

Form **990**
Department of the Treasury
Internal Revenue Service

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
2016
Open to Public Inspection

Do not enter social security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2016 calendar year, or tax year beginning , **and ending**

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 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 22-2843473
E Telephone number 802-476-4493
G Gross receipts\$ 3,524,975

F Name and address of principal officer:
 EILEEN PELTIER
 22 KEITH AVENUE
 BARRE VT 05641

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: WWW.DOWNSTREET.ORG **H(c) Group exemption number**

K Form of organization: Corporation Trust Association Other **L Year of formation:** 1987 **M State of legal domicile:** VT

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
 TO CREATE SAFE, DECENT, AFFORDABLE HOUSING AND BUILD STRONG DIVERSE COMMUNITIES.

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

3 Number of voting members of the governing body (Part VI, line 1a)	3	13
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	13
5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	31
6 Total number of volunteers (estimate if necessary)	6	16
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
7b Net unrelated business taxable income from Form 990-T, line 34	7b	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	1,248,053	1,282,245
9 Program service revenue (Part VIII, line 2g)	1,890,116	2,073,258
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	41,869	-37,418
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	173,061	67,411
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,353,099	3,385,496
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,545,455	1,630,785
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 146,764		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,104,442	1,942,873
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,649,897	3,573,658
19 Revenue less expenses. Subtract line 18 from line 12	-296,798	-188,162
	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	13,192,525	13,569,489
21 Total liabilities (Part X, line 26)	3,203,173	3,768,299
22 Net assets or fund balances. Subtract line 21 from line 20	9,989,352	9,801,190

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: EILEEN PELTIER
 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 if self-employed PTIN: P00136499
 Firm's name: JMM & ASSOCIATES, PC
 Firm's EIN: 03-0280081
 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. Form **990** (2016) DAA

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: TO CREATE SAFE, DECENT, AFFORDABLE HOUSING AND BUILD STRONG DIVERSE COMMUNITIES.

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 \$ 2,474,496 including grants of \$) (Revenue \$) PROPERTY OPERATIONS - MAINTAIN AND OPERATE HOUSING UNITS AND PROPERTIES FOR LOWER INCOME FAMILIES.

4b (Code:) (Expenses \$ 367,664 including grants of \$) (Revenue \$) REHABILITATION AND DEVELOPMENT - DEVELOPMENT OF NEW PROPERTIES FOR HOUSING FOR LOW AND MODERATE INCOME FAMILIES.

4c (Code:) (Expenses \$ 251,336 including grants of \$) (Revenue \$) REVOLVING LOAN FUND - PROVIDES LOANS TO ASSIST LOW AND MODERATE INCOME FAMILIES WITH THE PURCHASE OF A HOME.

4d Other program services (Describe in Schedule O.) (Expenses \$ 66,055 including grants of \$) (Revenue \$)

4e Total program service expenses 3,159,551

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
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
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		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? <i>If "Yes," complete Schedule J</i>		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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1</i>	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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		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		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
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		
2b	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
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in 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
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	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
6b	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		
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?		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		X
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		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
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.		
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		
c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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

Section A. Governing Body and Management

Table with columns for line numbers (1a, 1b, 2-9), Yes/No checkboxes, and a grid for line 1a/1b. Line 1a: 13 members. Line 1b: 13 independent members. Lines 2-9: Various governance questions with Yes/No responses.

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

Table with columns for line numbers (10a-16b), Yes/No checkboxes, and a grid for line 10a/10b. Lines 10a-16b: Questions about local chapters, conflict of interest, whistleblower, document retention, compensation, and joint ventures.

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 (or 1024 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.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records:

EILEEN PELTIER 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.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) TOM STEVENS	2.00									
PRESIDENT	0.00	X		X			0	0	0	
(2) ANTHONY MENNONA	2.00									
TREASURER	0.00	X		X			0	0	0	
(3) JAMIE SPECTOR	2.00									
VICE PRESIDENT	0.00	X		X			0	0	0	
(4) DAN BARLOW	2.00									
SECRETARY	0.00	X		X			0	0	0	
(5) DEBORAH KAHN	2.00									
DIRECTOR	0.00	X					0	0	0	
(6) CARL VANOSDALL	2.00									
DIRECTOR	0.00	X					0	0	0	
(7) KEVIN ELLIS	2.00									
DIRECTOR	0.00	X					0	0	0	
(8) MICHAEL SIMMONS	2.00									
DIRECTOR	0.00	X					0	0	0	
(9) GWYNN ZAKOV	2.00									
DIRECTOR	0.00	X					0	0	0	
(10) KEVIN LUNN	2.00									
DIRECTOR	0.00	X					0	0	0	
(11) CHARLES MERRIMAN	2.00									
DIRECTOR	0.00	X					0	0	0	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below 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) JEANNE RICHARDSON	2.00									
DIRECTOR	0.00	X					0	0	0	
(13) AUBURN L. WATERSONG	2.00									
DIRECTOR	0.00	X					0	0	0	
(14) NANCY HANSON (TERM ENDED MAR. 2016)	0.00									
DIRECTOR	0.00	X					0	0	0	
(15) PAUL HARTMANN (TERM ENDED MAR. 2016)	0.00									
DIRECTOR	0.00	X					0	0	0	
(16) EILEEN PELTIER	40.00									
EXECUTIVE DIRECTOR	0.00			X			114,183	0	0	
1b Sub-total							114,183			
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							114,183			

