

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)

2003

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 2003 calendar year, or tax year beginning 7/01/03, and ending 6/30/04

B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending. C Name of organization: Neighborhood of Affordable Housing, Inc. D Employer ID number: 04-2964630 E Telephone number: 617-567-5882 F Accounting method: Accrual

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

G Website: www.noahcdc.org

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.

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 number 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. I Group Exemption Number. 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 2,265,759

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.)

Table with 12 columns: Description, 1a, 1b, 1c, 1d, 2, 3, 4, 5, 6a, 6b, 6c, 7, 8a, 8b, 8c, 8d, 9a, 9b, 9c, 10a, 10b, 10c, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21. Rows include Contributions, Program service revenue, Membership dues, Interest on savings, Dividends, Gross rents, Sales of assets, Special events, Gross sales of inventory, Other revenue, Total revenue, Expenses, and Net assets.

SCANNED MAR 11 2005

RECEIVED FEB 22 2005 OGDEN UT

See Stmt 1

Handwritten mark

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 22 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 \$ 20,000 non-cash \$ _____)	22	20,000	20,000	
23	Specific assistance to individuals	23			
24	Benefits paid to or for members	24			
25	Compensation of officers, directors, etc.	25	52,712	24,329	16,219
26	Other salaries and wages	26	586,489	479,724	71,512
27	Pension plan contributions	27			
28	Other employee benefits	28	72,442	54,380	13,577
29	Payroll taxes	29	89,507	68,650	13,998
30	Professional fundraising fees	30			
31	Accounting fees	31	7,500	1,500	6,000
32	Legal fees	32	5,009	2,792	2,217
33	Supplies	33	52,407	41,261	10,006
34	Telephone	34	15,595	12,268	2,393
35	Postage and shipping	35	5,913	2,692	2,421
36	Occupancy	36	45,932	35,601	6,318
37	Equipment rental and maintenance	37	3,700	1,310	2,390
38	Printing and publications	38	11,301	336	3,447
39	Travel	39	4,956	3,629	1,306
40	Conferences, conventions, and meetings	40	7,193	1,457	5,736
41	Interest	41			
42	Depreciation, depletion, etc. (attach schedule)	42	24,059		24,059
43	Other expenses not covered above (itemize). a	43a			
	b See Statement 3	43b	591,808	486,791	92,727
	c	43c			
	d	43d			
	e	43e			
44	Total functional expenses (add lines 22 - 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	1,596,523	1,236,720	274,326

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 25 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)
<p>► 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)</p>	
<p>a Neighborhood Programs</p> <p>(Grants and allocations \$ _____)</p>	525,980
<p>b Housing development</p> <p>(Grants and allocations \$ _____)</p>	179,527
<p>c Senior home services</p> <p>(Grants and allocations \$ _____)</p>	204,299
<p>d Property rental</p> <p>(Grants and allocations \$ _____)</p>	245,266
<p>e Other program services (attach schedule) See Stmt 4 (Grants and allocations \$ 20,000)</p>	81,648
<p>f Total of Program Service Expenses (should equal line 44, column (B), Program services)</p>	1,236,720

Part IV Balance Sheets (See page 25 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	
45	Cash-non-interest-bearing	170,891	45	200	
46	Savings and temporary cash investments	23,104	46	411,530	
47a	Accounts receivable	392,444			
b	Less: allowance for doubtful accounts		47c	392,444	
48a	Pledges receivable				
b	Less: allowance for doubtful accounts		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	977,518			
b	Less: allowance for doubtful accounts		51c	977,518	
52	Inventories for sale or use		52		
53	Prepaid expenses and deferred charges	7,276	53	16,653	
54	Investments-securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54		
55a	Investments-land, buildings, and equipment: basis				
b	Less: accumulated depreciation (attach schedule)		55c		
56	Investments-other (attach schedule) See Stmt 5	72,607	56	72,229	
57a	Land, buildings, and equipment: basis	320,523			
b	Less: accumulated depreciation (attach schedule) See Stmt 6		57c	173,124	
58	Other assets (describe See Stmt 7)	147,399	58	22,640	
59	Total assets (add lines 45 through 58) (must equal line 74)	1,198,471	59	2,066,338	
60	Accounts payable and accrued expenses	80,183	60	151,694	
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	143,241	64b	264,123	
65	Other liabilities (describe See Stmt 8)	19,679	65	17,293	
66	Total liabilities (add lines 60 through 65)	243,103	66	433,110	
Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74					
67	Unrestricted	542,035	67	1,456,551	
68	Temporarily restricted		68	176,677	
69	Permanently restricted	413,333	69		
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)	955,368	73	1,633,228	
74	Total liabilities and net assets / fund balances (add lines 66 and 73)	1,198,471	74	2,066,338	

