

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

2002

Open to Public Inspection

Department of the Treasury Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2002 calendar year, or tax year beginning 7/01/02, and ending 6/30/03

- B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: Neighborhood of Affordable Housing, Inc.
Number and street (or P.O. box if mail is not delivered to street address): 22 Paris Street
Room/suite:
City or town, state or country, and ZIP + 4: East Boston MA 02128

D Employer ID number: 04-2964630
E Telephone number: 617-567-5882
F Accounting method: [X] Accrual [] Other (specify)

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? [] Yes [X] No
H(b) If "Yes," enter no. of affiliates
H(c) Are all affiliates included? [] Yes [] No
H(d) Is this a separate return filed by an organization covered by a group ruling? [] Yes [] No

G Web site:

J Organization type (check only one) [X] 501(c) (3) (insert no.) [] 4947(a)(1) or [] 527

K Check here [] if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

I Enter 4-digit GEN
M Check [] if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 1,798,999

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 17 of the instructions.)

Table with columns for Revenue, Expenses, and Net Assets. Rows include: 1 Contributions, gifts, grants, and similar amounts received; 2 Program service revenue including government fees and contracts; 3 Membership dues and assessments; 4 Interest on savings and temporary cash investments; 5 Dividends and interest from securities; 6a Gross rents; 6b Less: rental expenses; 6c Net rental income or (loss); 7 Other investment income; 8a Gross amount from sales of assets other than inventory; 8b Less: cost or other basis and sales expenses; 8c Gain or (loss); 8d Net gain or (loss); 9 Special events and activities; 9a Gross revenue; 9b Less: direct expenses other than fundraising expenses; 9c Net income or (loss); 10a Gross sales of inventory, less returns and allowances; 10b Less: cost of goods sold; 10c Gross profit or (loss); 11 Other revenue; 12 Total revenue; 13 Program services; 14 Management and general; 15 Fundraising; 16 Payments to affiliates; 17 Total expenses; 18 Excess or (deficit) for the year; 19 Net assets or fund balances at beginning of year; 20 Other changes in net assets or fund balances; 21 Net assets or fund balances at end of year.

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 21 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) Stmt 2 (cash \$ _____ non-cash \$ _____)				
23	Specific assistance to individuals				
24	Benefits paid to or for members				
25	Compensation of officers, directors, etc.				
26	Other salaries and wages	610,628	463,410	86,868	60,350
27	Pension plan contributions				
28	Other employee benefits	67,704	48,846	14,063	4,795
29	Payroll taxes	69,678	47,455	16,386	5,837
30	Professional fundraising fees				
31	Accounting fees	8,000	6,500	1,000	500
32	Legal fees	2,155	1,875	280	
33	Supplies	39,687	36,385	1,412	1,890
34	Telephone	11,127	8,552	1,579	996
35	Postage and shipping	5,709	4,085	930	694
36	Occupancy	44,033	24,442	16,183	3,408
37	Equipment rental and maintenance	1,164		1,164	
38	Printing and publications	5,449	208	669	4,572
39	Travel	4,618	3,937	599	82
40	Conferences, conventions, and meetings	4,109	2,212	1,884	13
41	Interest				
42	Depreciation, depletion, etc. (attach schedule)	18,995		18,995	
43	Other expenses not covered above (itemize): a				
	b See Statement 3	519,437	428,786	80,470	10,181
	c				
	d				
	e				
44	Total functional expenses (add lines 22 - 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15	1,412,493	1,076,693	242,482	93,318

Joint Costs. Check if you are following SOP 98-2.
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____;
 (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See page 24 of the instructions.)

What is the organization's primary exempt purpose?	Program Service Expenses (Required for 501(c)(3) & (4) orgs., & 4947(a)(1) trusts; but optional for others.)
Housing and community development All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	
a Neighborhood Programs	
(Grants and allocations \$ _____)	402,690
b Housing development	
(Grants and allocations \$ _____)	133,504
c Senior home services	
(Grants and allocations \$ _____)	211,107
d Rental expenses	
(Grants and allocations \$ _____)	286,539
e Other program services (attach schedule) See Stmt 4 (Grants and allocations \$ _____)	42,853
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	1,076,693

