

Form **990**

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

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2020 calendar year, or tax year beginning , and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization: DOWNSTREET HOUSING AND COMMUNITY DEVELOPMENT, INC. Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 22 KEITH AVENUE, SUITE 100 City or town, state or province, country, and ZIP or foreign postal code BARRE VT 05641-3709	D Employer identification number **-***3473 E Telephone number 802-476-4493 G Gross receipts\$ 4,907,611
F Name and address of principal officer: KAREN HATCHER (STARTED IN 2021) 22 KEITH AVENUE BARRE VT 05641		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶
J Website: ▶ WWW.DOWNSTREET.ORG		L Year of formation: 1987
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		M State of legal domicile: VT

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: DOWNSTREET STRENGTHENS THE COMMUNITIES OF CENTRAL VERMONT BY ENGAGING WITH PEOPLE, PROVIDING AFFORDABLE HOMES, AND CONNECTING PEOPLE TO THE RESOURCES AND SERVICES THEY NEED TO THRIVE.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	11
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	11
	5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	32
	6 Total number of volunteers (estimate if necessary)	6	13
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	1,966,978	2,280,897
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,160,424	2,133,124
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-241,221	14,352
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	955,720	479,238
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	4,841,901	4,907,611
	14 Benefits paid to or for members (Part IX, column (A), line 4)		571,902
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,937,094	1,929,810
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 129,077		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,921,631	2,119,120
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,858,725	4,620,832	
19 Revenue less expenses. Subtract line 18 from line 12	983,176	286,779	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	13,963,842	14,666,248
	22 Net assets or fund balances. Subtract line 21 from line 20	2,789,885	3,042,685
		11,173,957	11,623,563

Part II Signature Block

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

Sign Here	Signature of officer KAREN HATCHER (STARTED IN 2021)	Date EXECUTIVE DIRECTOR	
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name RANDALL L. SARGENT, CPA	Preparer's signature Date	Check <input type="checkbox"/> if self-employed PTIN *****
	Firm's name ▶ JMM & ASSOCIATES, PC	Firm's EIN ▶ ** - *** 0081	
	Firm's address ▶ 336 WATER TOWER CIR STE 801 COLCHESTER, VT 05446	Phone no. 802-655-5665	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: DOWNSTREET STRENGTHENS THE COMMUNITIES OF CENTRAL VERMONT BY ENGAGING WITH PEOPLE, PROVIDING AFFORDABLE HOMES, AND CONNECTING PEOPLE TO THE RESOURCES AND SERVICES THEY NEED TO THRIVE.

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

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

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

4a (Code:) (Expenses \$ 1,753,248 including grants of\$) (Revenue \$ 1,154,730) PROPERTY MANAGEMENT - ACCOUNTS FOR THE SERVICES PROVIDED TO OTHER PROPERTIES IN WHICH DOWNSTREET IS AN INVESTOR.

4b (Code:) (Expenses \$ 889,218 including grants of\$) (Revenue \$ 710,082) PROPERTY OPERATIONS - ACCOUNTS FOR THE RENTAL ACTIVITY AND OPERATIONS OF THE FOLLOWING PROJECTS: BROMUR, VERDMONT, LIMEHURST MOBILE HOME PARK, HILLSIDE, BRIDGE STREET, GUIDICI, LAUREL STREET, GOOD NEIGHBORS, PHOENIX HOUSE, AND WHISTLESTOP MOBILE HOME PARK.

4c (Code:) (Expenses \$ 1,282,675 including grants of\$ 571,902) (Revenue \$ 37,970) HOMEOWNERSHIP - ACCOUNTS FOR THE ACTIVITIES OF DOWNSTREET'S HOMEOWNERSHIP CENTER.

4d Other program services (Describe on Schedule O.) (Expenses \$ 250,141 including grants of\$) (Revenue \$ 230,342)

4e Total program service expenses 4,175,282

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a 32		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (11); 1b Enter the number of voting members included on line 1a, above, who are independent (11); 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? (X); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? (X); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (X); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (X); 6 Did the organization have members or stockholders? (X); 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? (X); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (X); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (X); b Each committee with authority to act on behalf of the governing body? (X); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O. (X)

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

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

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed NONE
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 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.
20 State the name, address, and telephone number of the person who possesses the organization's books and records

SCHUYLER ANDERSON
BARRE

22 KEITH AVENUE

VT 05641

802-476-4493

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See 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 per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KAREN HATCHER (STARTED IN 2021) EXECUTIVE DIRECTOR	40.00 0.00			X				0	0	0
(2) EILEEN PELTIER (LEFT IN 2021) EXECUTIVE DIRECTOR	40.00 0.00			X			129,029	0	20,447	
(3) DANIEL BARLOW PRESIDENT	2.00 0.00	X		X			0	0	0	0
(4) LORI BELDING VICE PRESIDENT	2.00 0.00	X		X			0	0	0	0
(5) KEVIN LUNN TREASURER	2.00 0.00	X		X			0	0	0	0
(6) PEGEEN MULHERN SECRETARY	2.00 0.00	X		X			0	0	0	0
(7) DAPHNE MAKINSON DIRECTOR	2.00 0.00	X					0	0	0	0
(8) JEANNE RICHARDSON DIRECTOR	2.00 0.00	X					0	0	0	0
(9) JIM ALVAREZ DIRECTOR	2.00 0.00	X					0	0	0	0
(10) KEVIN ELLIS DIRECTOR	2.00 0.00	X					0	0	0	0
(11) LARA LONON DIRECTOR	2.00 0.00	X					0	0	0	0

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

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) CARL HILTON VAN OSDALL DIRECTOR	2.00 0.00	X						0	0	0
(13) CELINE DAVIS DIRECTOR	2.00 0.00	X						0	0	0
(14) ABBIE BLUM (UNTIL SEPTEMBER 2020) DIRECTOR	2.00 0.00	X						0	0	0
(15) DEBORAH KAHN (UNTIL NOVEMBER 2020) DIRECTOR	2.00 0.00	X						0	0	0
1b Subtotal								129,029		20,447
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								129,029		20,447