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 27 of the instructions.)	Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return
<p>a Total revenue, gains, and other support per audited financial statements ▶ a <u>2,955,755</u></p> <p>b Amounts included on line a but not on line 12, Form 990</p> <p>(1) Net unrealized gains on investments \$ _____</p> <p>(2) Donated services and use of facilities \$ _____</p> <p>(3) Recoveries of prior year grants \$ _____</p> <p>(4) Other (specify): See Stmt 9 \$ <u>1,748,970</u></p> <p>Add amounts on lines (1) through (4) ▶ b <u>1,748,970</u></p> <p>c Line a minus line b ▶ c <u>1,206,785</u></p> <p>d Amounts included on line 12, Form 990 but not on line a:</p> <p>(1) Investment expenses not included on line 6b, Form 990 \$ _____</p> <p>(2) Other (specify): See Stmt 10 \$ <u>1,058,974</u></p> <p>Add amounts on lines (1) and (2) ▶ d <u>1,058,974</u></p> <p>e Total revenue per line 12, Form 990 (line c plus line d) ▶ e <u>2,265,759</u></p>	<p>a Total expenses and losses per audited financial statements ▶ a <u>2,305,527</u></p> <p>b Amounts included on line a but not on line 17, Form 990:</p> <p>(1) Donated services and use of facilities \$ _____</p> <p>(2) Prior year adjustments reported on line 20, Form 990 \$ _____</p> <p>(3) Losses reported on line 20, Form 990 \$ _____</p> <p>(4) Other (specify): See Stmt 11 \$ <u>957,992</u></p> <p>Add amounts on lines (1) through (4) ▶ b <u>957,992</u></p> <p>c Line a minus line b ▶ c <u>1,347,535</u></p> <p>d Amounts included on line 17, Form 990 but not on line a:</p> <p>(1) Investment expenses not included on line 6b, Form 990 \$ _____</p> <p>(2) Other (specify): See Stmt 12 \$ <u>248,988</u></p> <p>Add amounts on lines (1) and (2) ▶ d <u>248,988</u></p> <p>e Total expenses per line 17, Form 990 (line c plus line d) ▶ e <u>1,596,523</u></p>

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see page 27 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 Road Framingham MA 01702	Executive Di 37.5	81,096	3,077	0
Linda A. Puopolo 4317 Scotts Mill Ct Saugus MA 01906	Dir of Fin & 37.5	81,350	4,752	0
Morgan Wilson 187 Harvey St Cambridge MA 02140	Senior Progr 37.5	60,600	10,415	0
Marilyn Scott 363 Maverick St E. Boston MA 02128	Lending/Home 37.5	66,250	6,204	0
Stacey Chacker 4 Glade Ave #1 Jamaica Pl MA 02130	Dir of Comm 37.5	57,321	2,408	0
		0	0	0
See footnote for expense allocation information		0	0	0
		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 28 of the instructions.

