,15	8,043	13,761,512
F	Part II S	gnature Block			
U	Inder penalties o	f perjury, I declare that I have examined this return, including accompanying schedules and si	atements, and t	o the best of	mv knowledge and belief, it
		complete. Declaration of preparer (other than officer) is based on all information of which preparer			,
					-
Sig	Signatu	e of officer		Date	
	ייפ		DIDECE		
He		IE HARBIN (STARTED IN 2022) EXECUTIVE	DIRECT	JR	
		print name and title	T _		
_		pe preparer's name Preparer's signature	Date	Check	if PTIN
Pai	KANDA	LL L. SARGENT, CPA		self-em	nployed *******
Pre	eparer Firm's n	ame JMM & ASSOCIATES, PC		Firm's EIN	**-***0081
Us	e Only	463 MOUNTAIN VIEW DRIVE, SUITE 403	İ		
	Firm's a	COLCUDORD IN OF 44C		Phone no.	802-655-5665
Ma		iss this return with the preparer shown above? See instructions			X Yes No
		Juction Act Notice, see the separate instructions.			Eorm 990 (2022)

form 990 (2022) DOWNSTREET HOUSING AND COMMUNITY **-***3473	Page <b>2</b>
Part III Statement of Program Service Accomplishments	
Check if Schedule O contains a response or note to any line in this Part III	<u>X</u>
1 Briefly describe the organization's mission:	
DOWNSTREET STRENGTHENS THE COMMUNITIES OF CENTRAL VERMONT	BY ENGAGING WITH
PEOPLE, PROVIDING AFFORDABLE HOMES, AND CONNECTING PEOPLE	
AND SERVICES THEY NEED TO THRIVE	
AND SERVICES THEI NEED TO THRIVE.	
2 Did the organization undertake any significant program services during the year which were not listed on the	
. 5 000 000 570	Yes X No
	Tes A No
If "Yes," describe these new services on Schedule O.	
3 Did the organization cease conducting, or make significant changes in how it conducts, any program	
services?	Yes X No
If "Yes," describe these changes on Schedule O.	
4 Describe the organization's program service accomplishments for each of its three largest program services, as m	
expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation	ns to others,
the total expenses, and revenue, if any, for each program service reported.	
<b>4a</b> (Code: ) (Expenses \$ 2,084,514 including grants of \$ 100,749 ) (Reven	nue \$ 1,221,257)
PROPERTY MANAGEMENT - ACCOUNTS FOR THE SERVICES PROVIDED	
DDODEDTIES IN WHICH DOWNSTREET IS AN INVESTOR	
FROFERITED IN WHICH DOWNDINEEL ID AN INVESTOR.	
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<b>4b</b> (Code: ) (Expenses \$ 962,757 including grants of \$ ) (Reven	nue \$ 713,217)
PROPERTY OPERATIONS - ACCOUNTS FOR THE RENTAL ACTIVITY AN	
THE FOLLOWING PROJECTS: BROMUR, VERDMONT, LIMEHURST MOBIL	
HILLSIDE, BRIDGE STREET, GUIDICI, LAUREL STREET, GOOD NEI	GHBORS, PHOENIX
HOUSE, AND WHISTLESTOP MOBILE HOME PARK.	
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••••••	
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•	
	20.005
<b>4c</b> (Code: ) (Expenses \$ 658,770 including grants of \$ 316,059 ) (Reven HOMEOWNERSHIP - ACCOUNTS FOR THE ACTIVITIES OF DOWNSTREET	nue \$ 39,025)
	''S HOMEOWNERSHIP
CENTER.	
• • • • • • • • • • • • • • • • • • • •	
•	
***************************************	
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•	
•	
4d Other program services (Describe on Schedule O.)	
	81,694)
<b>4e</b> Total program service expenses 4 , 047 , 355	

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	and the second of the second s			
4	Is the organization described in section 501(a)(2) or 4047(a)(1) (other than a private foundation)? If "Vec."		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		21	
Ū	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		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? If "Yes," complete Schedule D, Part IV	9	X	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			3.7
44	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		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.  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes,"</i>			
а	complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more	Па	Λ	
D	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more	110		21
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	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)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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	4.41		3.7
4-	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	45		v
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	15		X
10		16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	10		21
• •	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
-	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and II	21	X	

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Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on 22 Χ Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes." complete Schedule J 23 Χ 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 **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b 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? 24c **d** Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 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 Χ 25a 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? Χ If "Yes," complete Schedule L, Part I 25b Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II Χ 26 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III Χ 27 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a **b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," Χ complete Schedule N, Part II 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 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 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 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 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable Χ related organization? If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Χ Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O. Statements Regarding Other IRS Filings and Tax Compliance Part V 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 on line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

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28 International Control of the comployees reported on Form W-S. Transmittal of Wage and Tax Statements (Ref of the Cealendary area ending with or willin the year covered by this return  8 Italians on the reported on line 2a, did the organization file all required federal employment tax returns?  9 2b X  10 If the organization have unrelated business gross income of \$1.000 or more during the year?  9 3a X  10 If Yeas, "I and filled a Form 900-T for this year? If Yo' to line 3b, provide an explanation on Schodule O.  9 3b X  11 If Yeas, "I and filled a Form 900-T for this year? If Yo' to line 3b, provide an explanation on Schodule O.  9 3b X  11 If Yeas, "I and the fill of the companization have an interest in, or a significant on Other financial account; a foreign country  12 If Yeas, "I and the mane of the foreign country  13 If Yeas," admit the mane of the foreign country  14 If Yeas, "I and the mane of the foreign country  15 Was the organization show the reference of the provides of the scholar transaction of the region of the provides of the scholar transaction of the region of the provides of the scholar transaction of the region of the provides of the scholar transaction of the region of the provides of the scholar transaction of the region of the provides of the scholar transaction of the region of the provides of the scholar transaction of the region of the provides of the scholar transaction of the region of the provides of the paper?  10 If Yeas, "I did the organization include with every solicitation and expense statement that such contributions or gifts were not tax deductible?  11 If Yeas, "I did the organization of the visual of the goods or services provided?  12 If Yeas, "I did the organization of the visual of the goods or services provided?  13 If Yeas, "I did the organization organization in access of \$75 made partly as a contribution and partly for goods and servic		ort V Statements Regarding Other IRS Filings and Tax Compliance (con	ntinu	ed)		Yes	No.				
Statements, fleed for the calendar year ending with or within the year covered by this return 2 d 2 X X 3	100000000000000000000000000000000000000		10.770	<i>-</i>		. 00	110				
b If all least one is reported on line 2a, did the organization for all required federal employment (as returns? 3 & X   M   W   W   S   has if filled a form 900-1 for this year? If No? to line 3b, provide an explanation on Schodulo 0   3b   X   A   M   W   W   S   has if filled a form 900-1 for this year? If No? to line 3b, provide an explanation on Schodulo 0   3b   X   A   A   W   W   S   M   W   S   M   M   M   M   M   M   M   M   M			2a	43							
38   X   X   X   X   X   X   X   X   X	b	, , , , , , , , , , , , , , , , , , ,									
b If Vere, "has it field a Form 990-T for this year? If No'r to fire 3b, provide an explanation on Schedule O.  a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  4	_										
4a Al any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts?)  57 (**ex** enter the name of the foreign country*)  58 (**ex** enter the name of the foreign country*)  59 (**ex** enter the name of the foreign country*)  50 (**ex** enter the organization approximation that it was or is a party to a prohibled tax sheller transaction?  50 (**ex** enter the organization that it was or is a party to a prohibled tax sheller transaction?  50 (**ex** enter the name of the organization that it was or is a party to a prohibled tax sheller transaction?  51 (**ex** enter the name of the organization that it was or is a party to a prohibled tax sheller transaction?  52 (**ex** enter the name of the organization that it was or is a party to a prohibled tax sheller transaction?  53 (**ex** enter the name of the organization that it was or is a party to a prohibled tax sheller transaction?  54 (**ex** enter the organization have annual gross receipts that are normally greater than \$100,000, and did the organization to a total extended the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles.  55 (**ex** enter the organization that may receive deductible contributions under section 170(c).  56 (**ex** enter the organization enter than year payment in excess of \$75 made party as a contribution and party for goods and services provided?  57 (**ex** enter the organization enter than year payment in excess of \$75 made party as a contribution and party for goods.  58 (**ex** enter the organization enter than year payment in excess of \$75 made party as a contribution and party for goods.  59 (**ex** enter the organization enter than year payment in excess of \$75 made party for year year payment in excess payment year.  50 (**ex** enter than year year year year year year year year	_		dule C	)	$\vdash$						
a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  See instructions for filing requirements for FinCEN Form 114. Report of Foreign Bank and Financial Accounts (FBAR).  B Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5b Did any taxable party norly the organization that it was or is a party to a prohibited tax shelter transaction?  5c If "Yes to line Sa or 8b, did the organization file Form 8886-17?  6b Does the organization solicit any contributions that it was or is a party to a prohibited tax shelter transaction?  6c Does the organization solicit any contributions that the very contribution and solicit any contributions or gifts were not tax deductible as charitable contributions?  6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7c Organizations that may receive deductible contributions under section 170(c).  8d Did the organization steal may receive deductible organization and partity for goods and services provided to the payor?  7a X X  8b If "Yes," did the organization notify the donor of the value of the goods or services provided?  7b Did the organization neceive a payment in excess of \$75 made party as a contribution and party for which it was required to file Form 8282? Bed during the year.  7c Did the organization neceive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7d Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7d Did the organization received any	_										
b If Yes, "after the name of the foreign country See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5c William of the property of the property of the prohibited tax shelter transaction?  5c William organization have annual gross receipts that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible as charitable ontributions?  6a X William organizations shall may receive deductible contributions under section 170(c).  6b Did the organization that may receive deductible contributions under section 170(c).  6c Did the organization shall be a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  7c Organization shall be organization notify the donor of the value of the goods or services provided?  7d Did the organization seel, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  6d If Yes, "Indicate the number of Forms 8282 filed during the year  6d If Yes, "Indicate the number of Forms 8282 filed during the year  7d If Yes, "Indicate the number of Forms 8282 filed during the year  7d If Yes, "Indicate the number of Forms 8282 filed during the year  7d If Yes, "Indicate the number of Forms 8282 filed during the year  7d If Yes, "Indicate the number of Forms 8282 filed during the year  8d If Yes, and the organization received a contribution of qualified intellectual property, did the organization file Form 899 as required?  9d If Yes, and the organization received a contribution of cure, boots, boots, single particulation file Form 899 as required?  9d If the organization received an contribution of cure, boots, boots,				-	4a		Х				
See instructions for filing requirements for FinCEN Form 114. Report of Foreign Bank and Financial Accounts (FBAR).  8 Was the organization aparty to a prohibited six shelter transaction?  9 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  9 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  9 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  9 Did was organization solicit any contributions that were not tax deductible as charitable contributions?  9 Did was organization solicit any contributions that were not tax deductible as charitable contributions or gifts were not tax deductible?  9 Organizations that may receive deductible contributions under section 170(c).  10 Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  10 Did the organization notify the donor of the value of the goods or services provided?  11 Pres, indicate the number of forms 8282 filed during the year  12 Did the organization and yritude, directly or indirectly, to pay premiums on a personal benefit contract?  13 Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 8292 filed during the year  13 Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C7  14 Sponsoring organizations make any taxable distributions under section 4966?  15 Section 591(c)(7) organizations make any taxable distributions under section 4966?  16 Did the sponsoring organizations make any taxable distributions under section 4966?  17 Section 591(c)(12) organizations make any taxable distribution to a donor, donor advised fund maintained by the sponsoring organization make any taxable distribution to a donor, donor advised funds.  18 Did the sponso	b			,							
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	.,				17						
		If "Yes," complete Form 6069.									