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

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

Section B. Independent Contractors

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

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

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						
	1b	Membership dues						
	1c	Fundraising events						
	1d	Related organizations						
	1e	Government grants (contributions)	529,303					
	1f	All other contributions, gifts, grants, and similar amounts not included above	752,942					
	g	Noncash contributions included in lines 1a-1f: \$						
	h	Total. Add lines 1a-1f	1,282,245					
Program Service Revenue	2a	RENTAL INCOME	772,181	772,181				
	b	DEVELOPMENT FEES	509,790	509,790				
	c	MANAGEMENT FEES	430,899	430,899				
	d	MAINTENANCE INCOME	326,822	326,822				
	e	CONTRACT REVENUE	17,450	17,450				
	f	All other program service revenue	16,116	16,116				
	g	Total. Add lines 2a-2f	2,073,258					
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	22,391			22,391	
4		Income from investment of tax-exempt bond proceeds						
5		Royalties						
6a		Gross rents	(i) Real					
			(ii) Personal					
			b	Less: rental exps.				
c		Rental inc. or (loss)						
d		Net rental income or (loss)						
7a		Gross amount from sales of assets other than inventory	(i) Securities					
			(ii) Other	79,670				
			b	Less: cost or other basis & sales exps.	139,479			
			c	Gain or (loss)	-59,809			
d	Net gain or (loss)	-59,809	-59,809					
8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a						
b	Less: direct expenses	b						
c	Net income or (loss) from fundraising events							
9a	Gross income from gaming activities. See Part IV, line 19	a						
b	Less: direct expenses	b						
c	Net income or (loss) from gaming activities							
10a	Gross sales of inventory, less returns and allowances	a						
b	Less: cost of goods sold	b						
c	Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Busn. Code					
11a	MISCELLANEOUS INCOME	531390	67,693	67,693				
b	PARTNERSHIP INCOME	531390	-282	-282				
c								
d	All other revenue							
e	Total. Add lines 11a-11d		67,411					
12	Total revenue. See instructions.		3,385,496	2,080,860	0	22,391		

Part IX Statement of Functional Expenses

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

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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	114,184	62,801	50,241	1,142
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	1,121,480	937,507	100,006	83,967
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	44,113	38,786	1,221	4,106
9 Other employee benefits	232,981	204,850	6,448	21,683
10 Payroll taxes	118,027	95,803	13,863	8,361
11 Fees for services (non-employees):				
a Management	84,923	84,923		
b Legal	24,348	24,348		
c Accounting	19,667		19,667	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	46,720	30,335	15,829	556
12 Advertising and promotion	31,640	11,933	3,091	16,616
13 Office expenses	89,489	73,519	11,858	4,112
14 Information technology				
15 Royalties				
16 Occupancy	278,181	271,615	3,283	3,283
17 Travel	26,485	23,442	2,949	94
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	35,836	33,897	1,910	29
20 Interest	86,616	79,721	6,895	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	299,894	299,894		
23 Insurance	70,845	60,490	8,785	1,570
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a GRANT EXPENSE	353,738	353,738		
b PROPERTY EXPENSE-PROP OP	192,170	192,170		
c MISCELLANEOUS	175,646	155,026	19,573	1,047
d PROPERTY EXPENSE- R+D	80,736	80,736		
e All other expenses	45,939	44,017	1,724	198
25 Total functional expenses. Add lines 1 through 24e	3,573,658	3,159,551	267,343	146,764
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	282,341	1	297,481
	2	Savings and temporary cash investments	543,605	2	324,263
	3	Pledges and grants receivable, net	180,237	3	274,718
	4	Accounts receivable, net	55,196	4	65,456
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net	4,059,895	7	4,026,092
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	19,353	9	27,244
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 9,895,844		
	b	Less: accumulated depreciation	10b 2,099,462	7,448,201	10c 7,796,382
	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	19,453	13	29,051
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	584,244	15	728,802
16	Total assets. Add lines 1 through 15 (must equal line 34)	13,192,525	16	13,569,489	
Liabilities	17	Accounts payable and accrued expenses	225,238	17	224,582
	18	Grants payable		18	
	19	Deferred revenue	98,949	19	47,949
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	36,731	21	35,623
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	2,842,255	23	3,248,782
	24	Unsecured notes and loans payable to unrelated third parties		24	200,000
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	11,363
	26	Total liabilities. Add lines 17 through 25	3,203,173	26	3,768,299
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	4,327,299	27	4,031,164
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets	5,662,053	29	5,770,026
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	9,989,352	33	9,801,190
34	Total liabilities and net assets/fund balances	13,192,525	34	13,569,489	

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	3,385,496
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,573,658
3	Revenue less expenses. Subtract line 2 from line 1	3	-188,162
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9,989,352
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	9,801,190

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 in 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 in Schedule O and describe any steps taken to undergo such audits.		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

DOWNSTREET HOUSING AND COMMUNITY
DEVELOPMENT, INC.

Employer identification number

22-2843473

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

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

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(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) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,752,764	1,464,498	1,038,402	1,248,053	1,282,245	6,785,962
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	1,752,764	1,464,498	1,038,402	1,248,053	1,282,245	6,785,962
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						6,785,962

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4	1,752,764	1,464,498	1,038,402	1,248,053	1,282,245	6,785,962
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	15,842	14,879	14,242	12,547	22,391	79,901
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						6,865,863
12 Gross receipts from related activities, etc. (see instructions)					12	10,276,132
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	98.84 %
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	99.08 %
16a 33 1/3% support test—2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test—2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(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) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	%

- 19a 33 1/3% support tests—2016.** 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—2015.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

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

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2016 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-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required-explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2016:			
a			
b			
c From 2013			
d From 2014			
e From 2015			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2016 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2016, 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 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2017. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b Excess from 2013			
c Excess from 2014			
d Excess from 2015			
e Excess from 2016			

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

DOWNSTREET HOUSING AND COMMUNITY DEVELOPMENT, INC.

Employer identification number

22-2843473

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: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements.

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

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Revenue, Assets. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X, 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1, b Assets included in Form 990, Part X

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

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

Part IV Escrow and Custodial Arrangements.

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

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

Part V Endowment Funds.