Part VI Other Information (See page 28 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		<input checked="" type="checkbox"/>
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.		<input checked="" type="checkbox"/>
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		<input checked="" type="checkbox"/>
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		<input checked="" type="checkbox"/>
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?	<input checked="" type="checkbox"/>	
b	If "Yes," enter the name of the organization See Statement 13 and check whether it is <input checked="" type="checkbox"/> exempt or <input checked="" type="checkbox"/> nonexempt		
81a	Enter direct and indirect political expenditures. See line 81 instructions		
b	Did the organization file Form 1120-POL for this year?		<input checked="" type="checkbox"/>
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?		<input checked="" type="checkbox"/>
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?	<input checked="" type="checkbox"/>	
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?		<input checked="" type="checkbox"/>
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 below unless the organization received a waiver for proxy tax owed for the prior year	N/A	
c	Dues, assessments, and similar amounts from members		
d	Section 162(e) lobbying and political expenditures		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	N/A	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 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		
b	Gross receipts, included on line 12, for public use of club facilities		
87	501(c)(12) orgs 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.)		
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		<input checked="" type="checkbox"/>
89a	501(c)(3) organizations Enter: Amount of tax imposed on the organization during the year under section 4911 <u>0</u> , section 4912 <u>0</u> ; section 4955 <u>0</u>		
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		<input checked="" type="checkbox"/>
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		<u>0</u>
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		<u>0</u>
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, 2003 (See instructions)	90b	<u>27</u>
91	The books are in care of Corporation Telephone no. 617-567-5882 Located at 143 Border 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 and enter the amount of tax-exempt interest received or accrued during the tax year		<input type="checkbox"/>

Part VII Analysis of Income-Producing Activities (See page 33 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 overhead fees					593,245
b Development fees					252,332
c Other program revenue					42,506
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					278,246
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	3,508	
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	3,508	1,166,329
105 Total (add line 104, columns (B), (D), and (E))					1,169,837

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 34 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 14

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 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
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 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: *Mary Ellen Kelly* Date: *2-8-05*
Board President

PA	Date 2/08/05	Check if self-employed <input checked="" type="checkbox"/>	Preparer's SSN or PTIN (See Gen. Instr. W) 117-38-2055
----	------------------------	--	--

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

2003

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 V				

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 instructions. 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 over \$50,000		

Total number of others receiving over \$50,000 for professional services ▶

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

Schedule A (Form 990 or 990-EZ) 2003

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

		Yes	No
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 amounts 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.	1	X
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.)		
a	Sale, exchange, or leasing of property? See Stmt 15	2a	X
b	Lending of money or other extension of credit? See Stmt 16	2b	X
c	Furnishing of goods, services, or facilities? See Stmt 17	2c	X
d	Payment of compensation (or payment or reimbursement of expiration if more than \$1,000)? See Stmt 18	2d	X
e	Transfer of any part of its income or assets?	2e	X
3a	Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)	3a	X
3b	Do you have a section 403(b) annuity plan for your employees?	3b	X
4	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4	X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 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 6 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) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	853,894	294,462	843,418	897,132	2,888,906
16 Membership fees received					0
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	943,725	1,073,345	683,499	853,348	3,553,917
18 Gross income from interest, dividends, amounts received from payment on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	1,380	765	34,099	49,629	85,873
19 Net income from unrelated business activities not included in line 18					0
20 Tax revenues levied for the organization's benefits and either paid to it or expended on its behalf					0
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					0
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets					0
23 Total of lines 15 through 22	1,798,999	1,368,572	1,561,016	1,800,109	6,528,696
24 Line 23 minus line 17	855,274	295,227	877,517	946,761	2,974,779
25 Enter 1% of line 23	17,990	13,686	15,610	18,001	