Part IV Balance Sheets (See page 24 of the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.				(A)		(B)	
				Beginning of year		End of year	
A s s e t s	45	Cash - non-interest-bearing		200	45	170,891	
	46	Savings and temporary cash investments		44,379	46	23,104	
	47a	Accounts receivable	47a	518,812			
	b	Less: allowance for doubtful accounts	47b		47c	518,812	
	48a	Pledges receivable	48a				
	b	Less: allowance for doubtful accounts	48b		48c		
	49	Grants receivable			49		
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)			50		
	51a	Other notes and loans receivable (attach schedule) See Worksheet	51a	323,568			
	b	Less: allowance for doubtful accounts	51b		51c	323,568	
	52	Inventories for sale or use			52		
	53	Prepaid expenses and deferred charges		17,775	53	7,276	
	54	Investments-securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV			54		
	55a	Investments-land, buildings, and equipment: basis	55a				
	b	Less: accumulated depreciation (attach schedule)	55b		55c		
56	Investments-other (attach schedule)		See Stmt 5	72,900	56	72,607	
57a	Land, buildings, and equipment: basis	57a	185,318				
b	Less: accumulated depreciation (attach schedule) See Stmt 6	57b	123,341	77,687	57c	61,977	
58	Other assets (describe See Stmt 7)				58	20,236	
59	Total assets (add lines 45 through 58) (must equal line 74)			804,480	59	1,198,471	
L i a b i l i t i e s	60	Accounts payable and accrued expenses		63,501	60	80,183	
	61	Grants payable			61		
	62	Deferred revenue			62		
	63	Loans from officers, directors, trustees, and key employees (attach schedule)			63		
	64a	Tax-exempt bond liabilities (attach schedule)			64a		
	b	Mortgages and other notes payable (attach schedule) See Worksheet			154,624	64b	143,241
	65	Other liabilities (describe See Stmt 8)				65	19,679
66	Total liabilities (add lines 60 through 65)			218,125	66	243,103	
N F e u n d A s s e t s o f	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.						
	67	Unrestricted		586,355	67	542,035	
	68	Temporarily restricted			68		
	69	Permanently restricted			69	413,333	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.						
	70	Capital stock, trust principal, or current funds			70		
	71	Paid-in or capital surplus, or land, building, and equipment fund			71		
	72	Retained earnings, endowment, accumulated income, or other funds			72		
	73	Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)			586,355	73	955,368
	74	Total liabilities and net assets / fund balances (add lines 66 and 73)			804,480	74	1,198,471

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 26 of the instructions.)

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total revenue, gains, & other support per audited financial statements	a	2,386,654
b	Amounts included on line a but not on line 12, Form 990:		
(1)	Net unrealized gains on investments \$		
(2)	Donated services and use of facilities \$		
(3)	Recoveries of prior year grants \$		
(4)	Other (specify): See Stmt 9		
	\$ 1,104,673		
	Add amounts on lines (1) through (4)	b	1,104,673
c	Line a minus line b	c	1,281,981
d	Amounts included on line 12, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify): See Stmt 10		
	\$ 517,018		
	Add amounts on lines (1) and (2)	d	517,018
e	Total revenue per line 12, Form 990 (line c plus line d)	e	1,798,999

a	Total expenses and losses per audited financial statements	a	2,093,644
b	Amounts included on line a but not on line 17, Form 990:		
(1)	Donated services and use of facilities \$		
(2)	Prior year adjustments reported on line 20, Form 990 \$		
(3)	Losses reported on line 20, Form 990 \$		
(4)	Other (specify): See Stmt 11		
	\$ 924,294		
	Add amounts on lines (1) through (4)	b	924,294
c	Line a minus line b	c	1,169,350
d	Amounts included on line 17, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify): See Stmt 12		
	\$ 243,143		
	Add amounts on lines (1) and (2)	d	243,143
e	Total expenses per line 17, Form 990 (line c plus line d)	e	1,412,493

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see page 26 of the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contrib. to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Philip Giffey 96 Warren Rd. Framingham, MA 01702	Exec Dir 37.5	83,501	2,495	0
Linda A. Puopolo 11 Avon St. Saugus, MA 01906	Dir of Fin 37.5	74,002	4,607	0
Patricia Costa 418 Mass Ave Lexington, MA	Dir of Hsing 37.5	58,333	4,800	0
Stacey Chacker 12 Glade Av #1 Jamaica Plain, MA	Dir Comm Bld 37.5	56,753	1,477	0
See Footnote for expense allocation information		0	0	0
Officers and Directors See Attached Schedule		0	0	0

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? Yes No
If "Yes," attach schedule-see page 26 of the instructions.