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

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

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment %
 - b Permanent endowment %
 - c Temporarily restricted endowment %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- (i) unrelated organizations Yes No
 - (ii) related organizations Yes No
- b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? Yes No
- 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		1,547,655		1,547,655
b Buildings		7,623,706	2,030,318	5,593,388
c Leasehold improvements		174,511	4,072	170,439
d Equipment		276,587	65,072	211,515
e Other		273,385		273,385
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				7,796,382

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) DEVELOPMENT FEES RECEIVABLE	459,080
(2) INVESTED IN OTHER PROPERTIES	269,722
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	728,802

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	11,363
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	11,363

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1	3,385,496
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	3,385,496
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	3,385,496

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	3,573,658
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	3,573,658
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	3,573,658

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 O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

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

2016

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or 990-EZ.

**Open to Public
Inspection**

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization	DOWNSTREET HOUSING AND COMMUNITY DEVELOPMENT, INC.	Employer identification number 22-2843473
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FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT
 HOMEOWNERSHIP CENTER - ASSIST LOWER INCOME FAMILIES WITH PURCHASE OF NEW
 HOMES.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
 THE EXECUTIVE DIRECTOR AND CONTROLLER WILL REVIEW THE RETURN
 INITIALLY AND THEN SHARE THE RETURN WITH THE EXECUTIVE COMMITTEE OF THE
 BOARD OF DIRECTORS.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
 IN ADDITION TO ANNUAL REVIEW OF POTENTIAL CONFLICTS OF INTEREST BY THE
 BOARD OF DIRECTORS, THERE ARE AD HOC DISCUSSIONS WITH THE BOARD WHEN A NEW
 POTENTIAL CONFLICT ARISES IN THE PROCESS OF DOING BUSINESS.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
 THE BOARD OF DIRECTORS USES THE VHCB BI-ANNUAL SALARY SURVEY AS A GUIDE FOR
 THE EXECUTIVE DIRECTOR'S SALARY. THE EXECUTIVE DIRECTOR'S SALARY IS
 REVIEWED ANNUALLY ALONG WITH A PERFORMANCE REVIEW BY THE EXECUTIVE
 COMMITTEE OF THE BOARD OF DIRECTORS, AND IS THEN VOTED ON BY THE ENTIRE
 BOARD OF DIRECTORS.

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.

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization

DOWNSTREET HOUSING AND COMMUNITY
DEVELOPMENT, INC.

Employer identification number

22-2843473

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)						
(2)						
(3)						
(4)						
(5)						

FOR PUBLIC INSPECTION

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) BAILEY BALDWIN BARRE HLP 37 BARRE STREET MONTPELIER VT 05602 03-0358109	HOUSING	VT	N/A	EXCLUDED	-25	3,298		X	N/A		X	0.50
(2) GREEN MOUNTAIN SEMINARY HLP 201 HOLLOW ROAD WATERBURY CENTER VT 05677 03-0364342	HOUSING	VT	N/A	EXCLUDED	-40	7,572		X	N/A		X	0.50
(3) MAD RIVER MEADOWS HLP 144 BUTCHER HOUSE DRIVE WAITSFIELD VT 05673 20-1022413	HOUSING	VT	N/A	EXCLUDED	-4	5,350		X	N/A		X	0.10
(4) EVERGREEN PLACE HOUSING HLP 5308 MAIN STREET, ROUTE 100 WAITSFIELD VT 05673 20-0943494	HOUSING	VT	N/A	EXCLUDED	-8	845		X	N/A		X	5.00

FOR PUBLIC INSPECTION

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 20-2355479	HOUSING	VT	N/A	C	-7	139	100.000000		X
(2) CVCLT VENTURES, INC. 22 KEITH AVENUE, STE. 100 BARRE VT 05641 20-4368581	HOUSING	VT	N/A	C	-38	12,333	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) STIMSON AND GRAVES HOUSING LP 123 ST. PAUL STREET BURLINGTON VT 05401 03-0340943	HOUSING	VT	N/A	EXCLUDED	-160	-486		X	N/A		X	0.05
(2)												
(3)												
(4)												

FOR PUBLIC INSPECTION

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

FOR PUBLIC INSPECTION

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)	RIVER STATION HLP	D	328,665	FAIR MARKET VALUE
(2)	BAILEY BALDWIN BARRE HLP	D	53,737	FAIR MARKET VALUE
(3)	BIANCHI-HEBERT LP	D	90,000	FAIR MARKET VALUE
(4)	LADD HALL, LP	D	125,000	FAIR MARKET VALUE
(5)	EVERGREEN PLACE, HLP	D	90,000	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)	MAD RIVER MEADOWS, HLP	D	76,143	FAIR MARKET VALUE
(2)	WAITS RIVER HOUSING, LP	D	232,000	FAIR MARKET VALUE
(3)	WHEELER BROOK LP	D	90,000	FAIR MARKET VALUE
(4)	BARRE STREET APARTMENTS, LP	D	672,664	FAIR MARKET VALUE
(5)	SUMMER STREET HLP	D	350,000	FAIR MARKET VALUE
(6)	EVERGREEN MEADOWS, HLP	D	59,017	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.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		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	K	13,661	FAIR MARKET VALUE
(2)				
(3)				
(4)				
(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.

Table with 11 rows and 11 columns: (a) Name, address, and EIN of entity; (b) Primary activity; (c) Legal domicile; (d) Predominant income; (e) Are all partners 501(c)(3) organizations?; (f) Share of total income; (g) Share of end-of-year assets; (h) Disproportionate allocations?; (i) Code V-UBI amount; (j) General or managing partner?; (k) Percentage ownership.

FOR PUBLIC INSPECTION

Form **4562**

Depreciation and Amortization
(Including Information on Listed Property)

OMB No. 1545-0172

2016

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to your tax return.