26 Organizations described on lines 10 or 11:	a Enter 2% of amount in column (e), line 24	26a	59,496
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 1999 through 2002 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts		26b	574,520
c Total support for section 509(a)(1) test. Enter line 24, column (e)		26c	2,974,779
d Add. Amounts from column (e) for lines:	18 <u>85,873</u> 19 _____	26d	660,393
	22 _____ 26b <u>574,520</u>	26e	2,314,386
e Public support (line 26c minus line 26d total)		26f	77.8003%
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:	(2002)	(2001)	(2000)	(1999)	N/A
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		(2002)	(2001)	(2000)	(1999)	N/A
c Add. Amounts from column (e) for lines:	15 _____ 16 _____	17 _____ 20 _____	21 _____		27c	
d Add. Line 27a total _____ and line 27b total _____					27d	
e Public support (line 27c total minus line 27d total)					27e	
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					27f	
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g	%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h	%

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, 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?			
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?			
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? 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? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b		
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-	The lobbying nontaxable amount is-		
Not over \$500,000	20% of the amount on line 40		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$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) 2003	(b) 2002	(c) 2001	(d) 2000	(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 12 of the instructions.) **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:

	Yes	No
51a(i)		<input checked="" type="checkbox"/>
a(ii)		<input checked="" type="checkbox"/>
b(i)		<input checked="" type="checkbox"/>
b(ii)		<input checked="" type="checkbox"/>
b(iii)		<input checked="" type="checkbox"/>
b(iv)	<input checked="" type="checkbox"/>	
b(v)	<input checked="" type="checkbox"/>	
b(vi)	<input checked="" type="checkbox"/>	
c	<input checked="" type="checkbox"/>	

(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.

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
		See Statement 19	

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
See Statement 20		

Forms 990 / 990-PF	Other Notes and Loans Receivable	2003
For calendar year 2003, or tax year beginning 7/01/03 , and ending 6/30/04		

Name Neighborhood of Affordable Housing, Inc.	Employer Identification Number 04-2964630
---	---

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) Pace Border LLC-related entity	
(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)	89,600	84,100	
(3)	51,323	230,573	
(4)	9,148	9,914	
(5)	80,372	80,372	
(6)	27,111	27,646	
(7)			
(8)	55,796	55,796	
(9)		478,899	
(10)			
Totals	323,568	977,518	

Forms 990 / 990-PF	Mortgages and Other Notes Payable	2003
For calendar year 2003, or tax year beginning 7/01/03 , and ending 6/30/04		

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) CEDAC	n/a
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1)				
(2)				
(3)				
(4)				7.000
(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) n/a	Community Development
(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)	48,241	150,772
(3)	45,000	45,000
(4)		18,351
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Totals	143,241	264,123

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

<u>Description</u>	<u>Amount</u>
Prior period adjustment	9,002
Unrealized loss on investments	-378
Total	<u>\$ 8,624</u>

NOAH Neighborhood of Affordable Housing,
 04-2964630
 FYE: 6/30/2004

Federal Statements

2/8/2005

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

Donee's Name	Donee's Relationship to Org	Donee's Address	City	St	Zip	Cash Contribution	Noncash Contribution
Massachusetts Comm-						\$	\$
munity Development						20,000	
Corporation							
Total						\$ 20,000	\$ 0

Federal Statements

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	4,530	3,580	950	
Annual event	6,855	901		5,954
Bad debts				
Bank charges	67	67		
Computer expense	30,396	11,928	17,277	1,191
Consulting fees	41,702	25,097	12,005	4,600
Contract services	161,546	158,438	3,108	
Donations and gifts	2,758	50	2,708	
Dues and subscriptions	5,739		5,739	
Filing fees	209	209		
Insurance	21,612	3,893	17,719	
Insurance-workers comp	9,080	7,794	1,286	
Overhead and administration	232,820	219,747	13,073	
Payroll service costs	1,790		1,790	
Program expenses	59,875	51,738	7,642	495
Staff development	12,829	3,349	9,430	50
Total	<u>\$ 591,808</u>	<u>\$ 486,791</u>	<u>\$ 92,727</u>	<u>\$ 12,290</u>

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

Housing counseling 56,258

Federal Statements

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

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>	<u>Basis of Valuation</u>
NOAH Trinity, Inc.	\$ 72,607	\$ 72,229	
Total	<u>\$ 72,607</u>	<u>\$ 72,229</u>	