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

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e	1,548,768			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	732,129			
	g Noncash contributions included in lines 1a-1f	1g	\$			
	h Total. Add lines 1a-1f		2,280,897			
Program Service Revenue	2a RENTAL INCOME	Business Code 531110	710,082	710,082		
	b MAINTENANCE INCOME	531390	615,406	615,406		
	c MANAGEMENT FEES	531310	539,344	539,344		
	d DEVELOPMENT FEES	531310	230,342	230,342		
	e LEASE FEE INCOME	531390	37,970	37,970		
	f All other program service revenue	531190	-20	-20		
	g Total. Add lines 2a-2f		2,133,124			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		14,352		14,352	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross rents	(i) Real				
		(ii) Personal				
		6a				
	b Less: rental expenses	6b				
	c Rental inc. or (loss)	6c				
	d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		7a				
	b Less: cost or other basis and sales exps.	7b				
	c Gain or (loss)	7c				
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	9a					
	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						
Miscellaneous Revenue	11a MISCELLANEOUS INCOME	Business Code 531390	479,238	479,238		
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d		479,238			
12 Total revenue. See instructions		4,907,611	2,612,362	0	14,352	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	571,902	571,902		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	149,476	74,738	37,369	37,369
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,389,267	1,198,208	143,380	47,679
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	33,409	33,409		
9 Other employee benefits	223,004	188,649	15,183	19,172
10 Payroll taxes	134,654	118,183	9,755	6,716
11 Fees for services (nonemployees):				
a Management	79,123	79,123		
b Legal	16,065	16,065		
c Accounting	19,540		19,540	
d Lobbying				
e Professional fundraising services. See Part IV, line 7				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	48,335	35,934	9,561	2,840
12 Advertising and promotion	24,868	11,570	12,866	432
13 Office expenses	88,512	73,318	12,905	2,289
14 Information technology				
15 Royalties				
16 Occupancy	232,863	227,276	4,010	1,577
17 Travel	22,647	18,843	3,655	149
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	6,256	3,696	2,362	198
20 Interest	62,044	48,786	13,258	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	335,159	327,654	4,345	3,160
23 Insurance	57,010	54,475	1,704	831
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a GRANT EXPENSE	456,162	451,225	4,937	
b MISCELLANEOUS	354,633	334,968	13,002	6,663
c PROPERTY EXPENSE	253,394	244,751	8,641	2
d BAD DEBT	62,509	62,509		
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	4,620,832	4,175,282	316,473	129,077
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	876,856	1	1,012,201
	2 Savings and temporary cash investments	796,855	2	1,669,607
	3 Pledges and grants receivable, net	125,999	3	51,963
	4 Accounts receivable, net	181,634	4	217,019
	5 Loans and other receivables from 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		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net	4,797,522	7	4,263,169
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	42,078	9	33,974
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 10,277,806		
	b Less: accumulated depreciation	10b 3,248,258	10c	7,029,548
	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	64,477	13	60,035
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	344,667	15	328,732
16 Total assets. Add lines 1 through 15 (must equal line 33)	13,963,842	16	14,666,248	
Liabilities	17 Accounts payable and accrued expenses	195,047	17	279,267
	18 Grants payable		18	
	19 Deferred revenue		19	59,476
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	45,564	21	273,249
	22 Loans and other 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		22	
	23 Secured mortgages and notes payable to unrelated third parties	2,485,496	23	2,351,551
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	63,778	25	79,142
	26 Total liabilities. Add lines 17 through 25	2,789,885	26	3,042,685
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	4,822,770	27	5,690,939
	28 Net assets with donor restrictions	6,351,187	28	5,932,624
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	11,173,957	32	11,623,563
33 Total liabilities and net assets/fund balances	13,963,842	33	14,666,248	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,907,611
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,620,832
3	Revenue less expenses. Subtract line 2 from line 1	3	286,779
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	11,173,957
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	162,827
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	11,623,563

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	X	
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	X	

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

2020

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 or Form 990-EZ.**

Open to Public Inspection

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

Name of the organization DOWNSTREET HOUSING AND COMMUNITY DEVELOPMENT, INC.	Employer identification number * * - * * * 3473
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Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

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

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

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

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,282,245	1,135,013	1,366,831	1,966,978	2,280,897	8,031,964
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	1,282,245	1,135,013	1,366,831	1,966,978	2,280,897	8,031,964
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						479,063
6 Public support. Subtract line 5 from line 4.						7,552,901

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4	1,282,245	1,135,013	1,366,831	1,966,978	2,280,897	8,031,964
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	22,391	12,504	14,491	15,087	14,352	78,825
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						8,110,789
12 Gross receipts from related activities, etc. (see instructions)					12	12,322,868

13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f) divided by line 11, column (f))	14	93.12%
15 Public support percentage from 2019 Schedule A, Part II, line 14	15	93.32%

16a 33 1/3% support test—2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2019 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2019 Schedule A, Part III, line 17	18	%

- 19a 33 1/3% support tests—2020.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶
- b 33 1/3% support tests—2019.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 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

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
2		
3 By reason of the relationship described in 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
3		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
2a		
b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
2b		
3 Parent of Supported Organizations. Answer lines 3a and 3b below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>		
3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
3b		

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

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

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	
Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 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	
Section 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D – Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2020 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2020			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, 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 2020 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016			
b Excess from 2017			
c Excess from 2018			
d Excess from 2019			
e Excess from 2020			

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

Area with horizontal dotted lines for supplemental information.

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2020

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

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

Name of the organization: DOWNSTREET HOUSING AND COMMUNITY DEVELOPMENT, INC. Employer identification number: ***-***3473

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, and questions about donor advisement.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Form for Part II with multiple questions (1-9) regarding conservation easements, including a table for lines 2a-2d held at the end of the tax year.

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.

Form for Part III with questions (1a, 1b, 2, a, b) regarding collections of art and historical treasures, including revenue and asset reporting.

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange program
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

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

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

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

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

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment %
 - b** Permanent endowment %
 - c** Term endowment %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|------------------------------------|---------------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
- b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?
- 3b**
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,671,328		1,671,328
b Buildings		7,816,122	3,031,938	4,784,184
c Leasehold improvements		176,711	27,038	149,673
d Equipment		334,997	189,282	145,715
e Other		278,648		278,648
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				7,029,548

Part VII Investments – Other Securities.