▶ Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

Attachment Sequence No. **179**

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

Identifying number
22-2843473

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	500,000
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	2,010,000
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 2015 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 2017. 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	299,900

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 2016	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		

Section B—Assets Placed in Service During 2016 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 2016 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 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	299,900
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** (2016)

Form **990**

Two Year Comparison Report

2015 & 2016

For calendar year 2016, or tax year beginning _____, ending _____

Name
DOWNSTREET HOUSING AND COMMUNITY
DEVELOPMENT, INC.

Taxpayer Identification Number
22-2843473

		2015	2016	Differences
Revenue	1. Contributions, gifts, grants	1. 728,672	752,942	24,270
	2. Membership dues and assessments	2.		
	3. Government contributions and grants	3. 519,381	529,303	9,922
	4. Program service revenue	4. 1,890,116	2,073,258	183,142
	5. Investment income	5. 12,547	22,391	9,844
	6. Proceeds from tax exempt bonds	6.		
	7. Net gain or (loss) from sale of assets other than inventory	7. 29,322	-59,809	-89,131
	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. 173,061	67,411	-105,650
	12. Total revenue. Add lines 1 through 11	12. 3,353,099	3,385,496	32,397
Expenses	13. Grants and similar amounts paid	13.		
	14. Benefits paid to or for members	14.		
	15. Compensation of officers, directors, trustees, etc.	15. 114,943	114,184	-759
	16. Salaries, other compensation, and employee benefits	16. 1,430,512	1,516,601	86,089
	17. Professional fundraising fees	17.		
	18. Other professional fees	18. 246,983	175,658	-71,325
	19. Occupancy, rent, utilities, and maintenance	19. 354,068	278,181	-75,887
	20. Depreciation and Depletion	20. 304,877	299,894	-4,983
	21. Other expenses	21. 1,198,514	1,189,140	-9,374
	22. Total expenses. Add lines 13 through 21	22. 3,649,897	3,573,658	-76,239
	23. Excess or (Deficit). Subtract line 22 from line 12	23. -296,798	-188,162	108,636
Other Information	24. Total exempt revenue	24. 3,353,099	3,385,496	32,397
	25. Total unrelated revenue	25.		
	26. Total excludable revenue	26. 2,105,046	2,103,251	-1,795
	27. Total assets	27. 13,192,525	13,569,489	376,964
	28. Total liabilities	28. 3,203,173	3,768,299	565,126
	29. Retained earnings	29. 9,989,352	9,801,190	-188,162
	30. Number of voting members of governing body	30. 13	13	
	31. Number of independent voting members of governing body	31. 13	13	
	32. Number of employees	32. 37	31	
33. Number of volunteers	33. 24	16		

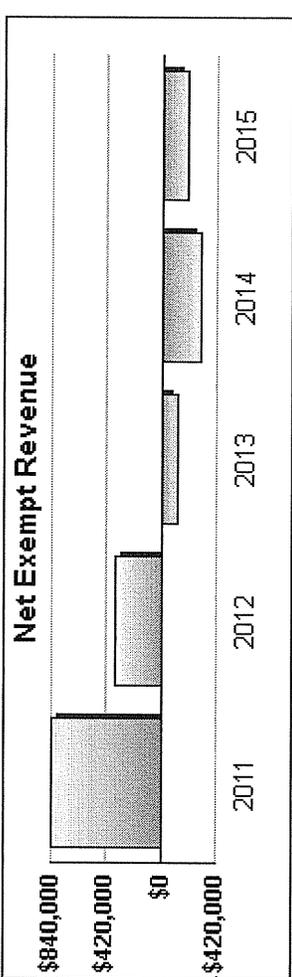
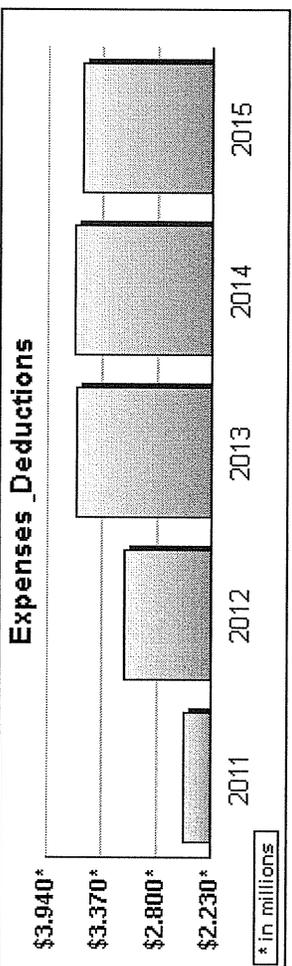
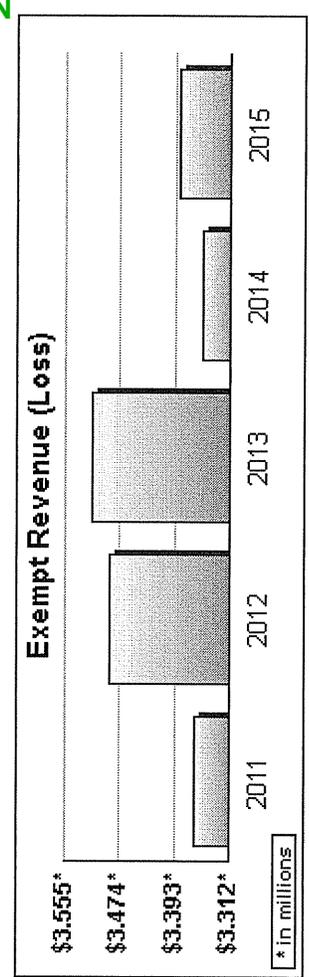
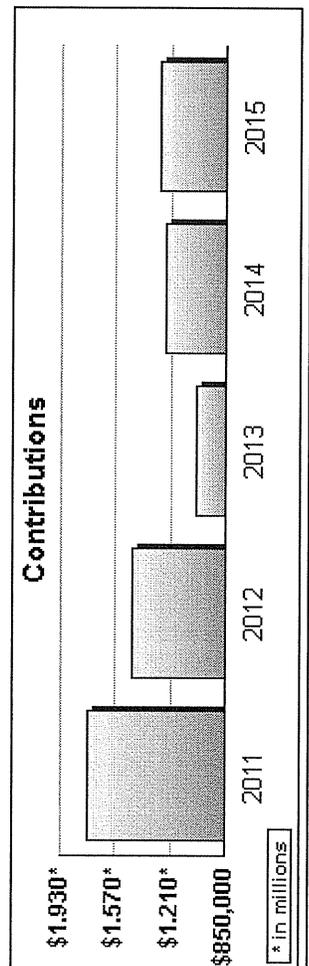
Form 990 Tax Return History