Form 990 (2022) DOWNSTREET HOUSING AND COMMUNITY \*\*-\*\*3473 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 14 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent ..... 14 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? Χ Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 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? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? **b** Each committee with authority to act on behalf of the governing body? 8b 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 on Schedule O...... Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. No 10a Did the organization have local chapters, branches, or affiliates? 10a Χ b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? *If "No," go to line 13* 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 13 Did the organization have a written document retention and destruction policy? 14 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? The organization's CEO, Executive Director, or top management official 15a Χ Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? Χ 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? ... Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NONE 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.  $\overline{X}$  Own website  $\overline{X}$  Another's website  $\overline{X}$  Upon request  $\overline{X}$  Other (explain on Schedule O) Describe on 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. State the name, address, and telephone number of the person who possesses the organization's books and records

22 KEITH AVENUE

802-476-4493

05641

BARRE

SCHUYLER ANDERSON

Form 990 (2022) DOWNSTREET HOUSING AND COMMUNITY

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#### 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

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

- 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEĆ) 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. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week	(do no box, ui		Position (do not check more than one box, unless person is both a officer and a director/trustee						( <b>D</b> )  Reportable  compensation  from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations		
(1) ANGIE HARBIN (S		ΙN	20	22	?)							
EXECUTIVE DIRECTOR	40.00			Х				75,487	0	2,604		
(2) CONNIE SNOW (LE	FT IN 20	22	2)					•		,		
EXECUTIVE DIRECTOR	40.00			Х				46,073	0	384		
(3) KEVIN ELLIS	0.00			27				40,075	0	301		
CHAIR	2.00	Х		Х				0	0	0		
(4) LORI BELDING	0.00	25		21				U	<u> </u>	<u> </u>		
VICE CHAIR	2.00	Х		Х				0	0	0		
(5) DAPHNE MAKINSON												
TREASURER	2.00	Х		Х				0	0	0		
(6) PEGEEN MULHERN	0 00											
SECRETARY	2.00	Х		Х				0	0	0		
(7) SAMANTHA ABARE	0 00											
DIRECTOR	2.00	Х						0	0	0		
(8)JIM ALVAREZ												
DIRECTOR	2.00	Х						0	0	0		
(9) DANIEL BARLOW												
DIRECTOR	2.00	Х						0	0	0		
(10) RUBIN BENNETT	0.00	Λ						0	0	<u> </u>		
DIRECTOR	2.00	Х						0	0	0		
(11) CELINE DAVIS	0.00	Λ						0	0	<u> </u>		
DIRECTOR	2.00	Х						0	0	0		

Page	8

Part VII Section A. Officer								s, and Highest Compens	ated Employees (continu	ued)
					C)					
(A) Name and title	(B) Average hours	bo	x, unle	check ess pe	erson	than is both or/trus	n an	(D) Reportable compensation from the	(E) Reportable compensation	(F) Estimated amount of other
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2/ 1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(12) SARAH COPELA		AS								
DIRECTOR	2.00	Х						0	0	0
(13) LARA LANON	0.00	21						0	U	<u> </u>
DIRECTOR	2.00	Х						0	0	0
(14) POLLY NICHOL										
DIRECTOR	2.00	Х						0	0	0
(15) JEANNE RICHA	RDSON									<u> </u>
DIDECTOR	2.00	v						0	0	0
DIRECTOR (16) EMMANUEL RIB	0.00 W WILLIA	X	3					0	0	0
	2.00									0
DIRECTOR (17) VINI K.D. EM	0.00 ERY (LE	X TT	IN	1 2	0.2	22)		0	0	0
DIRECTOR	2.00	X				,		0	0	0
2111201011	0.00							5	3	3
1b Subtotal								121,560		2,988
c Total from continuation sh		, Se	ctio	n A				121,560		2,988
d Total (add lines 1b and 1c) Total number of individuals ( reportable compensation from	including but no	t lim	ited				d ab		than \$100,000 of	2,900
3 Did the organization list any	former officer, of	direc	tor,	trust	ee, l	key e	emp	loyee, or highest compens	sated	Yes No
employee on line 1a? If "Yes  For any individual listed on li organization and related orga	ne 1a, is the su	m of	repo	ortab	ole c	omp	ensa	ation and other compensa		3 X
<ul><li>individual</li><li>5 Did any person listed on line for services rendered to the or</li></ul>		ccru	е со	mpe	nsa	tion f			on or individual	<b>4</b> X
Section B. Independent Contrac		70.	3, 0	эттр	1010	Och	Juur	e o for such person		
Complete this table for your to compensation from the organ	nization. Report							endar year ending with or	within the organization's	
Name and	(A) d business address							Descrip	(B) tion of services	(C) Compensation
2 Total number of independent	t contractors (in	cludi	ing b	ut n	ot lir	nited	to 1	those listed above) who		
received more than \$100,000									0	Form <b>991</b> (2022)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) Total revenue (C) (**D**)
Revenue excluded from tax under (B) Related or exempt Unrelated function revenue business revenue sections 512-514 , Gifts, Grant nilar Amounts **1a** Federated campaigns ..... 1a **b** Membership dues ..... 1b **c** Fundraising events ..... 1c **d** Related organizations ..... 1d Contributions, and Other Sim 1e 2,458,349 **f** All other contributions, gifts, grants, 1,200,371 1f and similar amounts not included above ..... g Noncash contributions included in lines 1a-1f ..... 1<u>g</u> \$ 50,400 h Total. Add lines 1a-1f ..... 3,658,720 Business Code Program Service Revenue 531110 713,217 713,217 2a RENTAL INCOME 531390 653,388 MAINTENANCE INCOME 653,388 531310 567,869 567,869 MANAGEMENT FEES 531310 281,694 281,694 DEVELOPMENT FEES 531390 39,025 39,025 LEASE FEE INCOME **f** All other program service revenue ..... 2,255,193 g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 9,206 9,206 Income from investment of tax-exempt bond proceeds Royalties ..... (ii) Personal 35,935 6a Gross rents 6a 37,068 **b** Less: rental expenses 6b -1,133c Rental inc. or (loss) -1,133 d Net rental income or (loss) -1,133**7a** Gross amount from (ii) Other (i) Securities sales of assets 101,971 other than inventory 7a Other Revenue **b** Less: cost or other basis and sales exps. 7b 70,948 c Gain or (loss) 7c 31,023 31,023 31,023 d Net gain or (loss) ..... **8a** Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 8a **b** Less: direct expenses ..... 8b c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 ..... **b** Less: direct expenses ..... 9b c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances 10a **b** Less: cost of goods sold ..... 10b c Net income or (loss) from sales of inventory **Business Code** 531390 216,980 216,980 11a MISCELLANEOUS INCOME d All other revenue e Total. Add lines 11a-11d ..... 216,980 6,169,989 -1,1339,206 2,503,196 Total revenue. See instructions.

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Part IX Statement of Functional Expenses

	Int IX Statement of Functional Experience			(4)							
Sect	ion 501(c)(3) and 501(c)(4) organizations must co Check if Schedule O contains a respon			complete column (A).							
Do n	on not include amounts reported on lines 6h. 7h. (A) (B) (C) (D)										
	b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses						
1	Grants and other assistance to domestic organizations		•	J ,	•						
	and domestic governments. See Part IV, line 21	100,749	100,749								
2	Grants and other assistance to domestic										
	individuals. See Part IV, line 22	316,059	316,059								
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,	104 540	100 111	0 064	E 4E2						
_	trustees, and key employees	124,548	107,111	9,964	7,473						
6	Compensation not included above to disqualified										
	persons (as defined under section 4958(f)(1)) and										
-	persons described in section 4958(c)(3)(B)	1 647 501	1 264 440	221 020	61 151						
7	Other salaries and wages Pension plan accruals and contributions (include	1,647,521	1,364,440	221,930	61,151						
8		20 272	21 001	E 20E	1 206						
9	section 401(k) and 403(b) employer contributions) Other employee benefits	38,372 264,128	31,801 219,493	5,285 35,279	1,286 9,356						
10		144,021	122,341	16,713	4,967						
11	Payroll taxes Fees for services (nonemployees):	111,021	122,311	10,713	<u> </u>						
	Management	86,625	86,625								
b		8,848	7,045		1,803						
C	Legal Accounting	37,115	7,015	37,115	1,003						
	Lobbying	377113		377223							
	Professional fundraising services. See Part IV, line 17										
f	Investment management fees										
g	Other. (If line 11g amount exceeds 10% of line 25, column										
Ū	(A) amount, list line 11g expenses on Schedule O.)	58,354	43,244	15,110							
12	Advertising and promotion	35,314	9,936	19,856	5,522						
13	Office expenses	109,335	102,558	804	5,973						
14	Information technology										
15	Royalties										
16	Occupancy	197,402	195,434	1,813	155						
17	Travel	31,447	24,177	7,113	157						
18	Payments of travel or entertainment expenses										
	for any federal, state, or local public officials	1.000	15 106	1 660							
19	Conferences, conventions, and meetings	17,093	15,196	1,669	228						
20	Interest	77,929	63,602	12,400	1,927						
21	Payments to affiliates	400 071	205 202	7 202							
22	Depreciation, depletion, and amortization	408,071	395,303	7,392 44,195	5,376 955						
23	Insurance Other expenses. Itemize expenses not covered	72,587	27,437	44,195	955						
24	above (List miscellaneous expenses on line 24e. If										
	line 24e amount exceeds 10% of line 25, column										
	(A) amount, list line 24e expenses on Schedule O.)										
а	SASH & OTHER PROGRAM	464,594	460,825	3,769							
b	PROPERTY EXPENSE	311,827	294,603	16,899	325						
C	MISCELLANEOUS	114,365	94,776	18,058	1,531						
d	BAD DEBT	-35,216	-35,400	184	<u> </u>						
e	All other expenses	55,215	55,100								
25	Total functional expenses. Add lines 1 through 24e	4,631,088	4,047,355	475,548	108,185						
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)										