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

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

Part VIII Investments – Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) FACILITY LEASE PAYABLE	79,142
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	79,142

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1	4,907,611
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	4,907,611
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	4,907,611

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

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

1	Total expenses and losses per audited financial statements		1	4,620,832
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	4,620,832
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	4,620,832

Part XIII Supplemental Information.

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

PART X - FIN 48 FOOTNOTE

THE ORGANIZATION BELIEVES IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN, AND, AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS.

SCHEDULE I (Form 990)

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

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization DOWNSTREET HOUSING AND COMMUNITY DEVELOPMENT, INC.

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

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of noncash assistance, (h) Purpose of grant or assistance. Rows 1-9.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
3 Enter total number of other organizations listed in the line 1 table

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 RENTAL REHAB	17	571,902			
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

WE HAD A HOME INSPECTION DONE AT INCEPTION OF EACH PROJECT AND A SCOPE OF

WORK WAS APPROVED BY LANDLORD, AND CONTRACTOR, A SECOND ONE AT 50% COMPLETE

AND A FINAL ONE WHEN 100% COMPLETE

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2020

Open to Public Inspection

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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

Department of the Treasury
Internal Revenue Service

Name of the organization	DOWNSTREET HOUSING AND COMMUNITY DEVELOPMENT, INC.	Employer identification number **-***3473
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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 IS PROVIDED TO THE FULL BOARD, EXECUTIVE DIRECTOR, COO AND CFO FOR REVIEW AND APPROVAL BEFORE FILING.

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
TRANSFER OF EQUITY \$ 162,827

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2020

**Open to Public
Inspection**

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

Department of the Treasury
Internal Revenue Service

Name of the organization

DOWNSTREET HOUSING AND COMMUNITY
DEVELOPMENT, INC.

Employer identification number

-*3473

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) MRM HOLDINGS, LLC 22 KEITH AVENUE, SUITE 100 BARRE VT 05641 **-***9259	HOUSING	VT		34,614	DOWNSTREET
(2)					
(3)					
(4)					
(5)					

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)							
(2)							
(3)							
(4)							
(5)							

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate alloc.?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)WAITS RIVER HOUSING LTD PARTNERSHIP 123 ST PAUL STREET BURLINGTON VT 05401 **-***2577	HOUSING	VT	N/A	EXCLUDED	-2	-259		X	N/A	X		0.01
(2)BIANCHI-HEBERT LIMITED PARTNERSHIP 107 NORTH MAIN ST. ROOM 6 BARRE VT 05641 **-***2626	HOUSING	VT	N/A	EXCLUDED	-9	-104		X	N/A	X		0.01
(3)WHEELER BROOK HOUSING LP 123 ST PAUL STREET BURLINGTON VT 05401 **-***6829	HOUSING	VT	N/A	EXCLUDED		-89		X	N/A	X		0.01
(4)NORTH BRANCH APARTMENTS LTD LP 123 ST PAUL STREET BURLINGTON VT 05401 **-***8514	HOUSING	VT	N/A	EXCLUDED	4	-201		X	N/A	X		0.01

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) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)CVCLT RIVER STATION, INC. 22 KEITH AVENUE, STE. 100 BARRE VT 05641 **-***5479	HOUSING	VT	N/A	C	-7	4,002	100.000000		X
(2)CVCLT VENTURES, INC. 22 KEITH AVENUE, STE. 100 BARRE VT 05641 **-***8581	HOUSING	VT	N/A	C	-1,790	48,508	100.000000		X
(3)									
(4)									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate alloc.?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) SUMMER STREET HOUSING LTD LP 100 BANK STREET, SUITE 400 BURLINGTON VT 05401 **-***2977	HOUSING	VT	N/A	EXCLUDED	-8	32		X	N/A	X		0.01
(2) LADD HALL LIMITED PARTNERSHIP 100 BANK STREET, SUITE 400 BURLINGTON VT 05401 **-***2283	HOUSING	VT	N/A	EXCLUDED	-7	-41		X	N/A	X		
(3) FRENCH BLOCK LTD PARTNERSHIP 100 BANK STREET, SUITE 400 BURLINGTON VT 05401 **-***4734	HOUSING	VT	N/A	EXCLUDED	-7	-16		X	N/A	X		0.01
(4) WINOOSKI RIVER APARTMENT LP 22 KEITH AVE, SUITE 100 BARRE VT 05641 **-***6425	HOUSING	VT	N/A	EXCLUDED	-9	-17		X	N/A	X		0.01

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) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate alloc.?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) BARRE STREET APARTMENTS LP 22 KEITH AVE, SUITE 100 BARRE VT 05641 **-***6425	HOUSING	VT	N/A	EXCLUDED	-11	-50		X	N/A	X		0.01
(2) COLONIAL VILLAGE APARTMENTS LP 22 KEITH AVE, SUITE 100 BARRE VT 05641 **-***2106	HOUSING	VT	N/A	EXCLUDED	-12	-41		X	N/A	X		0.01
(3) GREEN MOUNTAIN SEMINARY HLP 22 KEITH AVE. SUITE 100 WATERBURY CENTER VT 05677 **-***4342	HOUSING	VT	N/A	EXCLUDED		7,525		X	N/A	X		99.10
(4) CHASE BLOCK LP 22 KEITH AVE. SUTIE 100 WATERBURY CENTER VT 05676 **-***4659	HOUSING	VT	N/A	EXCLUDED	715			X	N/A	X		99.00

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) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate alloc.?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) TAYLOR STEET LP 100 BANK STREET, SUITE 400 BURLINGTON VT 05401 **-***8642	HOUSING	VT	N/A	EXCLUDED	-5	-5		X	N/A	X		0.01
(2) MAD RIVER MEADOWS HLP 144 BUTCHER HOUSE DRIVE WAITSFIELD VT 05673 **-***2413	HOUSING	VT	N/A	EXCLUDED	-5,257			X	N/A	X		0.10
(3) EVERGREEN PLACE HOUSING HLP 5308 MAIN STREET, ROUTE 100 WAITSFIELD VT 05673 **-***3494	HOUSING	VT	N/A	EXCLUDED	-73,395	-98,342		X	N/A	X		99.99
(4) RIVER STATION HLP 100 BANK STREET, SUITE 400 BURLINGTON VT 05401 **-***5479	HOUSING	VT	N/A	EXCLUDED	-7	-103		X	N/A	X		