Name: **DOWNSTREET HOUSING AND COMMUNITY DEVELOPMENT, INC.** Employer Identification Number: **22-2843473**

	2012	2013	2014	2015	2016	2017
Contributions, gifts, grants	1,752,764	1,464,498	1,038,402	1,248,053	1,282,245	
Membership dues						
Program service revenue	1,532,256	1,918,647	2,340,653	1,890,116	2,073,258	
Capital gain or loss	-750		-2,639	29,322	-59,809	
Investment income	15,842	14,879	14,242	12,547	22,391	
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue	64,176	91,859	124,695	173,061	67,411	
Total revenue	3,364,288	3,489,883	3,515,353	3,353,099	3,385,496	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.	83,420	89,252	93,532	114,943	114,184	
Other compensation	1,108,854	1,251,351	1,419,326	1,430,512	1,516,601	
Professional fees		156,669	161,778	246,983	175,658	
Occupancy costs	198,151	332,150	343,533	354,068	278,181	
Depreciation and depletion	143,422	207,974	314,280	304,877	299,894	
Other expenses	983,859	1,094,527	1,300,619	1,198,514	1,189,140	
Total expenses	2,517,706	3,131,923	3,633,068	3,649,897	3,573,658	
Excess or (Deficit)	846,582	357,960	-117,715	-296,798	-188,162	
Total exempt revenue	3,364,288	3,489,883	3,515,353	3,353,099	3,385,496	
Total unrelated revenue						
Total excludable revenue	3,364,288	2,025,385	2,476,951	2,105,046	2,103,251	
Total Assets	12,193,961	13,587,994	13,743,675	13,192,525	13,569,489	
Total Liabilities	2,623,164	3,659,237	3,457,290	3,203,173	3,768,299	
Net Fund Balances	9,570,797	9,928,757	10,286,385	9,989,352	9,801,190	

Form 990T	Tax Return History				2016
Name		DOWNSTREET HOUSING AND COMMUNITY DEVELOPMENT, INC.			Employer Identification Number 22-2843473

	2012	2013	2014	2015	2016	2017
Business activity profit/loss						
Capital gains/losses						
Partner and S Corp gain/loss						
Rental income*						
Debt-financed income*						
Controlled organizations income/interest*						
Investment income, specific organizations*						
Exploited exempt activity income*						
Other income						
Total trade or business income.						
Compensation of officers, ect.						
Other salaries and wages						
Repairs and maintenance						
Bad debts						
Interest						
Taxes and licenses						
Charitable contributions						
Depreciation and Depletion						
Deferred compensation plans						
Employee benefit programs						

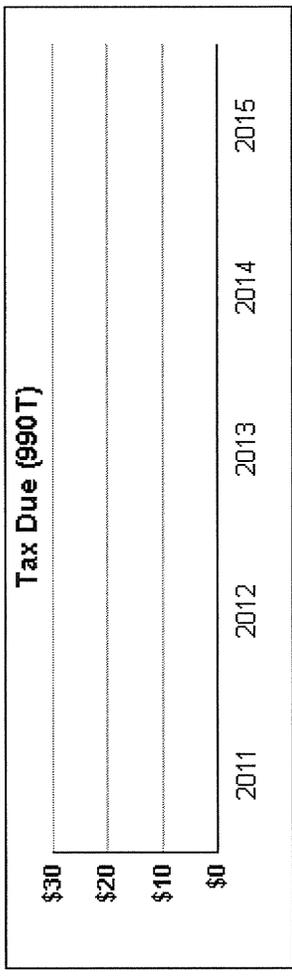
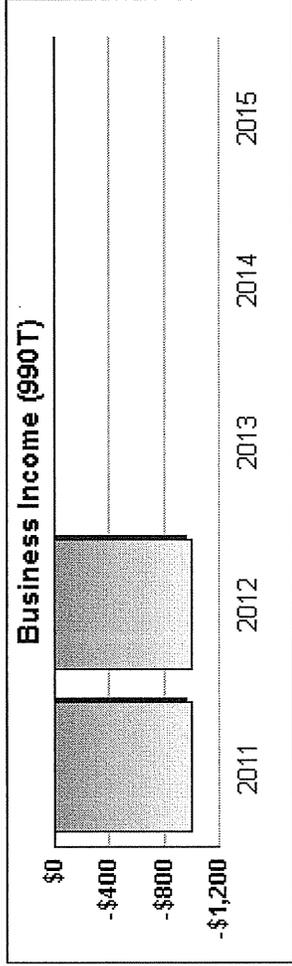
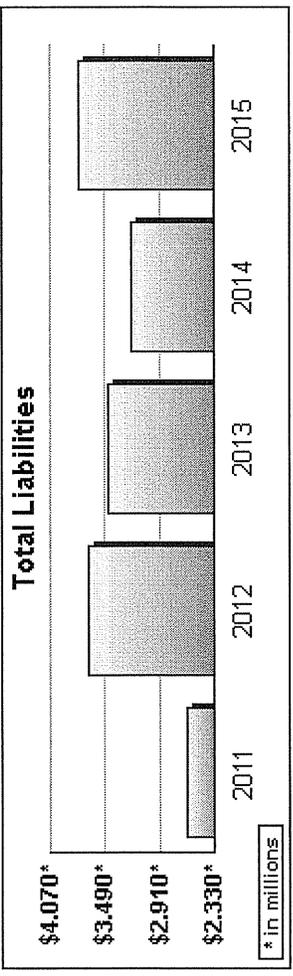
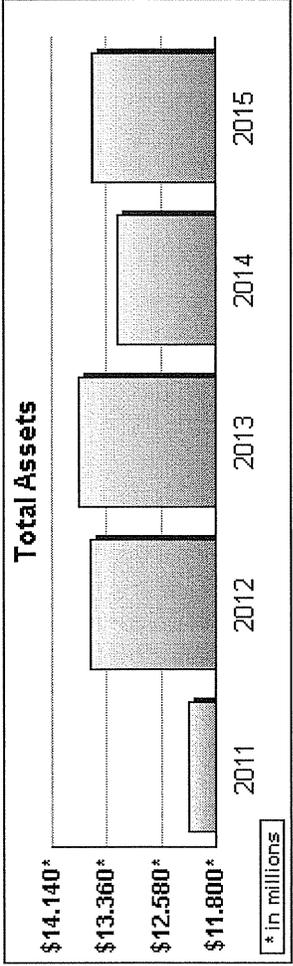