Form 990 (2022) DOWNSTREET HOUSING AND COMMUNITY \*\*-\*\*3473

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Part X Balance Sheet

P	art 2	Check if Schedule O contains a response or no	te to an	v line in this Part X						
			10 10 0	,	<b>(A)</b> Beginning of year		( <b>B</b> ) End of year			
	1	Cash—non-interest-bearing			1,160,782	1	1,047,853			
	2	Savings and temporary cash investments			1,337,613	2	2,016,562			
	3	Pledges and grants receivable, net			133,415	3	204,931			
	4	Accounts receivable, net			188,567	4	257,282			
	5	Loans and other receivables from any current or form								
		trustee, key employee, creator or founder, substantia								
		controlled entity or family member of any of these per	sons			5				
	6	Loans and other receivables from other disqualified p								
ţ		under section 4958(f)(1)), and persons described in s	ection 4	958(c)(3)(B)	4,269,007	6	4,253,543			
Assets	7	Notes and loans receivable, net	s and loans receivable, net							
ä	8	Inventories for sale or use				8				
	9	Prepaid expenses and deferred charges			44,000	9	35,897			
	10a	Land, buildings, and equipment: cost or other								
		basis. Complete Part VI of Schedule D	10a	12,830,676						
	b	Less: accumulated depreciation	10b	3,854,566	7,346,170	10c	8,976,110			
	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		60,035	13	60,035				
	14	Intangible assets				14				
	15	Other assets. See Part IV, line 11			339,112	15	1,112,255			
	16	Total assets. Add lines 1 through 15 (must equal line	33)		14,878,701	16	17,964,468			
	17	Accounts payable and accrued expenses		280,474	17	408,436				
	18	Grants payable				18				
	19	Deferred revenue		L	56,350	19	16,624			
	20	Tax-exempt bond liabilities		L		20				
	21	Escrow or custodial account liability. Complete Part IV	√ of Sch	edule D	41,846	21	41,792			
es	22	Loans and other payables to any current or former of	ficer, dir	ector,						
≣		trustee, key employee, creator or founder, substantia								
Liabilities		controlled entity or family member of any of these per	sons			22				
_	23	Secured mortgages and notes payable to unrelated the	hird part	ies	2,248,590	23	2,917,104			
	24	Unsecured notes and loans payable to unrelated third	d parties			24				
	25	Other liabilities (including federal income tax, payable	s to rela	ated third						
		parties, and other liabilities not included on lines 17-2	4). Com	plete Part X						
		of Schedule D			93,398		819,000			
	26	Total liabilities. Add lines 17 through 25			2,720,658	26	4,202,956			
S		Organizations that follow FASB ASC 958, check h	ere X							
nce		and complete lines 27, 28, 32, and 33.								
aga	27	Net assets without donor restrictions		5,846,297	27	9,692,836				
Ã	28		<u></u>	6,311,746	28	4,068,676				
Ĕ		Organizations that do not follow FASB ASC 958, o								
Ē		and complete lines 29 through 33.								
S	29	Capital stock or trust principal, or current funds				29				
set	30	Paid-in or capital surplus, or land, building, or equipm	ent func	i		30				
As	31	Retained earnings, endowment, accumulated income	, or othe	er funds		31				
Net Assets or Fund Balances	32	Total net assets or fund balances			12,158,043	32	13,761,512			
_	33	Total liabilities and net assets/fund balances			14,878,701	33	17,964,468			

Form **990** (2022)

orn	1990 (2022) DOWNSTREET HOUSING AND COMMUNITY **-***3473				Pag	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	(	5,16	59,	<u>989</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	4	1,63	31,	880
3	Revenue less expenses. Subtract line 2 from line 1	3		L,53		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	12	2,15	58,	<u>043</u>
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		6	54,	568
9	Other changes in net assets or fund balances (explain on Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10	13	3,76	51,	512
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on					
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		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:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Χ	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of					
	the audit, review, or compilation of its financial statements and selection of an independent accountant?			2c	Χ	
	If the organization changed either its oversight process or selection process during the tax year, explain on					
	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					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a	Χ	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b	X	

Form **990** (2022)

# SCHEDULE A

(Form 990)

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.

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Open to Public Inspection

Name of the organization Employer identification number \*\*-\*\*\*3473 DEVELOPMENT, INC 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 9 or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of 12 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s)

<b>g</b> Provide the f	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))			listed in your governing		listed in your governing		listed in your governing		listed in your governi				listed in your governing		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No														
(A)																		
(B)																		
(C)																		
(D)																		
(E)																		
Total																		

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

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

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

Sec	tion A. Public Support	•	•		· 1	'	
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,366,831	1,966,978	2,280,897	2,772,148	3,658,720	12,045,574
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						
<b>4 5</b>	Total. Add lines 1 through 3  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)	1,366,831	1,966,978	2,280,897	2,772,148	3,658,720	12,045,574
6	Public support. Subtract line 5 from line 4						12,045,574
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	<b>(f)</b> Total
7	Amounts from line 4	1,366,831	1,966,978	2,280,897	2,772,148	3,658,720	12,045,574
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	14,491	15,087	14,352	11,687	9,206	64,823
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	<b>Total support.</b> Add lines 7 through 10						12,110,397
12	Gross receipts from related activities, etc					12	12,949,535
13	First 5 years. If the Form 990 is for the o		second, third, fo	urth, or fifth tax ye	ear as a section 50	01(c)(3)	
	organization, check this box and stop he		<u></u>				
	ction C. Computation of Public S	Support Perce	ntage			1.1	
14	Public support percentage for 2022 (line			umn (f)) <sub></sub>			99.46%
15	Public support percentage from 2021 Sc						94.60%
	33 1/3% support test—2022. If the organization quality 33 1/3% support test—2021. If the organization quality support test—2021.	alifies as a publicly	supported orgar	ization			X
b	this box and <b>stop here</b> . The organization						
17a	10%-facts-and-circumstances test—20					d line 14 is	
., a	10% or more, and if the organization me Part VI how the organization meets the forganization	ets the facts-and-c	ircumstances tes ances test. The o	t, check this box a rganization qualifi	and <b>stop here.</b> Earlies as a publicly s	xplain in upported	
b	10%-facts-and-circumstances test—2015 is 10% or more, and if the organization in Part VI how the organization meets the organization.	<b>021.</b> If the organization meets the factsee facts-and-circum	ation did not ched and-circumstance stances test. The	ck a box on line 13 es test, check this organization qua	3, 16a, 16b, or 17a box and <b>stop he</b> lifies as a publicly	a, and line ere. Explain / supported	
18	organization <b>Private foundation.</b> If the organization of instructions	did not check a box	k on line 13, 16a,	16b, 17a, or 17b,	check this box ar	nd see	

Schedule A (Form 990) 2022

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# 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.)

	ii tile organization ialis to	quality under	וווכ וכאנא וואנכ	d below, piea	se complete i	art II.)	
	tion A. Public Support		T		Г	<del></del>	
Caler	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	<b>(f)</b> 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						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
Sac	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	(a) 2010	(B) 2010	(6) 2020	(u) 2021	(6) 2022	(i) rotal
10a							
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on 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	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the organization, check this box and stop he			-			
Sec	tion C. Computation of Public S						
15	Public support percentage for 2022 (line			olumn (f))		15	%
16	Public support percentage from 2021 Sch						%
	tion D. Computation of Investm						
17	Investment income percentage for 2022			e 13, column (f))		17	%
	vestment income percentage from <b>2021</b> S					40	%
	33 1/3% support tests—2022. If the organization			line 14, and line	15 is more than 3	3 1/3%, and line	
	17 is not more than 33 1/3%, check this b	oox and <b>stop her</b>	<b>re.</b> The organizati	on qualifies as a p	oublicly supported	d organization	
b	33 1/3% support tests—2021. If the org						
20	line 18 is not more than 33 1/3%, check t <b>Private foundation.</b> If the organization d	-	_	· ·		=	

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#### Part IV **Supporting Organizations**

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

#### Section A. All Supporting Organizations

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

	Yes	No
1		
2		
3a		
Ja		
3b		
3с		
4a		
4a		
4b		
4c		
5a		
5b 5c		
6		
7		
8		
9a		
9b		
9с		
10a		
10b		
ule A	(Form 9	90) 2022

Sched	nle A (Form 990) 2022 DOWNSTREET HOUSING AND COMMUNITY **-***3	3473		Page <b>5</b>
Par	t IV Supporting Organizations (continued)			1
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	11a		
h	A family member of a person described on line 11a above?	11a		
	A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c,</i>	110		
·	provide detail in <b>Part VI</b> .	11c		
Sect	on B. Type I Supporting Organizations	1 1		
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one	or		
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's office	ers,		
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)	_		
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supp			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among			
2	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.  Did the organization operate for the benefit of any supported organization other than the supported	1		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part</b>			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	on C. Type II Supporting Organizations	l,		l
			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	_		
Soct	the supported organization(s). on D. All Type III Supporting Organizations	1		
Seci	on b. All Type in 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		163	140
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, 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 <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
Sect	on 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 inst	ructions).		
а	The organization satisfied the Activities Test. Complete line 2 below.	,		
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (	see instruc	tions).	1
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	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 <b>Part VI identify</b>			
	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	2a		
b	that these activities constituted substantially all of its activities.  Did the activities described on line 2a, above, constitute activities that, but for the organization's	Za		
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Schedule A (Form 990) 2022

DOWNSTREET HOUSING AND COMMUNITY

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Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgan	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on	Nov.	20, 1970 ( <i>explain in <b>Part</b></i>	VI). See
	instructions. All other Type III non-functionally integrated supporting organizations r	nust c	complete Sections A throu	ugh E.
Sect	ion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		, i
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection			
	of gross income or for management, conservation, or maintenance of			
	property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion 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		
е	Discount claimed for blockage or other factors			
	(explain in detail in <b>Part VI</b> ):			
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 0.015 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 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 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 integrate	ed Ty	pe III supporting organiza	ntion

Schedule A (Form 990) 2022

(see instructions).