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) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									

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		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)	X	
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)	X	
l Performance of services or membership or fundraising solicitations for related organization(s)	X	
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

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) 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	253,737	FAIR MARKET VALUE
(4) BIANCHI-HEBERT LP	D	90,000	FAIR MARKET VALUE
(5) EVERGREEN PLACE, HLP	D	149,017	FAIR MARKET VALUE
(6) GREEN MOUNTAIN SEMINARY, LP	D	141,187	FAIR MARKET VALUE

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		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)	X	
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)	X	
l Performance of services or membership or fundraising solicitations for related organization(s)	X	
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

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) LADD HALL, LP	D	125,000	FAIR MARKET VALUE
(2) MAD RIVER MEADOWS, HLP	D	79,143	FAIR MARKET VALUE
(3) RIVER STATION HLP	D	171,000	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	36,902	FAIR MARKET VALUE

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		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)	X	
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)	X	
l Performance of services or membership or fundraising solicitations for related organization(s)	X	
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

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) EVERGREEN PLACE, HLP	L	17,749	FAIR MARKET VALUE
(2) GREEN MOUNTAIN SEMINARY, LP	L	21,768	FAIR MARKET VALUE
(3) BARRE STREET APARTMENTS, LP	L	24,672	FAIR MARKET VALUE
(4) BIANCHI-HEBERT LP	L	22,152	FAIR MARKET VALUE
(5) COLONIAL VILLAGE	L	22,848	FAIR MARKET VALUE
(6) FRENCH BLOCK LP	L	19,284	FAIR MARKET VALUE

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		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)	X	
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)	X	
l Performance of services or membership or fundraising solicitations for related organization(s)	X	
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

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) MAD RIVER MEADOWS, HLP	L	27,300	FAIR MARKET VALUE
(2) NORTH BRANCH LP	L	51,708	FAIR MARKET VALUE
(3) RIVER STATION HLP	L	44,676	FAIR MARKET VALUE
(4) LADD HALL, LP	L	31,860	FAIR MARKET VALUE
(5) CHASE BLOCK LP	L	13,032	FAIR MARKET VALUE
(6) SUMMER STREET HLP	L	31,884	FAIR MARKET VALUE

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		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)	X	
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)	X	
l Performance of services or membership or fundraising solicitations for related organization(s)	X	
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

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) TAYLOR STREET HLP	L	32,400	FAIR MARKET VALUE
(2) WAITS RIVER HOUSING, LP	L	29,040	FAIR MARKET VALUE
(3) WHEELER BROOK LP	L	19,728	FAIR MARKET VALUE
(4) WINOOSKI RIVER APARTMENTS LP	L	18,780	FAIR MARKET VALUE
(5)			
(6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													

Form **4562**
 Department of the Treasury
 Internal Revenue Service (99)

Depreciation and Amortization
 (Including Information on Listed Property)

▶ Attach to your tax return.

OMB No. 1545-0172

2020

Attachment Sequence No. **179**

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

Name(s) shown on return **DOWNSTREET HOUSING AND COMMUNITY DEVELOPMENT, INC.** Identifying number **** - *** 3473**

Business or activity to which this form relates
INDIRECT DEPRECIATION

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,040,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,590,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2019 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2021. Add lines 9 and 10, less line 12	13	

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

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

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	304,972

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

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2020	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	<input type="checkbox"/>	

Section B—Assets Placed in Service During 2020 Tax Year Using the General Depreciation System

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

Section C—Assets Placed in Service During 2020 Tax Year Using the Alternative Depreciation System

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

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	304,972
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2020)

Form 990		Two Year Comparison Report		2019 & 2020	
Name		For calendar year 2020, or tax year beginning		, ending	
DOWNSTREET HOUSING AND COMMUNITY DEVELOPMENT, INC.				Taxpayer Identification Number **-***3473	
		2019	2020	Differences	
Revenue	1. Contributions, gifts, grants	1. 980,687	732,129	-248,558	
	2. Membership dues and assessments	2.			
	3. Government contributions and grants	3. 986,291	1,548,768	562,477	
	4. Program service revenue	4. 2,160,424	2,133,124	-27,300	
	5. Investment income	5. 15,087	14,352	-735	
	6. Proceeds from tax exempt bonds	6.			
	7. Net gain or (loss) from sale of assets other than inventory	7. -256,308		256,308	
	8. Net income or (loss) from fundraising events	8.			
	9. Net income or (loss) from gaming	9.			
	10. Net gain or (loss) on sales of inventory	10.			
	11. Other revenue	11. 955,720	479,238	-476,482	
	12. Total revenue. Add lines 1 through 11	12. 4,841,901	4,907,611	65,710	
Expenses	13. Grants and similar amounts paid	13.	571,902	571,902	
	14. Benefits paid to or for members	14.			
	15. Compensation of officers, directors, trustees, etc.	15. 137,632	149,476	11,844	
	16. Salaries, other compensation, and employee benefits	16. 1,799,462	1,780,334	-19,128	
	17. Professional fundraising fees	17.			
	18. Other professional fees	18. 168,505	163,063	-5,442	
	19. Occupancy, rent, utilities, and maintenance	19. 231,252	232,863	1,611	
	20. Depreciation and Depletion	20. 331,712	335,159	3,447	
	21. Other expenses	21. 1,190,162	1,388,035	197,873	
	22. Total expenses. Add lines 13 through 21	22. 3,858,725	4,620,832	762,107	
	23. Excess or (Deficit). Subtract line 22 from line 12	23. 983,176	286,779	-696,397	
Other Information	24. Total exempt revenue	24. 4,841,901	4,907,611	65,710	
	25. Total unrelated revenue	25.			
	26. Total excludable revenue	26. 2,874,923	2,626,714	-248,209	
	27. Total assets	27. 13,963,842	14,666,248	702,406	
	28. Total liabilities	28. 2,789,885	3,042,685	252,800	
	29. Retained earnings	29. 11,173,957	11,623,563	449,606	
	30. Number of voting members of governing body	30. 12	11		
	31. Number of independent voting members of governing body	31. 12	11		
32. Number of employees	32. 33	32			
33. Number of volunteers	33. 14	13			