Form 990T **Tax Return History** **2016**

Name **DOWNSTREET HOUSING AND COMMUNITY DEVELOPMENT, INC.** Employer Identification Number **22-2843473**

	2012	2013	2014	2015	2016	2017
Other deductions						
Net operating loss deduction						
Specific deduction	1,000	1,000				
Income after expense and deductions	-1,000	-1,000				
Income tax (corporate or trust)						
Other taxes						
Total taxes						
General business credit						
Other credits						
Net tax after credits						
Estimated tax payments						
Other payments						
Balance due/Overpayment						

* Income shown net of expenses



22-2843473

Federal Asset Report

FYE: 12/31/2016

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus Sec % 179	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	43,859	1,733
66	Improvements - Bradford	11/01/93	143,431		143,431	30 MO S/L	110,807	4,781
68	Building - Orange, VT	9/01/94	301,600		301,600	50 MO S/L	128,683	6,032
69	Improvements	10/01/94	186,600		186,600	50 MO S/L	79,305	3,732
70	Buildings & Improvements	6/30/95	150,000		150,000	50 MO S/L	61,500	3,000
71	Improvements	2/01/96	16,223		16,223	50 MO S/L	6,462	324
72	Improvements	4/01/96	114,534		114,534	50 MO S/L	45,241	2,291
73	Building Improvement	6/30/97	958		958	50 MO S/L	354	20
76	Improvement - Vermont	1/01/99	130,573		130,573	50 MO S/L	44,612	2,611
77	Improvements	1/01/99	518		518	50 MO S/L	176	11
78	Improvement - Vermont	1/01/99	230,318		230,318	50 MO S/L	78,691	4,607
79	Mobile Home Pad - Larrow	7/01/00	1,479		1,479	30 MO S/L	765	49
80	Land Improvement	7/01/00	7,627		7,627	30 MO S/L	3,898	255
81	Mobile Home Pad - Farnham	10/01/00	3,026		3,026	30 MO S/L	1,530	101
83	Build. Improve. - Bradford	12/31/00	8,072		8,072	30 MO S/L	4,036	269
84	Land Improve. - Vermont	12/31/00	4,679		4,679	30 MO S/L	2,340	156
85	Building - Hillside #21	12/31/00	46,627		46,627	50 MO S/L	13,988	933
86	Building - Hillside #17	12/31/00	36,635		36,635	50 MO S/L	10,991	732
87	Land Improve. - Limehurst	12/31/00	42,794		42,794	30 MO S/L	21,397	1,427
88	Whistlestop closing costs	1/01/01	1,353		1,353	30 MO S/L	675	45
89	Bridge St. MHP - Acquisition/closing	5/30/01	102,012		102,012	30 MO S/L	49,731	3,400
90	Whistlestop Improve. from CIP	9/01/01	48,610		48,610	30 MO S/L	23,157	1,621
91	Improvements - Hillside/CIP	9/01/01	377,878		377,878	30 MO S/L	180,017	12,596
92	Improvements - Vermont	9/01/01	29,988		29,988	30 MO S/L	14,286	999
100	Land Impr. - Limehurst	12/31/00	59,970		59,970	30 MO S/L	29,985	1,999
103	Vermont - Drywell	6/06/01	1,698		1,698	30 MO S/L	823	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	1,737	129
108	Bridge St. MHP - rehab/construction	9/01/02	100,855		100,855	30 MO S/L	44,684	3,362
109	Improvements - Bridge MHP	9/01/02	56,322		56,322	30 MO S/L	24,954	1,877
111	Northfield St. - Drainage work	9/23/02	2,150		2,150	15 MO S/L	1,905	143
114	Vermont - Escrow for Slab	11/01/02	3,000		3,000	10 MO S/L	0	300
115	Land	1/01/92	0		0	-- Land	0	0
116	Land - Bromur	1/01/92	105,301		105,301	-- Land	0	0
120	Bradford Land	2/01/92	85,000		85,000	-- Land	0	0
121	Land - Brown	3/04/94	20,000		20,000	-- Land	0	0
122	Salvas - Land	9/27/94	12,500		12,500	-- Land	0	0
127	Wright - Land	3/15/95	12,500		12,500	-- Land	0	0
128	Fifield Land	4/01/95	15,000		15,000	-- Land	0	0
129	Wilson Land	4/01/95	15,000		15,000	-- Land	0	0
130	Salvas - Land (2)	5/26/95	15,000		15,000	-- Land	0	0
131	Limehurst Land	6/28/95	375,514		375,514	-- Land	0	0
132	Land - Woodbury	7/18/95	12,500		12,500	-- Land	0	0
133	Benway - Land	9/27/95	12,500		12,500	-- Land	0	0
134	Land - Lewis	11/20/95	15,000		15,000	-- Land	0	0
135	Drown - Land	2/02/96	12,500		12,500	-- Land	0	0
136	Roberts - Land	8/28/96	12,500		12,500	-- Land	0	0
138	Henzel - Land	10/10/96	12,500		12,500	-- Land	0	0
140	Grandfield Land	12/10/96	15,000		15,000	-- Land	0	0
141	Hoyt Land	12/10/96	12,500		12,500	-- Land	0	0
142	Ensminger - Land	2/01/97	20,000		20,000	-- Land	0	0
143	Land - Lewis	4/01/97	15,000		15,000	-- Land	0	0
144	Bilodeau - Land	5/01/97	15,000		15,000	-- Land	0	0
145	Lacilade Land	7/01/97	15,000		15,000	-- Land	0	0
146	Callahan Land	9/01/97	12,500		12,500	-- Land	0	0
147	Sokol - Land	9/01/97	12,500		12,500	-- Land	0	0
150	Land - McNaulty	12/01/97	15,000		15,000	-- Land	0	0
152	Kirkpatrick - Land	2/01/98	12,500		12,500	-- Land	0	0
154	Hanson - Land	3/01/98	15,000		15,000	-- Land	0	0
156	Bemo - Land	6/01/98	13,500		13,500	-- Land	0	0
157	Houston - Land	7/01/98	8,400		8,400	-- Land	0	0
158	Donated Land	7/01/98	10,000		10,000	-- Land	0	0
159	Normandy Land	9/01/98	13,000		13,000	-- Land	0	0
160	Forsythe/Baer - Land	9/01/98	1,796		1,796	-- Land	0	0
161	Baer/Renfrew/Forsythe - Land	10/01/98	32,717		32,717	-- Land	0	0
162	Vermont - Land	1/19/99	144,427		144,427	-- Land	0	0
163	Doten Land	3/17/99	15,000		15,000	-- Land	0	0