Part V Other Information (See page 27 of the instructions.)

		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.		X
78a	Did the organization have unrelated business gross inc. of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	X	
b	If "Yes," enter the name of the organization See footnote and check whether it is <input checked="" type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81a	Enter direct or indirect political expenditures. See line 81 instr.		
b	Did the organization file Form 1120-POL for this year?		X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	N/A	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	N/A	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h unless the organization received a waiver for proxy tax owed for the prior year.	N/A	
c	Dues, assessments, and similar amounts from members	85c	
d	Section 162(e) lobbying and political expenditures	85d	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	N/A	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	N/A	
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a	
b	Gross receipts, included on line 12, for public use of club facilities	86b	
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		X
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 0 ; section 4912 0 ; section 4955 0		
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		0
90a	List the states with which a copy of this return is filed MA		
b	Number of employees employed in the pay period that includes March 12, 2002 (See instructions.)	90b	
91	The books are in care of Corporation Telephone no. 617-567-5882 Located at 22 Paris St. East Boston, MA ZIP + 4 02128		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year 92		

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Part VII Analysis of Income-Producing Activities (See page 31 of the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by sec. 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a Management and marketing fees					574,257
b Development fees					68,520
c Other program revenue					3,050
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					297,898
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	1,380	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0		1,380	943,725
105 Total (add line 104, columns (B), (D), and (E))					945,105

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 32 of the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
●	See Statement 13

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 32 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
See Stmt 14	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 33 of the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Please Sign Here

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

Signature of officer: Kathy Burlinson Date: 2/12/04

Type or print name and title: Kathy Burlinson

Paid Preparer's Use Only

Preparer's signature: [Signature] Date: 2/09/04 Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: Jane S. Getter, CPA
331 Page Street, 2nd Floor
Stoughton, MA 02072

Preparer's SSN or PTIN (See Gen. Instr. W): 117-38-2055 EIN: 04-3038464 Phone no.: 781-297-9700

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

OMB No. 1545-0047

2002

Department of the Treasury
Internal Revenue Service

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

**Neighborhood of Affordable Housing,
Inc.**

Employer identification number

04-2964630

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee ben. plans & deferred compensation	(e) Expense account and other allowances
See Form 990 Part I				
Total number of other employees paid over \$50,000 ▶	0			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instr. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$ 50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over \$50,000 for professional services ▶	0	

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

Schedule A (Form 990 or 990-EZ) 2002

Part III Statements About Activities (See page 2 of the instructions.)

Yes No

<p>1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities \$ _____ (Must equal amount on line 38, Part VI-A, or line i of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.</p>	1	X
<p>2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)</p>		
<p>a Sale, exchange, or leasing of property?</p>	2a	X
<p>b Lending of money or other extension of credit?</p>	2b	X
<p>c Furnishing of goods, services, or facilities?</p>	2c	X
<p>d Payment of compensation (or payment or reimbursement of exp. if more than \$1,000)?</p>	2d	X
<p>e Transfer of any part of its income or assets?</p>	2e	X
<p>3 Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below.)</p>	3	X
<p>4 Do you have a section 403(b) annuity plan for your employees?</p>	4	X
<p>Note: Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments.</p>		

Part IV Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions.)

The organization is not a private foundation because it is: (Please check only ONE applicable box.)

- 5** A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6** A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7** A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8** A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9** A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state **▶**
- 10** An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a** An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b** A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12** 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 charitable, etc., 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). (Also complete the **Support Schedule** in Part IV-A.)
- 13** An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14** An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	294,462	843,418	897,132	598,510	2,633,522
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	1,073,345	683,499	853,348	567,840	3,178,032
18 Gross inc. from int., dividends, amounts received from pymt. on securities loans (section 512(a)(5)), rents, royalties, & unrelated busn. taxable inc. (less sec. 511 taxes) from businesses acquired by the organization after June 30, 1975	765	34,099	49,629	45,541	130,034
19 Net income from unrelated business activities not included in line 18					
20 Tax revn. levied for the organization's ben. & either paid to it or expended on its behalf					
21 The value of serv. or fac. furnished to the org. by a governmental unit without charge. Do not incl. the value of serv. or fac. generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of cap. assets					
23 Total of lines 15 through 22	1,368,572	1,561,016	1,800,109	1,211,891	5,941,588
24 Line 23 minus line 17	295,227	877,517	946,761	644,051	2,763,556
25 Enter 1% of line 23	13,686	15,610	18,001	12,119	