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Form 990	Tax Return History	2020
Name DOWNSTREET HOUSING AND COMMUNITY DEVELOPMENT, INC.		Employer Identification Number **-***3473

	2016	2017	2018	2019	2020	2021
Contributions, gifts, grants	1,282,245	1,135,013	1,366,831	1,966,978	2,280,897	
Membership dues						
Program service revenue	2,073,258	2,087,756	2,207,896	2,160,424	2,133,124	
Capital gain or loss	-59,809	32,792	-553	-256,308		
Investment income	22,391	12,504	14,491	15,087	14,352	
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue	67,411	65,557	92,454	955,720	479,238	
Total revenue	3,385,496	3,333,622	3,681,119	4,841,901	4,907,611	
Grants and similar amounts paid					571,902	
Benefits paid to or for members						
Compensation of officers, etc.	114,184	127,870	136,532	137,632	149,476	
Other compensation	1,516,601	1,509,693	1,646,523	1,799,462	1,780,334	
Professional fees	175,658	201,827	175,091	168,505	163,063	
Occupancy costs	278,181	225,362	229,947	231,252	232,863	
Depreciation and depletion	299,894	299,146	322,074	331,712	335,159	
Other expenses	1,189,140	1,164,240	1,072,112	1,190,162	1,388,035	
Total expenses	3,573,658	3,528,138	3,582,279	3,858,725	4,620,832	
Excess or (Deficit)	-188,162	-194,516	98,840	983,176	286,779	
Total exempt revenue	3,385,496	3,333,622	3,681,119	4,841,901	4,907,611	
Total unrelated revenue						
Total excludable revenue	2,103,251	2,198,609	2,314,288	2,874,923	2,626,714	
Total Assets	13,569,489	12,409,722	12,931,112	13,963,842	14,666,248	
Total Liabilities	3,768,299	2,802,781	2,740,331	2,789,885	3,042,685	
Net Fund Balances	9,801,190	9,606,941	10,190,781	11,173,957	11,623,563	

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Federal Asset Report

FYE: 12/31/2020

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv	Meth	Prior	Current
Other Depreciation:											
54	PM Software (Hillside Portion)	3/01/02	299				299	5	MO S/L	299	0
65	Building - Bradford	2/01/92	86,605				86,605	50	MO S/L	50,788	1,732
66	Improvements - Bradford	11/01/93	143,431				143,431	30	MO S/L	129,932	4,781
68	Building - Orange, VT	9/01/94	301,600				301,600	50	MO S/L	152,811	6,032
69	Improvements	10/01/94	186,600				186,600	50	MO S/L	94,233	3,732
70	Buildings & Improvements	6/30/95	150,000				150,000	50	MO S/L	73,500	3,000
71	Improvements	2/01/96	16,223				16,223	50	MO S/L	7,760	324
72	Improvements	4/01/96	114,534				114,534	50	MO S/L	54,404	2,291
73	Building Improvement	6/30/97	958				958	50	MO S/L	431	19
76	Improvement - Vermont	1/01/99	130,573				130,573	50	MO S/L	55,058	2,611
77	Improvements	1/01/99	518				518	50	MO S/L	218	10
78	Improvement - Vermont	1/01/99	230,318				230,318	50	MO S/L	97,117	4,606
79	Mobile Home Pad - Larrow	7/01/00	1,479				1,479	30	MO S/L	962	49
80	Land Improvement	7/01/00	7,627				7,627	30	MO S/L	4,915	255
81	Mobile Home Pad - Farnham	10/01/00	3,026				3,026	30	MO S/L	1,934	100
83	Build. Improve. - Bradford	12/31/00	8,072				8,072	30	MO S/L	5,112	269
84	Land Improve. - Vermont	12/31/00	4,679				4,679	30	MO S/L	2,963	156
85	Building - Hillside #21	12/31/00	46,627				46,627	50	MO S/L	17,718	933
86	Building - Hillside #17	12/31/00	36,635				36,635	50	MO S/L	13,921	733
87	Land Improve. - Limehurst	12/31/00	42,794				42,794	30	MO S/L	27,103	1,426
88	Whistlestop closing costs	1/01/01	1,353				1,353	30	MO S/L	855	45
89	Bridge St. MHP - Acquisition/closing	5/30/01	102,012				102,012	30	MO S/L	63,333	3,400
90	Whistlestop Improve. from CIP	9/01/01	48,610				48,610	30	MO S/L	29,639	1,620
91	Improvements - Hillside/CIP	9/01/01	377,878				377,878	30	MO S/L	230,400	12,596
92	Improvements - Vermont	9/01/01	29,988				29,988	30	MO S/L	18,284	1,000
100	Land Impr. - Limehurst	12/31/00	59,970				59,970	30	MO S/L	37,981	1,999
103	Vermont - Drywell	6/06/01	1,698				1,698	30	MO S/L	1,049	57
106	Appliances, etc. - Bromur	12/11/01	3,821				3,821	10	MO S/L	3,821	0
107	Improvements - Bromur	7/01/02	1,936				1,936	15	MO S/L	1,936	0
108	Bridge St. MHP - rehab/construction	9/01/02	100,855				100,855	30	MO S/L	58,131	3,362
109	Improvements - Bridge MHP	9/01/02	56,322				56,322	30	MO S/L	32,463	1,878
111	Northfield St. - Drainage work	9/23/02	2,150				2,150	15	MO S/L	2,150	0
114	Vermont - Escrow for Slab	11/01/02	3,000				3,000	10	MO S/L	1,200	300
115	Land	1/01/92	0				0	0	-- Land	0	0
116	Land - Bromur	1/01/92	105,301				105,301	0	-- Land	0	0
120	Bradford Land	2/01/92	85,000				85,000	0	-- Land	0	0
121	Land - Brown	3/04/94	20,000				20,000	0	-- Land	0	0
122	Salvas - Land	9/27/94	12,500				12,500	0	-- Land	0	0
127	Wright - Land	3/15/95	12,500				12,500	0	-- Land	0	0
128	Fifield Land	4/01/95	15,000				15,000	0	-- Land	0	0
129	Wilson Land	4/01/95	15,000				15,000	0	-- Land	0	0
130	Salvas - Land (2)	5/26/95	15,000				15,000	0	-- Land	0	0
131	Limehurst Land	6/28/95	375,514				375,514	0	-- Land	0	0
132	Land - Woodbury	7/18/95	12,500				12,500	0	-- Land	0	0
133	Benway - Land	9/27/95	12,500				12,500	0	-- Land	0	0
134	Land - Lewis	11/20/95	15,000				15,000	0	-- Land	0	0
135	Drown - Land	2/02/96	12,500				12,500	0	-- Land	0	0
136	Roberts - Land	8/28/96	12,500				12,500	0	-- Land	0	0
138	Henzel - Land	10/10/96	12,500				12,500	0	-- Land	0	0
140	Grandfield Land	12/10/96	15,000				15,000	0	-- Land	0	0
141	Hoyt Land	12/10/96	12,500				12,500	0	-- Land	0	0
142	Ensminger - Land	2/01/97	20,000				20,000	0	-- Land	0	0
143	Land - Lewis	4/01/97	15,000				15,000	0	-- Land	0	0
144	Bilodeau - Land	5/01/97	15,000				15,000	0	-- Land	0	0
145	Lacilade Land	7/01/97	15,000				15,000	0	-- Land	0	0
146	Callahan Land	9/01/97	12,500				12,500	0	-- Land	0	0
147	Sokol - Land	9/01/97	12,500				12,500	0	-- Land	0	0
150	Land - McNaulty	12/01/97	15,000				15,000	0	-- Land	0	0
152	Kirkpatrick - Land	2/01/98	12,500				12,500	0	-- Land	0	0
154	Hanson- Land	3/01/98	15,000				15,000	0	-- Land	0	0
156	Bemo - Land	6/01/98	13,500				13,500	0	-- Land	0	0
157	Houston - Land	7/01/98	8,400				8,400	0	-- Land	0	0
158	Donated Land	7/01/98	10,000				10,000	0	-- Land	0	0
159	Normandy Land	9/01/98	13,000				13,000	0	-- Land	0	0
160	Forsythe/Baer - Land	9/01/98	1,796				1,796	0	-- Land	0	0
161	Baer/Renfrew/Forsythe - Land	10/01/98	32,717				32,717	0	-- Land	0	0
162	Vermont - Land	1/19/99	144,427				144,427	0	-- Land	0	0
163	Doten Land	3/17/99	15,000				15,000	0	-- Land	0	0