22-2843473

Federal Asset Report

FYE: 12/31/2016

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
299	Road Improvements	9/30/08	1,112			1,112	15 MO S/L	537	75
300	Water Line Improvement	6/10/08	3,517			3,517	15 MO S/L	1,778	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	784	121
307	Sprinkler System	7/01/09	18,034			18,034	15 MO S/L	7,815	1,202
308	Sewer System	7/01/09	85,748			85,748	20 MO S/L	27,868	4,288
310	Improvements - Diamantis	7/01/09	3,000			3,000	10 MO S/L	1,950	300
311	Improvements - Kingsbury	7/01/09	1,784			1,784	10 MO S/L	1,160	178
312	Improvements - Griffin/Griffin	7/01/09	1,129			1,129	10 MO S/L	734	113
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	15,494	1,348
324	Dell Small Business	3/15/10	2,588			2,588	3 MO S/L	2,588	0
	Sold/Scrapped: 12/31/16								
325	3 Dell Computers	1/27/10	2,706			2,706	3 MO S/L	2,706	0
	Sold/Scrapped: 12/31/16								
329	Improvements	6/07/10	6,022			6,022	10 MO S/L	3,362	602
330	Town Water Connection	9/28/10	14,500			14,500	10 MO S/L	7,613	1,450
331	Slab Work	12/10/10	15,614			15,614	10 MO S/L	7,937	1,562
332	Excavation	12/02/10	4,270			4,270	10 MO S/L	2,171	427
333	Energy Equipment	6/30/11	5,365			5,365	3 MO S/L	5,365	0
	Sold/Scrapped: 12/31/16								
334	Bromur energy project	9/30/11	173,418			173,418	20 MO S/L	36,851	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	1,544	309
340	Painting	9/01/11	3,800			3,800	5 MO S/L	3,293	507
346	Vinly Plank	6/05/12	2,503			2,503	15 MO S/L	598	167
347	Rehab of #8	5/02/12	4,717			4,717	15 MO S/L	1,153	314
348	Stabilization of Lot #7	6/27/12	8,431			8,431	10 MO S/L	2,951	843
349	Deck and Railing	9/21/12	7,688			7,688	25 MO S/L	999	308
350	Oven	10/21/12	1,023			1,023	5 MO S/L	648	205
351	Vinyl Plank	11/15/12	2,202			2,202	15 MO S/L	465	147
352	Paint Exterior	10/22/12	2,862			2,862	15 MO S/L	604	191
353	Rental Property Improvements - Laurel St	12/31/12	887,673			887,673	30 MO S/L	88,767	29,589
354	Rental Property Improvements - Whistlestoj	12/31/12	259,688			259,688	30 MO S/L	25,969	8,656
357	MH Removal	10/21/13	1,500			1,500	10 MO S/L	325	150
358	MH Pad	12/24/13	4,790			4,790	10 MO S/L	958	479
359	Painting	10/01/13	9,600			9,600	10 MO S/L	2,160	960
360	Painting - Building #2	10/15/13	6,200			6,200	10 MO S/L	1,395	620
361	Foundation Improvements	10/15/13	25,570			25,570	20 MO S/L	2,877	1,278
362	Limehurst Improvements	12/31/13	34,003			34,003	10 MO S/L	6,801	3,400
363	Infrastructure Project	12/31/13	548,837			548,837	20 MO S/L	54,884	27,442
364	MH Demolition	5/23/13	3,962			3,962	10 MO S/L	1,024	396
365	2 Slabs	11/01/13	8,700			8,700	10 MO S/L	1,885	870
366	Slab - A. White	12/09/13	4,000			4,000	10 MO S/L	833	400
367	Lot Improvements	12/31/13	2,300			2,300	10 MO S/L	460	230
368	Water System Improvements	12/31/13	497,302			497,302	25 MO S/L	39,784	19,892
369	Lot Improvements	9/17/13	3,699			3,699	10 MO S/L	832	370
370	Windows - Depot Building	11/06/13	8,086			8,086	10 MO S/L	1,752	808
371	Building Improvements - Fire Safety	11/01/13	6,433			6,433	10 MO S/L	1,394	643
374	Legal Costs	11/30/13	5,090			5,090	5 MO S/L	2,121	1,018
375	Washer & Dryer	12/31/13	1,294			1,294	5 MO S/L	518	259
376	Ford Van	5/01/13	23,282			23,282	5 MO S/L	12,417	4,656
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	10,333	4,000
379	Property Improvements	12/31/13	1,124,265			1,124,265	25 MO S/L	89,941	44,971
383	Slab Work - Lot #1	1/10/14	3,940			3,940	10 MO S/L	788	394
384	Top Mount Ranges	5/16/14	2,132			2,132	5 MO S/L	675	427
385	Siding Repair - 1 Bromur St	8/22/14	3,871			3,871	10 MO S/L	516	387
386	Flooring - Unit #10	12/30/14	1,566			1,566	10 MO S/L	157	156
387	Hot Water Heater - Men's House	11/26/14	1,533			1,533	20 MO S/L	83	77
388	Master Fire Box	2/03/14	2,231			2,231	20 MO S/L	214	111
389	Porch Roof	10/13/14	1,219			1,219	10 MO S/L	152	122
390	Boiler Burner	9/20/14	1,422			1,422	20 MO S/L	89	71
391	Cellular Panel Monitor	4/30/14	1,259			1,259	5 MO S/L	420	251
392	Structural Revisions	8/23/14	2,318			2,318	20 MO S/L	155	115
393	Colonial Village Rental Prop	2/18/15	729,138			729,138	50 MO S/L	12,152	14,583
394	Colonial Village - Radon	10/16/15	15,802			15,802	50 MO S/L	53	316
395	Vinyl Stair Tread #2	5/01/15	1,025			1,025	10 MO S/L	68	103
396	Plank Flooring	9/14/15	4,199			4,199	10 MO S/L	140	420
397	Vinyl Tile Flooring - Unit 6	8/01/15	2,150			2,150	10 MO S/L	90	215