26 Organizations described on lines 10 or 11:	a Enter 2% of amount in column (e), line 24	▶ 26a	55,271
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts		▶ 26b	195,467
c Total support for section 509(a)(1) test: Enter line 24, column (e)		▶ 26c	2,763,556
d Add: Amounts from column (e) for lines:	18 <u>130,034</u> 19 _____	▶ 26d	325,501
	22 _____ 26b <u>195,467</u>	▶ 26e	2,438,055
e Public support (line 26c minus line 26d total)		▶ 26f	88.2217%
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))			

27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A

(2001) _____ (2000) _____ (1999) _____ (1998) _____

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A

(2001) _____ (2000) _____ (1999) _____ (1998) _____

c Add: Amounts from column (e) for lines:	15 _____ 16 _____	▶ 27c	
	17 _____ 20 _____ 21 _____	▶ 27d	
d Add: Line 27a total _____ and line 27b total _____		▶ 27e	
e Public support (line 27c total minus line 27d total)		▶ 27f	
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)		▶ 27g	%
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))		▶ 27h	%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))			

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Part V Private School Questionnaire (See page 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	N/A	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32 Does the organization maintain the following:			
a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
33 Does the organization discriminate by race in any way with respect to:			
a Students' rights or privileges?	33a		
b Admissions policies?	33b		
c Employment of faculty or administrative staff?	33c		
d Scholarships or other financial assistance?	33d		
e Educational policies?	33e		
f Use of facilities?	33f		
g Athletic programs?	33g		
h Other extracurricular activities?	33h		
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34a Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b Has the organization's right to such aid ever been revoked or suspended?	34b		
If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)

(To be completed **ONLY** by an eligible organization that filed Form 5768) **N/A**

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred.)

		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount. Enter the amount from the following table-			
If the amount on line 40 is-			
Not over \$500,000			
Over \$500,000 but not over \$1,000,000			
Over \$1,000,000 but not over \$1,500,000			
Over \$1,500,000 but not over \$17,000,000			
Over \$17,000,000			
The lobbying nontaxable amount is-			
20% of the amount on line 40			
\$100,000 plus 15% of the excess over \$500,000			
\$175,000 plus 10% of the excess over \$1,000,000	41		
\$225,000 plus 5% of the excess over \$1,500,000			
\$1,000,000			
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.)

See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instr.)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

- a Volunteers
- b Paid staff or management (include compensation in expenses reported on lines c through h.)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (add lines c through h.)

Yes	No	Amount

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of:

(i) Cash

(ii) Other assets

b Other transactions:

(i) Sales or exchanges of assets with a noncharitable exempt organization

(ii) Purchases of assets from a noncharitable exempt organization

(iii) Rental of facilities, equipment, or other assets

(iv) Reimbursement arrangements

(v) Loans or loan guarantees

(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

	Yes	No
51a(i)		X
a(ii)		X
b(i)		X
b(ii)		X
b(iii)		X
b(iv)	X	
b(v)	X	
b(vi)	X	
c	X	

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
		See Statement 16	

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule:

(a) Name of organization	(b) Type of organization	(c) Description of relationship
Paz Properties, Inc.	501(c) (2)	Paz Properties Inc. holds title to low income housing and/or low income housing in development. Any income less expenses is turned over to Neighborhood of Affordable Housing, Inc (NOAH). Staff and Board of Directors overlap for the two corporations.
Shalom Properties, Inc	501(c) (2)	Shalom Properties Inc. holds title to low income housing and/or low income housing in development. Any income less expenses is turned over to NOAH. Staff and Board of Directors overlap for the 2 corps.
Siochain Properties In	501(c) (2)	Serves as general partner in a real estate limited partnership.