Schedule A (Form 990) 2022

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Par	t V Type III Non-Functionally Integrated 509(a)(3	) Supporting Organ	izations (continu	ıed)	•
Sect	ion D – Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exempt pur	poses		1	
2	Amounts paid to perform activity that directly furthers exempt purpose	ses of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purposes of su		3		
4	Amounts paid to acquire exempt-use assets	4			
5	Qualified set-aside amounts (prior IRS approval required—provide of	details in <b>Part VI</b> )		5	
6	Other distributions (describe in <b>Part VI</b> ). See instructions.			6	
7	<b>Total annual distributions.</b> Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the organ	nization is responsive		8	
	(provide details in <b>Part VI</b> ). See instructions.				
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount	T		10	
		(i)	(ii)		(iii)
Sect	ion E – Distribution Allocations (see instructions)	Excess Distributions	Underdistribution	ıs	Distributable
			Pre-2022		Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022				
	(reasonable cause required–explain in <b>Part VI</b> ). See instructions.				
3	Excess distributions carryover, if any, to 2022				
	From 2017				
	From 2010				
	From 2019				
	From 2020				
	From 2021				
	Total of lines 3a through 3e				
	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from				
	Section D, line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, 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 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
е	Excess from 2022				

Schedule A (Form 990) 2022

Schedule A (Fo	orm 990) 2022	DOWNSTREET	HOUSING	AND C	OMMUNITY	**-***3473	Page <b>8</b>
Part VI	Supplemental	I Information. Provide	the explanati	ions requi	red by Part II, lin	e 10; Part II, line 17a or	17b; Part
	III, line 12; Par	t IV, Section A, lines 1	, 2, 3b, 3c, 4b	o, 4c, 5a,	6, 9a, 9b, 9c, 11a	a, 11b, and 11c; Part IV,	Section
						Part IV, Section E, lines	
						5, 6, and 8; and Part V,	
	lines 2 5 and	6. Also complete this	part for any a	dditional i	nformation (See	instructions)	00000011
	inico z, o, and	0: 7 tide complete tille	part for arry a	aditional	mormation: (OCC	inou douono.)	

#### SCHEDULE C (Form 990)

# **Political Campaign and Lobbying Activities**

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

2022
Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

• 5	ection 501(c)(4), (5), or (6) organizations: Complete Part	III.			
Nam	e of organization DOWNSTREET HOUSING	AND COMMUNITY			tification number
	DEVELOPMENT, INC.			**-***34	
Pai	t I-A Complete if the organization is exe	mpt under section 501	l(c) or is a se	ction 527 organi	zation.
1	Provide a description of the organization's direct and ind	irect political campaign activit	ties in Part IV. Se	e instructions for	
	definition of "political campaign activities."				
	Political campaign activity expenditures. See instructions			\$	
3	Volunteer hours for political campaign activities. See inst				
Pa	t I-B Complete if the organization is exe				
1	Enter the amount of any excise tax incurred by the organ			\$	
2	Enter the amount of any excise tax incurred by organizate		4955	\$	
3	If the organization incurred a section 4955 tax, did it file l	Form 4720 for this year?			Yes No
	Was a correction made?				Yes No
	If "Yes," describe in Part IV.	4 1 4 50	17.	(! =0.47 \/0)	
Pa	t I-C Complete if the organization is exe	•		ection 501(c)(3).	
1	Enter the amount directly expended by the filing organization	·			
	activities			\$	
2	Enter the amount of the filing organization's funds contril	· ·			
	527 exempt function activities	<u>.</u>		\$	
3	Total exempt function expenditures. Add lines 1 and 2. E		•		
	line 17b			\$	
4	Did the filing organization file Form 1120-POL for this year				
5	Enter the names, addresses and employer identification	• •			•
	organization made payments. For each organization liste	-			
	the amount of political contributions received that were p	• •		•	
	as a separate segregated fund or a political action comm				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate
					political organization.  If none, enter -0
(1)					, 511.01
(1)					
(2)					
(2)					
(3)					
(3)					
(4)					
( <del>-r</del> )					
(5)					
(5)					
(6)					
(5)					

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

Schedule C (Form 990) 2022

			PUBLIC				
Sc	chedule C (Form 990) 2022 DOWNS	TREET HOU	SING AND C	OMMUNIT:	Y *	*-***3473	Page <b>2</b>
P	Part II-A Complete if the organ						
	section 501(h)).						
Α	Check if the filing organization	•	•		each a	ffiliated group m	ember's name,
_	address, EIN, expense			. ,			
В	Check if the filing organization			l" provisions a	pply.		
	Limits on Lob (The term "expenditures" n	bying Expend	itures naid or incurred )	1	orgai	(a) Filing nization's totals	(b) Affiliated group totals
-	1a Total lobbying expenditures to influence		•	'			
	<b>b</b> Total lobbying expenditures to influence						
	c Total lobbying expenditures (add lines 1a						
	d Other exempt purpose expenditures						
	e Total exempt purpose expenditures (add	lines 1c and 1d)					
	f Lobbying nontaxable amount. Enter the a						
	columns.		J				
	If the amount on line 1e, column (a) or (b) i	: The lobbying no	ontaxable amount is:				
	Not over \$500,000	20% of the amou	ınt on line 1e.				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15	5% of the excess over \$	500,000.			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10	)% of the excess over \$	51,000,000.			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 59	% of the excess over \$1	,500,000.			
	Over \$17,000,000	\$1,000,000.					
	g Grassroots nontaxable amount (enter 25	% of line 1f)					
	h Subtract line 1g from line 1a. If zero or le						
	i Subtract line 1f from line 1c. If zero or les			L			
	j If there is an amount other than zero on e	ither line 1h or line	e 1i, did the organizat	ion file Form 47	20		
	reporting section 4911 tax for this year?						Yes No
		4-Year Average	ing Period Under	Section 501(I	າ)		
	(Some organizations that made	a section 501(h	) election do not l	have to comp	lete all	of the five colu	ımns below.
	Se	e the separate i	nstructions for lin	es 2a throug	h 2f.)		
	Lob	bying Expendit	ures During 4-Yea	r Averaging	Period		
	Calendar year (or fiscal year						
	beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021		(d) 2022	(e) Total
	3 3 /						
2	2a Lobbying nontaxable amount						
	<b>b</b> Lobbying ceiling amount						
	(150% of line 2a, column (e))						
	c Total lobbying expenditures						
	d Grassroots nontaxable amount						
	e Grassroots ceiling amount						
	(150% of line 2d, column (e))						
				1			