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Federal Asset Report

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Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
164	Olivera Land	4/01/99	10,000			10,000	0 -- Land	0	0
165	Giroux Land	6/08/99	10,000			10,000	0 -- Land	0	0
166	Sehic to Macris - Land	10/01/99	10,800			10,800	0 -- Land	0	0
167	Livingston Land	10/01/99	15,000			15,000	0 -- Land	0	0
168	Quintana Land	11/01/99	15,000			15,000	0 -- Land	0	0
169	Hillside #21 - Land	6/30/00	22,000			22,000	0 -- Land	0	0
170	Hillside #17 - Land	6/30/00	28,000			28,000	0 -- Land	0	0
173	Lawson - Land	4/16/01	15,000			15,000	0 -- Land	0	0
175	Dunster - Land	6/22/01	19,000			19,000	0 -- Land	0	0
176	Dennison - Land	7/31/01	30,000			30,000	0 -- Land	0	0
177	Mallery - Land	8/09/01	14,200			14,200	0 -- Land	0	0
178	Monteagudo - Land	8/10/01	19,000			19,000	0 -- Land	0	0
179	Medow - Land	8/15/01	25,500			25,500	0 -- Land	0	0
180	Cloutier - Land	5/28/02	20,000			20,000	0 -- Land	0	0
182	Land (Homeland) - Brunelle	2/28/03	17,000			17,000	0 -- Land	0	0
183	Land (Homeland) - Works	5/27/03	25,000			25,000	0 -- Land	0	0
212	Toilet #2 Bromur	3/15/03	560			560	10 MO S/L	560	0
213	Toilet - #4 Bromur	3/15/03	390			390	10 MO S/L	390	0
214	Vermont Septic Improvements	7/01/03	2,152			2,152	50 MO S/L	710	43
225	DEVELOPMENT FEE - BRIDGE ST.	9/01/03	5,000			5,000	30 MO S/L	2,722	167
229	NECI Buildings	7/07/04	0			0	30 MO S/L	0	0
231	Floor Repairs - Bromur	12/08/04	1,749			1,749	15 MO S/L	1,749	0
232	Bromur Rehabilitation	7/01/04	230,898			230,898	30 MO S/L	119,297	7,697
233	Limehurst Improvements	7/01/04	6,531			6,531	15 MO S/L	6,531	0
234	Vermont Septic Upgrade	9/01/04	60,020			60,020	15 MO S/L	60,020	0
250	Hot Water Heater - Bromur	4/19/05	1,984			1,984	10 MO S/L	1,984	0
251	18 CO2 Detectors - Bromur	12/15/05	1,740			1,740	10 MO S/L	1,740	0
252	Carpet Installation	12/31/05	1,034			1,034	10 MO S/L	1,034	0
253	Phone Lines - Bridge St.	2/10/05	2,930			2,930	10 MO S/L	2,930	0
254	Paved Driveway 1-8 - Bridge	10/28/05	12,220			12,220	15 MO S/L	11,541	679
255	Carbon Monoxide Detectors - Hillside	10/25/05	549			549	10 MO S/L	549	0
256	CO2 Detectors - Hillside	11/08/05	507			507	10 MO S/L	507	0
257	Lever Locks - Hillside	12/06/05	1,496			1,496	10 MO S/L	1,496	0
258	Septic System Improv. - Limehurst	8/31/05	20,748			20,748	30 MO S/L	9,913	691
259	Water Line Improv. - Whistlestop	9/01/05	1,015			1,015	20 MO S/L	727	51
260	Land - Bowers	1/01/92	12,500			12,500	0 -- Land	0	0
262	Land - Chouinard	1/01/92	12,500			12,500	0 -- Land	0	0
263	Land - Clifford	1/01/92	15,000			15,000	0 -- Land	0	0
265	Land - Huntington	1/01/92	12,500			12,500	0 -- Land	0	0
266	Land - Miller	1/01/92	10,000			10,000	0 -- Land	0	0
267	Land - O'Neill	1/01/92	18,000			18,000	0 -- Land	0	0
268	Land - Sanborn	1/01/92	12,500			12,500	0 -- Land	0	0
280	Slab for new trailer and add'l parking	8/17/06	4,087			4,087	10 MO S/L	4,087	0
291	Guidici Street	3/26/07	155,000			155,000	25 MO S/L	79,050	6,200
292	Dunranleau 2" Blow off	5/10/00	2,735			2,735	10 MO S/L	2,735	0
293	Mens House Oil Tank	8/16/07	1,300			1,300	10 MO S/L	1,300	0
294	Septic Improvements	8/10/07	4,169			4,169	10 MO S/L	4,169	0
299	Road Improvements	9/30/08	1,112			1,112	15 MO S/L	834	74
300	Water Line Improvement	6/10/08	3,517			3,517	15 MO S/L	2,716	235
302	Loan Tracking Software	7/01/09	5,000			5,000	3 MO S/L	5,000	0
306	Outside Tank	7/01/09	1,206			1,206	10 MO S/L	1,206	0
307	Sprinkler System	7/01/09	18,034			18,034	15 MO S/L	12,624	1,202
308	Sewer System	7/01/09	85,748			85,748	20 MO S/L	45,018	4,287
310	Improvements - Diamantis	7/01/09	3,000			3,000	10 MO S/L	3,000	0
311	Improvements - Kingsbury	7/01/09	1,784			1,784	10 MO S/L	1,784	0
312	Improvements - Griffin/Griffin	7/01/09	1,129			1,129	10 MO S/L	1,129	0
313	Ford F-150	1/27/09	23,739			23,739	5 MO S/L	23,739	0
323	NECI - 235 Barre Street	7/07/04	40,420			40,420	30 MO S/L	20,884	1,347
329	Improvements	6/07/10	6,022			6,022	10 MO S/L	5,771	251
330	Town Water Connection	9/28/10	14,500			14,500	10 MO S/L	13,413	1,087
331	Slab Work	12/10/10	15,614			15,614	10 MO S/L	14,183	1,431
332	Excavation	12/02/10	4,270			4,270	10 MO S/L	3,879	391
334	Bromur energy project	9/30/11	173,418			173,418	20 MO S/L	71,535	8,671
335	Cameras	3/01/11	5,798			5,798	3 MO S/L	5,798	0
336	Slab Work	8/31/11	3,031			3,031	3 MO S/L	3,031	0
339	Exterior Painting	11/01/11	1,853			1,853	5 MO S/L	1,853	0
340	Painting	9/01/11	3,800			3,800	5 MO S/L	3,800	0
346	Vinly Plank	6/05/12	2,503			2,503	15 MO S/L	1,265	167
347	Rehab of #8	5/02/12	4,717			4,717	15 MO S/L	2,411	314
348	Stabilization of Lot #7	6/27/12	8,431			8,431	10 MO S/L	6,323	843
349	Deck and Railing	9/21/12	7,688			7,688	25 MO S/L	2,230	307