Form 990/990-PF	Other Notes and Loans Receivable	2002
For calendar year 2002, or tax year beginning 7/01/02 , and ending 6/30/03		Employer Identification Number 04-2964630
Name Neighborhood of Affordable Housing, Inc.		

Form 990, Part IV, Line 51a - Additional Information

Name of borrower	Relationship to disqualified person
(1) Shalom Properties Inc - related corp	
(2) Peace Properties Inc - related corp	
(3) NOAH CDFI Inc -related corp	
(4) NOAH Trinity, Inc.-related corp	
(5) NOAH Trinity L.P.-related entity	
(6) Siochain Properties LP-related entit	
(7) Siochain Properties LP-Deferred	
(8) Development Fee	
(9)	
(10)	

Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

Security provided by borrower	Purpose of loan
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year	Fair market value (990-PF only)
(1)	10,218	10,218	
(2)	74,100	89,600	
(3)	1,680	51,323	
(4)	8,413	9,148	
(5)	80,372	80,372	
(6)	14,211	27,111	
(7)			
(8)	55,797	55,796	
(9)			
(10)			
Totals	244,791	323,568	

Mortgages and Other Notes Payable

Form
990/990-PF

2002

For calendar year 2002, or tax year beginning

7/01/02, and ending

6/30/03

Name
Neighborhood of Affordable Housing, Inc.

Employer Identification Number
04-2964630

Form 990, Part IV, Line 64b - Additional Information

Name of lender	Relationship to disqualified person
(1) City of Boston Public Facilities Dep	n/a
(2) Capital leases, various	n/a
(3) NOAH Community Development Fund, Inc	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

Security provided by borrower	Purpose of loan
(1) n/a	Community development
(2) Equipment	Leasing of office equipment
(3) n/a	Intercompany advances
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year
(1)	50,000	50,000
(2)	59,624	48,241
(3)	45,000	45,000
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Totals	154,624	143,241

Form 990 - General Footnote

Form 990 Part VI - Other Information

Q. 80b - Related Organization

Neighborhood of Affordable Housing, Inc. is related to the following exempt organizations through common management, facilities, and Board membership:

Peace Properties, Inc. 501(c)(3)

NOAH Community Development Fund, Inc. 501(c)(3)

Paz Properties, Inc. 501(c)(2)

Shalom Properties, Inc. 501(c)(2)

Siochain Properties, Inc. 501(c)(2)

Neighborhood of Affordable Housing, Inc. owns 100% of a C corporation, NOAH Trinity, Inc.

Federal Statements

Statement 1 - Form 990, Line 20 - Other Changes in Net Assets or Fund Balances

Description	Amount
Prior period adjustment	\$ -17,200
Unrealized loss on investments	-293
Total	\$ <u>-17,493</u>

Federal Statements

Statement 2 - Form 990, Part II, Line 22 - Grants, Allocations, and Contributions

<u>Description</u>	<u>Cash Contribution</u>	<u>Noncash Contribution</u>
	\$	\$
	<u>\$ 0</u>	<u>\$ 0</u>

Statement 3 - Form 990, Part II, Line 43 - Other Functional Expenses

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Mgt & General</u>	<u>Fund- Raising</u>
	\$	\$	\$	\$
Expenses				
Advertising	3,024	2,259	765	
Annual event	9,447		9,408	39
Bad debts	2,026	2,026		
Bank charges	146		146	
Computer expense	24,548	17,720	4,893	1,935
Consulting fees	57,992	46,357	4,128	7,507
Contract services	122,575	118,902	3,430	243
Donations and gifts	1,749		1,724	25
Dues and subscriptions	3,199	30	3,094	75
Filing fees	265		265	
Insurance	18,297	884	17,413	
Insurance-workers comp	37,091	15,869	21,222	
Overhead and administration	222,604	212,399	10,205	
Payroll service costs	1,622		1,622	
Program expenses	9,435	9,027	121	287
Repairs and maintenance	375		375	
Staff development	5,042	3,313	1,659	70
Total	<u>\$ 519,437</u>	<u>\$ 428,786</u>	<u>\$ 80,470</u>	<u>\$ 10,181</u>

Statement 4 - Form 990, Part III, Line e - Other Program Services

Housing counseling 42,853

Statement 5 - Form 990, Part IV, Line 56 - Other Investments

Description	Beginning of Year	End of Year	Basis of Valuation
NOAH Trinity, Inc.	\$ 72,900	\$ 72,607	
Total	<u>\$ 72,900</u>	<u>\$ 72,607</u>	