Schedule C (Form 990) 2022

f Grassroots lobbying expenditures

Schedule C (Form 990) 2022

DOWNSTREET HOUSING AND COMMUNITY

*	*	*	*	*	2	4	7	2

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		1.2	a)		(13)		
	es," response on lines 1a through 1i below, provide in Part IV a detailed of the lobbying activity.	Yes	No		(b) Amou	nt	
_	the year, did the filing organization attempt to influence foreign, national, state, or local						
-	ion, including any attempt to influence public opinion on a legislative matter or dum, through the use of:						
			v				
a Volunte	aff or management (include compensation in expenses reported on lines 1c through 1i)?		X				
	- du - miti m - mit- 0		X				
	a to members legislators or the public?		X				
			X				_
	to other organizations for lebbying purposes?	-	X				
	contact with legislators, their staffs, government officials, or a legislative body?	-	X				
_	, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X				_
i Other a			X				
j Total. A	Add lines 1c through 1i						
2a Did the	activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х				
	" enter the amount of any tax incurred under section 4912						
c If "Yes,	" enter the amount of any tax incurred by organization managers under section 4912	•					
	ling organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Part III-A	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)	(5),	or sec	tion		
	· · · · · · · · · · · · · · · · · · ·				,	Yes	
							N
1 Were s	ubstantially all (90% or more) dues received nondeductible by members?				1		٨
	ubstantially all (90% or more) dues received nondeductible by members? organization make only in-house lobbying expenditures of \$2,000 or less?				<del></del>		N
<ul><li>2 Did the</li><li>3 Did the</li></ul>	organization make only in-house lobbying expenditures of \$2,000 or less? organization agree to carry over lobbying and political campaign activity expenditures from the prio		(5).		1 2 3		N
2 Did the 3 Did the Part III-B	organization make only in-house lobbying expenditures of \$2,000 or less?  organization agree to carry over lobbying and political campaign activity expenditures from the prio  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes."	501(c)	R (b)		1 2 3 tion		
2 Did the 3 Did the Part III-B	organization make only in-house lobbying expenditures of \$2,000 or less? organization agree to carry over lobbying and political campaign activity expenditures from the prio Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N answered "Yes." assessments and similar amounts from members	501(c)			1 2 3 tion		
2 Did the 3 Did the Part III-B  1 Dues, a 2 Section	organization make only in-house lobbying expenditures of \$2,000 or less? organization agree to carry over lobbying and political campaign activity expenditures from the prio  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N answered "Yes."  assessments and similar amounts from members 162(e) nondeductible lobbying and political expenditures (do not include amounts of	501(c)	R (b)		1 2 3 tion		
2 Did the 3 Did the Part III-B  1 Dues, a 2 Section politica	organization make only in-house lobbying expenditures of \$2,000 or less?  organization agree to carry over lobbying and political campaign activity expenditures from the prio  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N answered "Yes."  assessments and similar amounts from members a 162(e) nondeductible lobbying and political expenditures (do not include amounts of all expenses for which the section 527(f) tax was paid).	501(c)	R (b)		1 2 3 tion		
2 Did the 3 Did the Part III-B  1 Dues, a 2 Section politica a Current	organization make only in-house lobbying expenditures of \$2,000 or less?  organization agree to carry over lobbying and political campaign activity expenditures from the prio  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N answered "Yes."  assessments and similar amounts from members a 162(e) nondeductible lobbying and political expenditures (do not include amounts of all expenses for which the section 527(f) tax was paid).  t year	501(c)	2 (b)		1 2 3 tion		
2 Did the 3 Did the Part III-B  1 Dues, a 2 Section politica a Current b Carryon	organization make only in-house lobbying expenditures of \$2,000 or less? organization agree to carry over lobbying and political campaign activity expenditures from the prio  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes." assessments and similar amounts from members a 162(e) nondeductible lobbying and political expenditures (do not include amounts of all expenses for which the section 527(f) tax was paid).	501(c)	2 (b) 1 2a 2b		1 2 3 tion		
2 Did the 3 Did the Part III-B  1 Dues, a 2 Section politica a Current b Carryot c Total	corganization make only in-house lobbying expenditures of \$2,000 or less?  organization agree to carry over lobbying and political campaign activity expenditures from the prio  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes."  assessments and similar amounts from members  a 162(e) nondeductible lobbying and political expenditures (do not include amounts of all expenses for which the section 527(f) tax was paid).  t year  ver from last year	501(c)	2 (b) 2 (a) 2 (b) 2 (c)		1 2 3 tion		
2 Did the 3 Did the Part III-B  1 Dues, a 2 Section politica a Current b Carryot c Total 3 Aggreg	organization make only in-house lobbying expenditures of \$2,000 or less? organization agree to carry over lobbying and political campaign activity expenditures from the prio  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes."  assessments and similar amounts from members 162(e) nondeductible lobbying and political expenditures (do not include amounts of all expenses for which the section 527(f) tax was paid).  It year  ver from last year  late amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	501(c)	2 (b) 1 2a 2b		1 2 3 tion		
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2 Did the 3 Did the Part III-B  1 Dues, a 2 Section politica a Current b Carryot c Total 3 Aggreg 4 If notice excess	organization make only in-house lobbying expenditures of \$2,000 or less?  organization agree to carry over lobbying and political campaign activity expenditures from the prio  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes."  assessments and similar amounts from members  a 162(e) nondeductible lobbying and political expenditures (do not include amounts of all expenses for which the section 527(f) tax was paid).  It year  over from last year  attenuate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues es were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying	501(c)	2a 2b 2c 3		1 2 3 tion		
2 Did the 3 Did the Part III-B  1 Dues, a 2 Section politica a Curren b Carryo c Total 3 Aggreg 4 If notice excess and po	organization make only in-house lobbying expenditures of \$2,000 or less?  organization agree to carry over lobbying and political campaign activity expenditures from the prio  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N answered "Yes."  assessments and similar amounts from members a 162(e) nondeductible lobbying and political expenditures (do not include amounts of al expenses for which the section 527(f) tax was paid).  It year  over from last year  attenuate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues assessments and the amount on line 2c exceeds the amount on line 3, what portion of the	501(c)	2 (b) 2 (a) 2 (b) 2 (c)		1 2 3 tion		

Schedule C (Form 990) 2022

Schedule C (Form	n 990) 2022	DOWNSTREET	HOUSING	AND	COMMUNITY	**-***3473	Page <b>4</b>
Part IV	Supplemental	DOWNSTREET Information (con	tinued)				
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# 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 Open to Public Inspection

DEVELOPMENT, INC.		of the organization		Employer identification number							
Part I	$D^{(}$	OWNSTREET HOUSING AND COMMUNITY									
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.    1 Total number at end of year	D.										
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?    Ves	Pa	Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.  Complete if the organization answered "Yes" on Form 990, Part IV, line 6.									
2 Aggregate value of contributions to (during year) 4 Aggregate value at earl 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?			(a) Donor advised funds	(b) Funds and other accounts							
2 Aggregate value of contributions to (during year) 4 Aggregate value at earl 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?	1	Total number at end of year									
A Aggregate value of grants from (during year)  Aggregate value at end of year  Aggregate value at end of year  Aggregate value at end of year  Did the organization inform all denors 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?  By Indiana the control of the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  Part II Conservation Easements.  Complete if the organization answered "Yes" on Form 990, Part IV, line 7.  Preservation of land for public use (for example, recreation or education Preservation of a historically important land area Protection of natural habitat Preservation of land for public use (for example, recreation or education Preservation of a certified historic structure Preservation of ones pasce Complete inse 2 at 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.  A Total number of conservation easements and a certified historic structure included in (a)  A Total number of conservation easements included in (c) acquired after July 25, 2006, and not on a historic structure listed in the National Register  Number of conservation easements included in (c) acquired after July 25, 2006, and not on a historic structure listed in the National Register  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the tax year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year in a section 170(h)(4)(B)(ii)  Preservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)  and section 170(h)(4)(B)(ii)  If the organization elected, as permitted under FASB ASC 95 (is often to requirements that describes these organization elected, as permitted under FASB ASC 95 (is	2	Aggregate value of contributions to (during year)									
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Preservation of land for public use (for example, recreation or education   Preservation of a historically important land area   Preservation of a persistent land area   Preservation of a certified historic structure   Preservation of a persistent land area   Preservation of a certified historic structure   Preservation of a certified historic structure   Preservation of a certified historic structure land   Preservation		Complete if the organization answered "Yes" o	n Form 990, Part IV, line 7.								
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historic structure listed in the National Register  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year  Number of states where property subject to conservation easement is located  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Number of states where property subject to conservation easements in tolds?  Yes Notes Add volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Notes 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.  Ia If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  In If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part VIII, line 1  (iii) Assets included in Form 990, Part VIII, line 1  (iv) Assets included on Form 990, Part VIII, line	С			2c							
Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year  Number of states where property subject to conservation easement is located  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Net and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year  Net a boes each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  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 FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB	d	Number of conservation easements included in (c) acquired after Ju	ly 25, 2006, and not on a								
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)(ii) 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 FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.  b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:  (i) Revenue included in Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part VIII, line 1  (iii) Assets included on Form 99		historic structure listed in the National Register		2d							
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following amounts required to be reported under FASB ASC 958 relating to these items:  a Revenue included on Form 990, Part VIII, line 1 \$	2	If the organization received or held works of art, historical treasures,	or other similar assets for financial gair	n, provide the							
	а	Revenue included on Form 990, Part VIII, line 1		\$							
	b										

Sche	edule D (Form 990) 2022 DOWNSTR.							Page <b>∠</b>
Pa	art III Organizations Maintain	ing Collections	of Art, Historica	I Treasure	s, or Other S	Similar As	sets (cont	inued)
3	Using the organization's acquisition, acc collection items (check all that apply):	ession, and other reco	ords, check any of th	e following tha	it make significa	nt use of its		
а	Public exhibition	d 🗌	Loan or exchange p	rogram				
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization	's collections and exp	lain how they further	the organizati	on's exempt pu	rpose in Part		
	XIII.	·	·	J				
5	During the year, did the organization soli	cit or receive donation	ns of art. historical tre	easures. or oth	ner similar			
	assets to be sold to raise funds rather th						Yes	No
Pa	art IV Escrow and Custodial		1 3					
	Complete if the organiza 990, Part X, line 21.		es" on Form 990	, Part IV, lir	ne 9, or repor	ted an am	ount on Fo	orm
1a	Is the organization an agent, trustee, cus	stodian or other interm	nediary for contribution	ons or other as	sets not			
	included on Form 990, Part X?						Yes	X No
b	If "Yes," explain the arrangement in Part	XIII and complete the	following table:					
		·	•				Amount	
С	Beginning balance					1c		
	Additions during the year					<b></b>		
<u>م</u>	Distributions during the year							
f						1f		
2a	Ending balance  Did the organization include an amount of	on Form 000 Part X I	ine 21 for escrow or	custodial acc	ount liability?		Vos	X No
	If "Yes," explain the arrangement in Part						163 [	
	art V Endowment Funds.	Alli. Check here ii the	explanation has be	en provided of	T F all Alli			
Г	Complete if the organiza	tion answered "V	os" on Form 000	Part IV/ lir	no 10			
	Complete if the organiza					ree veere beek	(a) Faur vaa	ro book
٠.	5	(a) Current year	(b) Prior year	(c) Two year	s back (d) In	ree years back	(e) Four year	s back
1a	Beginning of year balance			+			+	
	Contributions			+			+	
С	Net investment earnings, gains, and							
	losses							
d	Grants or scholarships							
е	Other expenditures for facilities and							
	programs							
f	Administrative expenses							
g								
2	Provide the estimated percentage of the	current year end bala	nce (line 1g, column	(a)) held as:				
а	Board designated or quasi-endowment	%						
b	Permanent endowment %							
С								
	The percentages on lines 2a, 2b, and 2c	should equal 100%.						
3a	Are there endowment funds not in the po	•	nization that are held	and administe	ered for the			
	organization by:	3					Yes	s No
	(i) Unrelated arrenizations						0-(:)	
	400 D L L L L L L L							
h	If "Yes" on line 3a(ii), are the related orga	anizations listed as re	quired on Schedule					
1	Describe in Part XIII the intended uses of						. [ 36 ]	
D.	art VI Land, Buildings, and E		idowinient idnas.					
Г	Complete if the organiza		os" on Form 000	Part IV/ lir	o 11a Soo I	Form 000	Dart Y line	. 10
	Description of property							
	резсприон от ргорету	(a) Cost or other I (investment)		other basis ner)	(c) Accumulate depreciation		(d) Book value	;
		` ,	,		aepiecialioi		1 (71	200
1a	Land			71,328	2	266	1,671	
b	Buildings			04,471	3,511		4,793	
	Leasehold improvements			82,426		,507	139	
	Equipment			45,434	300	,793		<u>,641</u>
	Other			27,017			2,327	
Tota	al. Add lines 1a through 1e. <i>(Column (d) m</i>	ust equal Form 990, I	Part X, column (B), li	ne 10c.)			8,976	<u>,110</u>

Dowt VIII	lini va a tima a m	to Othor Coouri	4:00			
Schedule D	(FOITH 990) 2022	DOMNSIKEEI	DUTCOOH	AND (	<u> </u>	""=""34/3

Part VII	Investments – Other Securities.  Complete if the organization answered "Yes" o	n Form 990, Part IV	, line 11b. See Form 990, Part X, line 12.
	(a) Description of security or category	(b) Book value	(c) Method of valuation:
	(including name of security)		Cost or end-of-year market value
(1) Financial			
	eld equity interests		
(F)			
(H)			
	nn (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII	Investments – Program Related.		
i dit viii	Complete if the organization answered "Yes" o	n Form 990 Part IV	line 11c See Form 990 Part X line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation:
			Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	nn (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX	Other Assets.		
	Complete if the organization answered "Yes" o	n Form 990, Part IV	
	(a) Description		(b) Book value
(1)	RIGHT-OF-USE ASSET		762,63
(2)	INVESTED IN OTHER PROP		269,72
(3)	DEVELOPMENT FEES RECEI	VABLE	79,90
(4)			
(5)			
(6)			
(7)			
(8) (9)			
	nn (b) must equal Form 990, Part X, col. (B) line 15.)		1,112,25
Part X	Other Liabilities.		
	Complete if the organization answered "Yes" o	n Form 990. Part IV	line 11e or 11f. See Form 990. Part X.
	line 25.		,
1.	(a) Description of liability		(b) Book value
	income taxes		
` '	NCING LIABILITY		819,00
(3)			1
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 25.)		