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Federal Asset Report

FYE: 12/31/2020

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Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv	Meth	Prior	Current
350	Oven	10/21/12	1,023				1,023	5	MO S/L	1,023	0
351	Vinyl Plank	11/15/12	2,202				2,202	15	MO S/L	1,052	147
352	Paint Exterior	10/22/12	2,862				2,862	15	MO S/L	1,368	190
353	Rental Property Improvements - Laurel St	12/31/12	887,673				887,673	30	MO S/L	207,124	29,589
354	Rental Property Improvements - Whistlestop	12/31/12	259,688				259,688	30	MO S/L	60,594	8,656
357	MH Removal	10/21/13	1,500				1,500	10	MO S/L	925	150
358	MH Pad	12/24/13	4,790				4,790	10	MO S/L	2,874	479
359	Painting	10/01/13	9,600				9,600	10	MO S/L	6,000	960
360	Painting - Building #2	10/15/13	6,200				6,200	10	MO S/L	3,875	620
361	Foundation Improvements	10/15/13	25,570				25,570	20	MO S/L	7,991	1,278
362	Limehurst Improvements	12/31/13	34,003				34,003	10	MO S/L	20,402	3,400
363	Infrastructure Project	12/31/13	548,837				548,837	20	MO S/L	164,651	27,442
364	MH Demolition	5/23/13	3,962				3,962	10	MO S/L	2,608	397
365	2 Slabs	11/01/13	8,700				8,700	10	MO S/L	5,365	870
366	Slab - A. White	12/09/13	4,000				4,000	10	MO S/L	2,433	400
367	Lot Improvements	12/31/13	2,300				2,300	10	MO S/L	1,380	230
368	Water System Improvements	12/31/13	497,302				497,302	25	MO S/L	119,352	19,892
369	Lot Improvements	9/17/13	3,699				3,699	10	MO S/L	2,312	370
370	Windows - Depot Building	11/06/13	8,086				8,086	10	MO S/L	4,986	809
371	Building Improvements - Fire Safety	11/01/13	6,433				6,433	10	MO S/L	3,967	643
374	Legal Costs	11/30/13	5,090				5,090	5	MO S/L	5,090	0
375	Washer & Dryer	12/31/13	1,294				1,294	5	MO S/L	1,294	0
376	Ford Van	5/01/13	23,282				23,282	5	MO S/L	23,282	0
377	Good Neighbors Land	5/31/13	12,000				12,000	0	-- Land	0	0
378	Good Neighbors Building	5/31/13	100,000				100,000	25	MO S/L	26,333	4,000
379	Property Improvements	12/31/13	1,124,265				1,124,265	25	MO S/L	269,824	44,970
383	Slab Work - Lot #1	1/10/14	3,940				3,940	10	MO S/L	2,364	394
384	Top Mount Ranges	5/16/14	2,132				2,132	5	MO S/L	2,132	0
385	Siding Repair - 1 Bromur St	8/22/14	3,871				3,871	10	MO S/L	2,065	387
386	Flooring - Unit #10	12/30/14	1,566				1,566	10	MO S/L	783	156
387	Hot Water Heater - Men's House	11/26/14	1,533				1,533	20	MO S/L	390	76
388	Master Fire Box	2/03/14	2,231				2,231	20	MO S/L	660	111
389	Porch Roof	10/13/14	1,219				1,219	10	MO S/L	640	122
390	Boiler Burner	9/20/14	1,422				1,422	20	MO S/L	373	71
391	Cellular Panel Monitor	4/30/14	1,259				1,259	5	MO S/L	1,259	0
392	Structural Revisions	8/23/14	2,318				2,318	20	MO S/L	618	116
393	Colonial Village Rental Prop	2/18/15	729,138				729,138	50	MO S/L	70,483	14,583
394	Colonial Village - Radon	10/16/15	15,802				15,802	50	MO S/L	1,317	316
395	Vinyl Stair Tread #2	5/01/15	1,025				1,025	10	MO S/L	478	103
396	Plank Flooring	9/14/15	4,199				4,199	10	MO S/L	1,819	420
397	Vinyl Tile Flooring - Unit 6	8/01/15	2,150				2,150	10	MO S/L	950	215
398	Vinyl Tile Flooring - Unit 1	9/01/15	2,150				2,150	10	MO S/L	932	215
399	Vinyl Tile Flooring - Plank Flooring	11/15/15	1,347				1,347	10	MO S/L	561	135