Statement 6 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

Description	Beginning of Year	Accum Deprec	End of Year	Accum Deprec
Furniture and fixtures	\$ 20,064	\$ 14,454	\$ 20,064	\$ 16,364
Equipment	100,089	89,692	103,574	94,641
Capital leases	135,680	74,000	61,680	12,336
Total	<u>\$ 255,833</u>	<u>\$ 178,146</u>	<u>\$ 185,318</u>	<u>\$ 123,341</u>

Statement 7 - Form 990, Part IV, Line 58 - Other Assets

Description	Beginning of Year	End of Year
Deposits and escrow accounts	\$	\$ 20,236
Total	<u>\$ 0</u>	<u>\$ 20,236</u>

Statement 8 - Form 990, Part IV, Line 65 - Other Liabilities

Description	Beginning of Year	End of Year
Escrows payable	\$	\$ 19,679
Total	<u>\$ 0</u>	<u>\$ 19,679</u>

Federal Statements

Statement 9 - Form 990, Part IV-A - Other Revenue Included in Financial Statements

<u>Description</u>	<u>Amount</u>
Attributable to related corporations on combined financial statements	\$ 1,104,673
Total	<u>\$ 1,104,673</u>

Statement 10 - Form 990, Part IV-A - Other Revenue Included on Return

<u>Description</u>	<u>Amount</u>
Combining entries - related corporations	\$ 517,018
Total	<u>\$ 517,018</u>

Statement 11 - Form 990, Part IV-B - Other Expenses Included in Financial Statements

<u>Description</u>	<u>Amount</u>
Attributable to related corporations on combined financial statements	\$ 924,000
Loss on investments	294
Total	<u>\$ 924,294</u>

Statement 12 - Form 990, Part IV-B - Other Expenses Included on Return

<u>Description</u>	<u>Amount</u>
Combining entries - related corporations	\$ 243,143
Total	<u>\$ 243,143</u>

Statement 13 - Form 990, Part VIII - Relationship of Activities

<u>Line No.</u>	<u>Description</u>
93a	NOAH receives fees to manage and market East Boston housing units. All fees are from related entities.
93a	Related entities develop properties to be occupied by low moderate-income families. Development fees are budgeted for each project. Fees were received from Peace Properties Inc, a related entity.
93a	NOAH occasionally receives fees to consult on a variety of program-related issues, and misc program service revenue.

NOAH Neighborhood of Affordable Housing,
04-2964630
FYE: 6/30/2003

Federal Statements

2/9/2004

Statement 14 - Form 990, Part IX - Information Regarding Taxable Subsidiaries

Name, Address & EIN	Ownership %	Business Activity	Income	EOY Assets
NOAH Trinity, Inc. 22 Paris St. East Boston, MA 04-3128469	100.0000	Rental real estate	\$	\$

Statement 15 - Schedule A, Part III, Line 2d - Payment of Compensation / Reimbursement of Exp

Compensation paid to employees-see Part V Form 990

Federal Statements**Statement 16 - Schedule A, Part VII, Line 51d - Schedule Information**

<u>Line No.</u>	<u>Amount Involved</u>	<u>Name of Charitable Exempt Organization</u>	<u>Description of Transfers Transactions, Etc.</u>
b(iv)		Paz Properties, Inc. 04-3206160	Paz Properties, Inc. is a title-holding corp organized under IRC 501(c)(2) for the sole purpose of holding real property and turning over the income less expenses to Neighborhood of Affordable Housing Inc. (NOAH)
		Shalom Properties, Inc 04-3358724	Shalom Properties, Inc. is a title holding corp organized under IRC 501(c)(2) for the sole purpose of holding real property and turning over the income less expenses to NOAH
b(v)	10,218	Shalom Properties, Inc	Loans and a/r at end of year
	57,232	Paz Properties, Inc.	Loans and a/r at end of year
b(vi)	86,787	Paz Properties, Inc.	NOAH provided management services
	111,179	Shalom Properties, Inc	NOAH provided management services
c		Paz Properties, Inc.	NOAH provided all payroll and office facilities to Paz Properties, Inc.
		Shalom Properties Inc.	NOAH provided all payroll and office facilities to Shalom Properties, Inc.
		Siochain Properties, Inc.	NOAH provided all payroll and office facilities to Siochain Properties, Inc.