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

	Form 990) 2022 DOWNSTREET HOUSING AND CO				Page <b>4</b>
Part XI	Reconciliation of Revenue per Audited Financial S		-	Retu	rn.
4 7 1 1	Complete if the organization answered "Yes" on Forn			4	C 207 0F7
	venue, gains, and other support per audited financial statements			1	6,207,057
	s included on line 1 but not on Form 990, Part VIII, line 12:	ا مو ا			
a Net unre	ealized gains (losses) on investments	2a 2b			
<b>b</b> Donated	d services and use of facilities	20			
C Recove	ries of prior year grants	2c 2d	37,068		
d Other (E	Describe in Part XIII.)	20		20	27 069
e Add line	es 2a through 2d			2e 3	37,068 6,169,989
<ul><li>3 Subtrac</li><li>4 Amount</li></ul>	t line <b>2e</b> from line <b>1</b> s included on Form 990, Part VIII, line 12, but not on line 1:			3	0,109,909
	ent expenses not included on Form 990, Part VIII, line 7b	4a			
	Describe in Part XIII.)				
	4 - 1.41			4c	
	venue. Add lines <b>3</b> and <b>4c.</b> <i>(This must equal Form 990, Part I, line 1:</i>	 2 )		5	6,169,989
Part XII					
1 41 ( 2 () 1	Complete if the organization answered "Yes" on Forn			0	, carrii
1 Total ex		1000,1 4111, 11		1	4,668,156
	s included on line 1 but not on Form 990, Part IX, line 25:			-	1,000,100
	d services and use of facilities	2a			
<b>b</b> Prior ye	ar adjustments	2b			
c Other lo	psses	2c			
d Other (E	Describe in Part XIII.)		37,068		
e Add line	es 2a through 2d			2e	37,068
3 Subtrac	t line 2e from line 1			3	4,631,088
4 Amount	s included on Form 990, Part IX, line 25, but not on line 1:				, ,
	ent expenses not included on Form 990, Part VIII, line 7b	4a			
	Describe in Part XIII.)				
	es <b>4a</b> and <b>4b</b>			4c	
5 Total ex	openses. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	4,631,088
Part XIII	Supplemental Information.				
	escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and			4; Par	t X, line
	es 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to	provide any addition	onal information.		
PART 2	K - FIN 48 FOOTNOTE				
THE OF	RGANIZATION BELIEVES IT HAS APPROF	RIATE SUP	PORT FOR A	JNY.	TAX POSITION
TAKEN,	, AND, AS SUCH, DOES NOT HAVE ANY	UNCERTAIN	TAX POSIT	LION	S THAT ARE
MATER]	IAL TO THE FINANCIAL STATEMENTS.				
				_	
PART. 3	KI, LINE 2D - REVENUE AMOUNTS INCI	ODED IN E.	INANCIALS	0	THER
				4	27 060
RENTAL	L PROPERTY EXPENSES			Ş	37,068
מחגם	ALL TIME OF EXPENSE AMOUNTS INC	י דער מממודו		7	
PAKI )	KII, LINE 2D - EXPENSE AMOUNTS INC	TIN TIN	L TNANCTAL:	2	OTHEK
ד גייידאים כו	DDODEDEN ENDENCEC			ب.	27 060
т. г. г. г. г. г.	L PROPERTY EXPENSES			<u>?</u>	37,068

Schedule D (F	orm 990) 2022	DOWNSTREET	HOUSING	AND	COMMUNITY	**-***3473	Page <b>5</b>
Part XIII	Supplemer	ntal Information (	continued)				
•							

#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization DOWNSTREET HOUSIN DEVELOPMENT, INC.	G AND COM	MUNITY	Y				nployer identification number * – * * * 3 4 7 3
Part I General Information on Grants a	nd Assistance	<del>)</del>				l l	3 1 / 3
Does the organization maintain records to substantia the selection criteria used to award the grants or ass Describe in Part IV the organization's procedures for Part II Grants and Other Assistance to	istance? monitoring the use <b>Domestic Org</b>	of grant fu	nds in the United Stat	es. Governments.	Complete if the	e organization	n answered "Yes" on Form 99
Part IV, line 21, for any recipient the	at received mo	re than \$	5,000. Part II car	be duplicated if	additional spa	ce is needed	
(a) Name and address of organization     or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) TWIN PINES HOUSING TRUST 226 HOLIDAY DRIVE #20 WHITE RIVER JUNCTION VT 05001		501C3	95,749				RESIDENT SERVICES
(2)	, , , ,	33233	207.12				
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							

3 Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2022) DOWNSTREE  Part III Grants and Other Assista	T HOUSING AND C		* – * * * 3473 ne organization ans	wered "Yes" on Form 990	Page <b>2</b> ), Part IV, line 22.
Part III can be duplicated if  (a) Type of grant or assistance			(d) Amount of noncash assistance		(f) Description of noncash assistance
1 AHS	38	3,669			
2 VHIP	43	311,590			
3 RENTAL REHAB	1	800			
4					
5					
6					
7 Part IV Supplemental Information					
SEE SCHEDULE I SUPPLEME	NTAL INFORMATIO	N WORKSHEET			

SCHEDULE I	Supplemental Inform	ation	2022
(Form 990)	For calendar year 2022, or tax year beginning	, and ending	
			Employer identification number
Name of the organization	DOWNSTREET HOUSING AND COMMUNITY		**_***3 <u>4</u> 73

PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS
DOWNSTREET ENSURES LANDLORDS HAVE SATISFIED THE GRANT REQUIREMENTS,
INCLUDING EXECUTING AN AFFORDABLE HOUSING CONVENANT AND PROVIDING A 20%
MATCH. DOWNSTREET REVIEWS PROGRESS OF PROJECTS AGAINST SCOPE OF WORK WITH
REGULAR INSPECTIONS WHICH ARE DOCUMENTED WITH DETAILED INSPECTION REPORTS
SIGNED BY THE CONTRACTED INSPECTOR AND LANDLORD. HOMEOWNERSHIP STAFF REVIEW
LANDLORD DOCUMENTATION PRIOR TO REQUESTING ANY SUB-GRANT DISBURSEMENT FROM
ACCOUNTING. THE CFO REVIEWS ALL SUBRECIPIENT DOCUMENTATION AGAIN PRIOR TO
APPROVING DISBURSEMENT. FOR AGENCY OF HUMAN SERVICES, DOWNSTREET MANAGES
THE FUNDS, BUT NOT THE PROGRAM ITSELF. THE PROGRAM IS MANAGED BY AN
EXTERNAL PARTNER WHO DIRECTS DOWNSTREET TO MAKE GRANT DISBURSEMENTS.

(a)

Check if

(b)

Number of contributions or

#### **PUBLIC**

#### **SCHEDULE M** (Form 990)

Part I

## **Noncash Contributions**

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. OMB No. 1545-0047

Method of determining

**Open To Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number \*\*-\*\*\*3473 DEVELOPMENT, INC. Types of Property

(c)

Noncash contribution

amounts reported on

		applicable	items contributed	Form 990, Part VIII, line 1g		noncash contri	bution 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	Х	1	50,400	FAIR	MARKET	VALUE		
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 ()								
26	Other ()								
27	Other ( )								
28	Other (								
29	Number of Forms 8283 received by								
	which the organization completed	Form 8283	, Part V, Donee Ackno	wledgement	29				
								Yes	No
30a	During the year, did the organization								
	28, that it must hold for at least 3 y								
	used for exempt purposes for the	entire holdi	ng period?				30a		X
	If "Yes," describe the arrangement								
31	Does the organization have a gift a	acceptance	policy that requires the	e review of any nonstanda	ard				
	contributions?						31	X	<u> </u>
32a	Does the organization hire or use t	hird parties	s or related organizatio	ns to solicit, process, or s	ell noncash	1			
							32a		X
	If "Yes," describe in Part II.								
33	If the organization didn't report an	amount in	column (c) for a type o	f property for which colum	n (a) is che	cked,			
	describe in Part II.								
For P	aperwork Reduction Act Notice, see	the Instruct	tions for Form 990.			5	Schedule M (Fo	rm 990	) 2022

Schedule M (Fo	rm 990) 2022 DOWNSTREET	HOUSING AND	COMMUNITY	**-***34/3	Page <b>2</b>
Part II	Supplemental Information the organization is reportion or a combination of both.	ng in Part I, column (l	b), the number of c	ontributions, the number	d 33, and whether of items received,

# SCHEDULE O (Form 990)

#### 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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization DOWNSTREET

Attach to Form 990 or Form 990-EZ.