400	Plank Flooring - Men's House	5/11/15	2,750				2,750	10	MO S/L	1,283	275
401	Slab Work	5/19/15	6,600				6,600	10	MO S/L	3,025	660
402	Property Improvements	9/09/15	9,324				9,324	25	MO S/L	1,616	373
403	Window Replacement	12/31/15	2,722				2,722	10	MO S/L	1,089	272
404	Colonial Village - Land	2/18/15	15,000				15,000	0	-- Land	0	0
405	Office Furnishings - Keith Ave	6/01/16	221,000				221,000	7	MO S/L	113,131	31,571
406	Computers - Admin	7/01/16	3,267				3,267	3	MO S/L	3,267	0
407	Leasehold Improvements - Keith Ave	6/01/16	174,511				174,511	25	MO S/L	25,013	6,981
408	Carpet - Unit 2	9/01/16	2,500				2,500	7	MO S/L	1,190	358
409	Carpet - Unit 11	9/01/16	1,600				1,600	7	MO S/L	762	228
410	Plank Flooring - Unit 23	9/29/16	2,181				2,181	7	MO S/L	1,013	311
411	Regulating Valves	3/02/16	2,795				2,795	10	MO S/L	1,071	280
412	Replace Wall	6/03/16	12,700				12,700	20	MO S/L	2,275	635
413	Stone Facing on Foundation	6/21/16	3,025				3,025	20	MO S/L	529	152
414	Home Demolition	8/04/16	7,950				7,950	10	MO S/L	2,716	795
415	Slab - Lot #13	11/04/16	10,700				10,700	10	MO S/L	3,388	1,070
416	Excavating	7/19/16	4,179				4,179	10	MO S/L	1,428	418
417	Table Saw Stand	11/01/17	2,226				2,226	5	MO S/L	965	445
418	Lights at Keith Ave	3/01/17	2,200				2,200	5	MO S/L	1,247	440
419	Delairs flooring unit 6	6/24/17	3,499				3,499	7	MO S/L	1,250	499
420	Delairs flooring unit 23	3/10/17	1,792				1,792	7	MO S/L	725	256
421	Delairs flooring unit 8	3/01/17	331				331	7	MO S/L	134	47
422	Delairs flooring unit 3	4/11/17	3,803				3,803	7	MO S/L	1,494	543
Total Other Depreciation			<u>9,636,312</u>				<u>9,636,312</u>			<u>3,044,128</u>	<u>304,972</u>
Total ACRS and Other Depreciation			<u>9,636,312</u>				<u>9,636,312</u>			<u>3,044,128</u>	<u>304,972</u>

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Federal Asset Report

FYE: 12/31/2020

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv Meth	Prior	Current
	Grand Totals		9,636,312				9,636,312		3,044,128	304,972
	Less: Dispositions and Transfers		0				0		0	0
	Less: Start-up/Org Expense		0				0		0	0
	Net Grand Totals		<u>9,636,312</u>				<u>9,636,312</u>		<u>3,044,128</u>	<u>304,972</u>

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Federal Statements

FYE: 12/31/2020

Tax-Exempt Interest on Investments

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>InState Muni (\$ or %)</u>
INTEREST INCOME	\$ 14,352				14	
TOTAL	<u>\$ 14,352</u>					

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Federal Statements

FYE: 12/31/2020

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
CONSULTANT FEES - PROP. MGMT	\$ 1,903	\$ 1,903		
CONSULTANT FEES - ADMIN	12,401		9,561	2,840
CONSULTANT FEES - PROJ. DEV.	34,031	34,031		
TOTAL	<u>\$ 48,335</u>	<u>\$ 35,934</u>	<u>\$ 9,561</u>	<u>\$ 2,840</u>

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Federal Statements

FYE: 12/31/2020

Schedule A, Part II, Line 8(e)

Description	Amount
INTEREST INCOME	\$ 14,352
TOTAL	\$ 14,352

Schedule A, Part II, Line 12 - Current year

Description	Amount
DEVELOPMENT FEES	\$ 230,342
LEASE FEE INCOME	37,970
RENTAL INCOME	710,082
MANAGEMENT FEES	539,344
MAINTENANCE INCOME	615,406
PARTNERSHIP INCOME	-20
MISCELLANEOUS INCOME	479,238
TOTAL	\$ 2,612,362