Federal Statements

Form 990, Part I, Line 1a - Direct Public Support

<u>Description</u>	<u>Cash</u>	<u>Noncash</u>	<u>Total</u>
Other Contributions	\$ 689,121	\$	\$ 689,121
Total	<u>\$ 689,121</u>	<u>\$ 0</u>	<u>\$ 689,121</u>

Form 990, Part I, Line 1b - Indirect Public Support

<u>Description</u>	<u>Cash</u>	<u>Noncash</u>	<u>Total</u>
Other Contributions	\$ 112,023	\$	\$ 112,023
Total	<u>\$ 112,023</u>	<u>\$ 0</u>	<u>\$ 112,023</u>

Form 990, Part I, Line 1c - Government Contributions

<u>Description</u>	<u>Cash</u>	<u>Noncash</u>	<u>Total</u>
Other Contributions	\$ 52,750	\$	\$ 52,750
Total	<u>\$ 52,750</u>	<u>\$ 0</u>	<u>\$ 52,750</u>

Federal Statements

Schedule A, Part IV-A, Line 26b - Excess Gifts

<u>Donor Name</u>	<u>Total</u>	<u>Excess</u>
Citizens Bank	\$ 65,000	\$ 9,729
Fannie Mae Foundation	100,000	44,729
Harvard University	70,000	14,729
Hyams Foundation	95,000	39,729
Local Initiatives Support Corp	77,250	21,979
Merck Family Fund	90,114	34,843
State Street Bank and Trust	85,000	29,729
Total	<u>\$ 582,364</u>	<u>\$ 195,467</u>

NEIGHBORHOOD OF AFFORDABLE HOUSING, INC.

BOARD OF DIRECTORS

JUNE 30, 2003

President

Mary Ellen Welch

225 Webster St, East Boston, MA 02128

Vice President

Harold McFadden

102 Saratoga St, East Boston, MA 02128

Treasurer

Ulises Rosa

150 Orleans St, East Boston, MA 02128

Secretary/Clerk

Kathy Burlinson

14 Leverett Av, East Boston, MA 02128

Assistant Clerk

Anjie Preston

35 Wordsworth St, East Boston, MA 02128

Board Members

Kathy D'Alessandro

16 Clippership Lane, East Boston, MA 02128

Dharmena Downey

857 Washington St, Gloucester, MA 01930

Kim Epstein

48 Electric Av, Somerville, MA 02144

Nina Gaeta-Coletta
(on leave)

27 Monmouth St, East Boston, MA 02128

Jeff Howe

64 Beal St, Winthrop, MA 02152

Patrice Maye
(on leave)

32 Monmouth St, East Boston, MA 02128

Gail Miller

232 Orient Av, East Boston, MA 02128

Gloribell Mota

115 Everett St, East Boston, MA 02128

Doris Rubio

152 Falcon St, East Boston, MA 02128

Form **8868**

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

December 2000)
Department of the Treasury
Internal Revenue Service

▶ File a separate application for each return.

- ▶ If you are filing for an **Automatic 3-Month Extension**, complete only Part I and check this box
- ▶ If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only Part II (on page 2 of this form).

Note: Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Form 8868.

Part I Automatic 3-Month Extension of Time- Only submit original (no copies needed)

Note: Form 990-T corporations requesting an automatic 6-month extension-check this box and complete Part I only

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

Type or print file by the due date for filing your return. See instructions.	Name of Exempt Organization Neighborhood of Affordable Housing, Inc.	Employer identification number 04-2964630
	Number, street, and room or suite no. If a P.O. box, see instructions. 22 Paris Street	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. East Boston MA 02128	

Check type of return to be filed (file a separate application for each return):

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

- ▶ If the organization does not have an office or place of business in the United States, check this box
- ▶ If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-month, for 990-T corporation) extension of time until 2/17/04 to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶ calendar year _____ or

▶ tax year beginning 7/01/02, and ending 6/30/03

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

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ _____

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit \$ _____

c **Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ _____

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶ *John P. [Signature]* Title ▶ CPA Date ▶ 11/11/03

For Paperwork Reduction Act Notice, see Instruction Form **8868** (12-2000)