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

HOUSING AND COMMUNITY

Open to Public Inspection

THE NET EFFECT

Schedule O (Form 990) 2022

Employer identification number

\*\*-\*\*\*3473 DEVELOPMENT. INC FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENTS PROJECT DEVELOPMENT - ACCOUNTS FOR ALL OPERATIONS OF DOWNSTREET FOR REHABILITATION AND DEVELOPMENT OF AFFORDABLE HOUSING. FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 THE 990 DRAFT IS REVIEWED BY MANAGEMENT THEN PROVIDED TO THE FIDUCIARY COMMITTEE FOR REVIEW, THEN TO THE FULL BOARD FOR A VOTE OF APPROVAL. FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL THE BOARD CONDUCTS AN ANNUAL REVIEW OF THE EXECUTIVE DIRECTOR'S PERFORMANCE AND APPROVES ANNUAL COMPENSATION. THE BOARD CHAIR PROVIDES THE CFO WITH APPROVAL OF THE EXECUTIVE DIRECTOR'S SALARY. FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST. FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION 37,068 RENTAL PROPERTY EXPENSES RENTAL PROPERTY EXPENSES -37,068 EFFECTIVE JANUARY 1, 2022, THE ORGANIZATION ADOPTED THE PROVISIONS OF ACCOUNTING STANDARDS UPDATE (ASU) NO. 2016-02, LEASES (TOPIC 842), WHICH REPLACES THE PRIOR GUIDANCE FOR LEASES FOUND IN FASB ASC 840. AS A RESULT OF THE ADOPTION, NET ASSETS AS OF DECEMBER 31, 2020 INCREASED BY \$79,142,

2021 DECREASED BY \$14,574.

AND NET ASSETS AS OF DECEMBER 31

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

Schedule O (Form 990) 2022 Name of the organization	Page 2 Employer identification number
DOWNSTREET HOUSING AND COMMUNITY	**-***3473
WAS AN INCREASE OF \$64,568.	
Wile far included of Qui, 300.	
	DXCE 1 OF 1

#### **PUBLIC**

#### **SCHEDULE R** (Form 990)

#### **Related Organizations and Unrelated Partnerships**

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

Department of the Treasury Internal Revenue Service

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

Legal domicile (state

or foreign country)

Total income

**Open to Public** Inspection

Direct controlling

OMB No. 1545-0047

Name of the organization

MRM HOLDINGS, LLC

22 KEITH AVENUE, SUITE 100

Part I

DOWNSTREET HOUSING AND COMMUNITY

\*\*-\*\*\*9259

Name, address, and EIN (if applicable) of disregarded entity

Employer identification number \*\*-\*\*\*3473

End-of-year assets

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

Primary activity

BARRE VT 05641	HOUSING	VT			128,275	DOWNSTREET
2)						
3)						
·)						
5)						
Part II Identification of Related Tax-Exempt Organiz one or more related tax-exempt organizations d	<b>:ations.</b> Complete if th uring the tax year.	ne organization a	answered "Yes" (	on Form 990, Pa	art IV, line 34,	because it had
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 512(b)(1) controlled entity  Yes No
I)						103 110
2)						
3)						
•••••••••••••••••••••••••••••••••••••••						
4)						
5)						
or Paperwork Reduction Act Notice, see the Instructions for Form 99	0.				Schedu	le R (Form 990) 2

Schedule R (Form 990) 2022 DOWNSTREET HOUSING AND COMMUNITY \*\*-\*\*\*3473 Page 2

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

because it had one or more related	1		ated as a part	· ·	g ine iax year.		1			ı	1
(a)  Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)		(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	Disp portionallo	oro- onate c.?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	General managi partner	?
(1)BARRE STREET APARTMENTS LP 22 KEITH AVE, SUITE 100 BARRE VT 05641									N/A		
**-***6425	HOUSING	VT	N/A	EXCLUDED	-10	-58		Χ		Х	0.01
(2)BIANCHI-HEBERT LP 107 NORTH MAIN ST. ROOM 6 BARRE VT 05641 **-**2626	HOUSING	ידיע	N/A	EXCLUDED	-14	-125		X	N/A	x	0.01
(3)CHASE BLOCK LP 22 KEITH AVE. SUTIE 100 WATERBURY CENTER VT 05676 **-**4659	HOUSING		N/A	EXCLUDED	-7	-6		X	N / 2		0.01
(4)COLONIAL VILLAGE APARTMENTS LP 22 KEITH AVE, SUITE 100 BARRE VT 05641 **-***2106	HOUSING		N/A	EXCLUDED	-11	-41		x	N/A	x	0.01
Identification of Polated Organia					Complete if the s				"Voo" on Form (	100 1	

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	(g) Share of end-of-year assets	<b>(h)</b> Percentage ownership	(i Sec 512(t contr ent	o)(13) rolled
								Yes	No
(1)CVCLT RIVER STATION, INC. 22 KEITH AVENUE, STE. 100									
BARRE VT 05641 **-***5479	HOUSING	VT	N/A	С	-8	4,002	100.000000		Х
(2)CVCLT VENTURES, INC.  22 KEITH AVENUE, STE. 100  BARRE VT 05641  **-***8581	HOUSING	VT	N/A	C	-202	56,033	100.000000		Х
(3)									
(4)									

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, Part III because it had one or more related organizations treated as a partnership during the tax year. (h) (i) (j) (k) (e) (g) Predominant Name, address, and EIN of Primary activity Direct controlling Dispro-Code V-UBI Legal Share of total Share of end-of-General or Percentage income (related, related organization income year assets ownership entity domicile portionate amount in box 20 managing unrelated. (state or alloc.? of Schedule K-1 partner? excluded from foreign (Form 1065) tax under sections 512-514) country) Yes No Yes No (1) FRENCH BLOCK LP 100 BANK STREET, SUITE 400 BURLINGTON VT 05401 N/A\*\*-\*\*\*4734 HOUSING VT N/A -23Χ 0.01 EXCLUDED -8 Χ (2) GREEN MOUNTAIN SEMINARY HLP 22 KEITH AVE. SUITE 100 WATERBURY CENTER VT 05677 N/A\*\*-\*\*\*4342 HOUSING VT N/A EXCLUDED -1047,525 Х Χ 99.10 (3)LADD HALL LP 100 BANK STREET, SUITE 400 VT 05401 BURLINGTON N/A\*\*-\*\*\*2283 HOUSING VT N/A 0.01 EXCLUDED -55Χ Χ (4) RIVER STATION HLP 100 BANK STREET, SUITE 400 BURLINGTON VT 05401 N/A\*\*-\*\*5479 HOUSING VT N/A EXCLUDED -112 0.01 -8

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV,

line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

,								
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(g) Share of end-of-year assets	(h) Percentage ownership	(i Sect 512(b contro enti	o)(13) colled ity?
							Yes	No
(1)								
(2)								
(3)								
(4)								

\*\*-\*\*\*3473 Schedule R (Form 990) 2022 DOWNSTREET HOUSING AND COMMUNITY Page 2 Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, Part III because it had one or more related organizations treated as a partnership during the tax year. (e) (h) (i) (j) (k) (g) Predominant Name, address, and EIN of Primary activity Direct controlling Dispro-Code V-UBI Percentage Legal Share of total Share of end-of-General or income (related, related organization income year assets ownership entity domicile portionate amount in box 20 managing unrelated. (state or alloc.? of Schedule K-1 partner? excluded from foreign (Form 1065) tax under sections 512-514) country) Yes No Yes No (1)NORTH BRANCH APARTMENTS LP 123 ST PAUL STREET BURLINGTON VT 05401 N/A\*\*-\*\*\*8514 HOUSING VT N/A -196 Χ Χ 0.01 EXCLUDED 6 (2) SUMMER STREET HLP 100 BANK STREET, SUITE 400 VT 05401 BURLINGTON N/A\*\*-\*\*\*2977 HOUSING VT N/A EXCLUDED -39Х Χ 0.01 (3)WAITS RIVER HLP 123 ST PAUL STREET BURLINGTON VT 05401 N/A\*\*-\*\*\*2577 HOUSING VT N/A 0.01 EXCLUDED -12-271Χ Χ (4)WHEELER BROOK HLP 123 ST PAUL STREET BURLINGTON VT 05401 N/A\*\*-\*\*\*6829 HOUSING VT N/A EXCLUDED 0.01 Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, Part IV line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i Sec 512(b contr enti	tion (13) olled ity?
								Yes	
(1)									
									l
(2)									
• • • • • • • • • • • • • • • • • • • •									
(3)									
(4)									
	I	l				1	Oalaadada D./Cam	000	

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, Part III because it had one or more related organizations treated as a partnership during the tax year. (h) (i) (e) (g) (j) (k) Predominant Primary activity Name, address, and EIN of Legal Direct controlling Share of total Share of end-of-Dispro-Code V-UBI General or Percentage income (related, related organization year assets ownership entity income domicile portionate managing amount in box 20 unrelated. (state or alloc.? of Schedule K-1 partner? excluded from foreign (Form 1065) tax under sections 512-514) country) Yes No Yes No (1)WINOOSKI RIVER APARTMENT LP 22 KEITH AVE, SUITE 100 BARRE VT 05641 N/A\*\*-\*\*\*6425 HOUSING -25Х VT N/A EXCLUDED Χ 0.01 (2)EVERGREEN PLACE HLP 5308 MAIN STREET, ROUTE 100 WAITSFIELD VT 05673 N/A\*\*-\*\*\*3494 HOUSING VT N/A Χ 99.99 EXCLUDED -8 Χ (3)TAYLOR STREET 61 TAYLOR STREET MONTPELIER VT 05602 N/A\*\*-\*\*\*8642 HOUSING VT N/A EXCLUDED -13-12Χ 0.01 X (4) Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, Part IV line 34, because it had one or more related organizations treated as a corporation or trust during the tax year. (d) (c) (g) (h) (i) Section Name, address, and EIN of related organization Legal domicile Type of entity Share of total Share of Primary activity Direct controlling Percentage 512(b)(13) end-of-year assets ownership (state or entity (C corp. S corp. income controlled foreign country) or trust) entity? Yes No (2) (3)

(4)