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Federal Asset Report

FYE: 12/31/2016

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
398	Vinyl Tile Flooring - Unit 1	9/01/15	2,150			2,150	10 MO S/L	72	215
399	Vinyl Tile Flooring - Plank Flooring	11/15/15	1,347			1,347	10 MO S/L	22	135
400	Plank Flooring - Men's House	5/11/15	2,750			2,750	10 MO S/L	183	275
401	Slab Work	5/19/15	6,600			6,600	10 MO S/L	385	660
402	Property Improvements	9/09/15	9,324			9,324	25 MO S/L	124	373
403	Window Replacement	12/31/15	2,722			2,722	10 MO S/L	0	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	0	18,417
406	Computers - Admin	7/01/16	3,267			3,267	3 MO S/L	0	545
407	Leasehold Improvements - Keith Ave	6/01/16	174,511			174,511	25 MO S/L	0	4,072
408	Carpet - Unit 2	9/01/16	2,500			2,500	7 MO S/L	0	119
409	Carpet - Unit 11	9/01/16	1,600			1,600	7 MO S/L	0	76
410	Plank Flooring - Unit 23	9/29/16	2,181			2,181	7 MO S/L	0	78
411	Regulating Valves	3/02/16	2,795			2,795	10 MO S/L	0	233
412	Replace Wall	6/03/16	12,700			12,700	20 MO S/L	0	370
413	Stone Facing on Foundation	6/21/16	3,025			3,025	20 MO S/L	0	76
414	Home Demolition	8/04/16	7,950			7,950	10 MO S/L	0	331
415	Slab - Lot #13	11/04/16	10,700			10,700	10 MO S/L	0	178
416	Excavating	7/19/16	4,179			4,179	10 MO S/L	0	174
Total Other Depreciation			<u>9,674,278</u>			<u>9,674,278</u>		<u>1,851,383</u>	<u>299,901</u>
Total ACRS and Other Depreciation			<u>9,674,278</u>			<u>9,674,278</u>		<u>1,851,383</u>	<u>299,901</u>
Amortization:									
221	CENTRAL OFFICE - NR LOAN	10/01/03	68,092			68,092	7 MO Amort	68,092	0
	Sold/Scrapped: 12/31/16								
222	CENTRAL OFFICE - OPERATIONS	10/01/03	19,570			19,570	6 MO Amort	19,570	0
	Sold/Scrapped: 12/31/16								
			<u>87,662</u>			<u>87,662</u>		<u>87,662</u>	<u>0</u>
Grand Totals			9,761,940			9,761,940		1,939,045	299,901
Less: Dispositions and Transfers			139,479			139,479		139,479	0
Less: Start-up/Org Expense			0			0		0	0
Net Grand Totals			<u>9,622,461</u>			<u>9,622,461</u>		<u>1,799,566</u>	<u>299,901</u>

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Federal Statements

FYE: 12/31/2016

Tax-Exempt Interest on Investments

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>InState Muni (\$ or %)</u>
INTEREST INCOME	\$ 22,391		14			
TOTAL	<u>\$ 22,391</u>					

Federal Statements

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

Description	Total Expenses	Program Service	Management & General	Fund Raising
CONSULTANT FEES	\$ 4,444	4,444		
CONSULTANT FEES	24,641	24,641		
	17,635	1,250	15,829	556
TOTAL	\$ 46,720	\$ 30,335	\$ 15,829	\$ 556

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
BAD DEBT	\$ 43,392	43,392		
PROPERTY EXPENSE	2,547	625	1,724	198
TOTAL	\$ 45,939	\$ 44,017	\$ 1,724	\$ 198