Page 3

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х
b Gift, grant, or capital contribution to related organization(s)	1b	Χ	
c Gift, grant, or capital contribution from related organization(s)	1c		X
d Loans or loan guarantees to or for related organization(s)	1d	Χ	
e Loans or loan guarantees by related organization(s)	1e		X
f Dividends from related organization(s)	1f		X
g Sale of assets to related organization(s)	1g		X
h Purchase of assets from related organization(s)	1h		X
Exchange of assets with related organization(s)	1i		X
j Lease of facilities, equipment, or other assets to related organization(s)	1j		X
	1k	Χ	<u> </u>
I Performance of services or membership or fundraising solicitations for related organization(s)	11	Χ	<u> </u>
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		X
	10		X
· · · · · · · · · · · · · · · · · · ·	1р		X
q Reimbursement paid by related organization(s) for expenses	1q		X
· · · · · · · · · · · · · · · · · · ·	1r		X
s Other transfer of cash or property from related organization(s)	1s		X

	(a) Name of related organization	(b) Transaction type (a–s)	<b>(c)</b> Amount involved	(d)  Method of determining amount involved
(1)	SUMMER STREET HLP	D	350,000	FAIR MARKET VALUE
(2)	FRENCH BLOCK LP	D	100,000	FAIR MARKET VALUE
(3)	WINOOSKI RIVER APARTMENTS LP	D	200,000	FAIR MARKET VALUE
(4)	BIANCHI-HEBERT LP	D	90,000	FAIR MARKET VALUE
(5)	LADD HALL LP	D	125,000	FAIR MARKET VALUE
(6)	EVERGREEN PLACE HLP	D	149,017	FAIR MARKET VALUE

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х
b Gift, grant, or capital contribution to related organization(s)	1b	Χ	
c Gift, grant, or capital contribution from related organization(s)	1c		X
d Loans or loan guarantees to or for related organization(s)	1d	Χ	
e Loans or loan guarantees by related organization(s)	1e		X
f Dividends from related organization(s)	1f		X
g Sale of assets to related organization(s)	1g		X
h Purchase of assets from related organization(s)	1h		X
Exchange of assets with related organization(s)	1i		X
j Lease of facilities, equipment, or other assets to related organization(s)	1j		X
	1k	Χ	<u> </u>
I Performance of services or membership or fundraising solicitations for related organization(s)	11	Χ	<u> </u>
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		X
	10		X
· · · · · · · · · · · · · · · · · · ·	1р		X
q Reimbursement paid by related organization(s) for expenses	1q		X
· · · · · · · · · · · · · · · · · · ·	1r		X
s Other transfer of cash or property from related organization(s)	1s		X

	(a)  Name of related organization	(b) Transaction type (a–s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
(1)	GREEN MOUNTAIN SEMINARY LP	D	141,187	FAIR MARKET VALUE
(2)	MAD RIVER MEADOWS HLP	D	76,143	FAIR MARKET VALUE
(3)	RIVER STATION HLP	D	225,160	FAIR MARKET VALUE
(4)	WAITS RIVER HOUSING LP	D	157,000	FAIR MARKET VALUE
(5)	BARRE STREET APARTMENTS LP	D	672,664	FAIR MARKET VALUE
(6)	SUMMER STREET HLP	K	39,149	FAIR MARKET VALUE

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	Nο
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?			.,,
	1a		Х
b. Gift, grant, or capital contribution to related organization(s)	1b	Х	
· · · · · · · · · · · · · · · · · · ·	1c		Х
· · · · · · · · · · · · · · · · · · ·	1d	Х	
· · · · · · · · · · · · · · · · · · ·	1e	- 21	Х
e Loans or loan guarantees by related organization(s)	16		21
f Dividends from related organization(s)	1f		Х
	1g	$\rightarrow$	X
	1h	$\rightarrow$	X
· · · · · · · · · · · · · · · · · · ·	111 1i		X
5	-		X
j Lease of facilities, equipment, or other assets to related organization(s)	1j		Λ
	41	Х	
, 11 ,	1k		<del> </del>
· · · · · · · · · · · · · · · · · · ·	11	Х	
· · · · · · · · · · · · · · · · · · ·	1m		X
· · · · · · · · · · · · · · · · · · ·	1n		Х
o Sharing of paid employees with related organization(s)	10		X
p Reimbursement paid to related organization(s) for expenses	1p		Х
q Reimbursement paid by related organization(s) for expenses	1q		Х
r Other transfer of cash or property to related organization(s)	1r		Х
	1s		Х

	(a)  Name of related organization	(b) Transaction type (a–s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
(1)	BARRE STREET APARTMENTS LP	L	26,176	FAIR MARKET VALUE
(2)	BIANCHI-HEBERT LP	L	20,624	FAIR MARKET VALUE
(3)	COLONIAL VILLAGE LP	L	22,853	FAIR MARKET VALUE
(4)	BIANCHI-HEBERT LP	В	5,000	FAIR MARKET VALUE
(5)	FRENCH BLOCK LP	L	20,260	FAIR MARKET VALUE
(6)	MAD RIVER MEADOWS HLP	L	28,119	FAIR MARKET VALUE

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?			
	1a		Х
b Gift, grant, or capital contribution to related organization(s)	1b	Χ	<u> </u>
c Gift, grant, or capital contribution from related organization(s)	1c		Х
d Loans or loan guarantees to or for related organization(s)	1d	Χ	
e Loans or loan guarantees by related organization(s)	1e		Х
f Dividends from related organization(s)	1f		Х
	1g		Х
	1h		Х
I Exchange of assets with related organization(s)	1i		Х
j Lease of facilities, equipment, or other assets to related organization(s)	1j		Х
	1k	Χ	
I Performance of services or membership or fundraising solicitations for related organization(s)	11	Χ	
	1m		Х
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		Х
o Sharing of paid employees with related organization(s)	10		Х
p Reimbursement paid to related organization(s) for expenses	1p		Х
q Reimbursement paid by related organization(s) for expenses	1q		Х
r Other transfer of cash or property to related organization(s)	1r		Х
s Other transfer of cash or property from related organization(s)	1s		Х

	(a) Name of related organization	(b) Transaction type (a–s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
(1)	NORTH BRANCH LP	L	54,862	FAIR MARKET VALUE
(2)	RIVER STATION HLP	L	47,393	FAIR MARKET VALUE
(3)	LADD HALL LP	L	32,820	FAIR MARKET VALUE
(4)	CHASE BLOCK LP	L	14,238	FAIR MARKET VALUE
(5)	SUMMER STREET HLP	L	33,176	FAIR MARKET VALUE
(6)	TAYLOR STREET HLP	L	35,041	FAIR MARKET VALUE

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х
<b>b</b> Gift, grant, or capital contribution to related organization(s)	1b	Х	
c Gift, grant, or capital contribution from related organization(s)	1c		Х
d Loans or loan guarantees to or for related organization(s)	1d	Х	
e Loans or loan guarantees by related organization(s)	1e		Х
f Dividends from related organization(s)	1f		X
g Sale of assets to related organization(s)	1g		X
h Purchase of assets from related organization(s)	1h		X
I Exchange of assets with related organization(s)	1i		Х
j Lease of facilities, equipment, or other assets to related organization(s)	1j		X
k Lease of facilities, equipment, or other assets from related organization(s)	1k	Х	<u> </u>
l Performance of services or membership or fundraising solicitations for related organization(s)	11	Х	<u> </u>
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		Х
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		X
o Sharing of paid employees with related organization(s)	10		X
p Reimbursement paid to related organization(s) for expenses	1р		Х
q Reimbursement paid by related organization(s) for expenses	1q		X
r Other transfer of cash or property to related organization(s)	1r		X
s Other transfer of cash or property from related organization(s)	1s		X

	(a) Name of related organization	(b) Transaction type (a–s)	(c) Amount involved	(d)  Method of determining amount involved
(1)	WAITS RIVER HOUSING LP	L	29,044	FAIR MARKET VALUE
(2)	WHEELER BROOK LP	L	20,934	FAIR MARKET VALUE
(3)	WINOOSKI RIVER APARTMENTS LP	L	18,332	FAIR MARKET VALUE
(4)	EVERGREEN PLACE HLP	L	15,336	FAIR MARKET VALUE
(5)	GREEN MOUNTAIN SEMINARY LP	L	22,852	FAIR MARKET VALUE
(6)	CHASE BLOCK LP	D	483,708	FAIR MARKET VALUE

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?			
· · · · · · · · · · · · · · · · · · ·	а		Х
b Gift, grant, or capital contribution to related organization(s)		Χ	
c Gift, grant, or capital contribution from related organization(s)	С		Χ
d Loans or loan guarantees to or for related organization(s)	d	Х	
e Loans or loan guarantees by related organization(s)	е		X
f Dividends from related organization(s)	f		Х
g Sale of assets to related organization(s)	g		Х
h Purchase of assets from related organization(s)			Х
i Exchange of assets with related organization(s)	i		Χ
j Lease of facilities, equipment, or other assets to related organization(s)	j		X
k Lease of facilities, equipment, or other assets from related organization(s)		Χ	
Performance of services or membership or fundraising solicitations for related organization(s)	I	Х	
m Performance of services or membership or fundraising solicitations by related organization(s)	m		Χ
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	n		Χ
	o		Х
p Reimbursement paid to related organization(s) for expenses	р		Х
q Reimbursement paid by related organization(s) for expenses	q		Х
r Other transfer of cash or property to related organization(s)	r		Χ
s Other transfer of cash or property from related organization(s)	s		Χ
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			

	(a)  Name of related organization	(b) Transaction type (a–s)	(c) Amount involved	(d) Method of determining amount involved
(1)	COLONIAL VILLAGE LP	D	500,000	FAIR MARKET VALUE
(2)	WAITS RIVER LP	D	11,000	FAIR MARKET VALUE
(3)				
(4)				
(5)				
(6)				

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

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

(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal	(d) Predominant	Are all	e) partners	(f) Share of	(g) Share of	Disprop	h) ortionate	(i) Code V—UBI	Gene	j) eral or	(k) Percentage
		domicile (state or foreign	income (related, unrelated, excluded from tax under	sec 501( organiz	(c)(3)	total income	end-of-year assets	alloca	itions?	amount in box 20 of Schedule K-1 (Form 1065)	man part	aging ner?	ownership
		country)		Yes				Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													

Part VI

## **PUBLIC**

Schedule R (F	orm 990) 202	2 DOWNSTREE	T HOUSING	AND	COMMUNITY	**-***3473	Page 5
Part VII	Suppleme Provide ac	ental Information dditional informati	ı. on for respons	es to qu	estions on Sche	edule R. See instructions.	
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