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

<u>Description</u>	<u>Beginning of Year</u>	<u>Accum Deprec</u>	<u>End of Year</u>	<u>Accum Deprec</u>
Furniture and fixtures	\$ 20,064	\$ 16,364	\$ 20,064	\$ 17,490
Equipment	103,574	94,641	116,946	105,066
Capital leases	61,680	12,336	178,380	24,672
Leasehold improvements			5,133	171
Total	<u>\$ 185,318</u>	<u>\$ 123,341</u>	<u>\$ 320,523</u>	<u>\$ 147,399</u>

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

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
Deposits and escrow accounts	\$ 20,236	\$ 22,640
Total	<u>\$ 20,236</u>	<u>\$ 22,640</u>

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

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
Escrows payable	\$ 19,679	\$ 17,293
Total	<u>\$ 19,679</u>	<u>\$ 17,293</u>

Federal Statements

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

<u>Description</u>	<u>Amount</u>
Attributable to related corporations on combined financial statements	\$ 1,748,970
Total	<u>\$ 1,748,970</u>

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

<u>Description</u>	<u>Amount</u>
Combining entries - related corporations	\$ 1,058,974
Total	<u>\$ 1,058,974</u>

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

<u>Description</u>	<u>Amount</u>
Attributable to related corporations on combined financial statements	\$ 957,992
Loss on investments	
Total	<u>\$ 957,992</u>

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

<u>Description</u>	<u>Amount</u>
Combining entries - related corporations	\$ 248,988
Total	<u>\$ 248,988</u>

Federal Statements

Statement 13 - Form 990, Part VI, Line 80b - Name of Related Organization(s)

<u>Name of related organization(s)</u>	<u>Type</u>
Peace Properties, Inc.	Exempt
Paz Properties, Inc.	Exempt
Shalom Properties, Inc.	Exempt
Siochain Properties, Inc.	Exempt
NOAH Community Development Fund, Inc	Exempt
Pace Border LLC	Non-exempt

Federal Statements

Statement 14 - 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.

Federal Statements

Statement 15 - Schedule A, Part III, Line 2a - Sale, Exchange, or Lease of Property

Rented office space from Pace Border LLC in the amount of \$10,750.

Statement 16 - Schedule A, Part III, Line 2b - Lending of Money or Extension of Credit

Loaned funds to Pace Border LLC. Balance at 6/30/04 was \$478,899.

Statement 17 - Schedule A, Part III, Line 2c - Furnishing Goods, Services, or Facilities

Shared office facilities with Pace Border LLC, NOAH Trinity Inc.
and 143 Border Street Inc.

**Statement 18 - Schedule A, Part III, Line 2d - Payment of Compensation / Reimbursement of
Exp**

Compensation paid to employees-see Part V Form 990

Federal Statements**Statement 19 - 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>
		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
		Shalom Properties, Inc Paz Properties, Inc.	Loans and a/r at end of year Loans and a/r at end of year
		Paz Properties, Inc. Shalom Properties, Inc	NOAH provided management services NOAH provided management services
		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.

Statement 20 - Schedule A, Part VII, Line 52b - Schedule Information

<u>Name of Organization</u>	<u>Type of Organization</u>	<u>Description of Relationship</u>
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.

Federal Statements**Form 990 - General Footnote**

Form 990 Part VI - Other Information

Q. 80b - Related Organization

Neighborhood of Affordable Housing, Inc. (NOAH) 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.

Peace Properties, Inc. is a controlling partner in Pace Border, LLC.

NOAH Community Development Fund, Inc. reimbursed NOAH as follows for salaries of key employees:

Philip Giffie	\$ 28,384
Linda Puopolo	26,483
Marilyn Scott	66,250
Other employees	60,825
Total	<u>\$181,942</u>
	=====

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	\$ 581,040	\$	\$ 581,040
Total	\$ 581,040	\$ 0	\$ 581,040

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

<u>Description</u>	<u>Cash</u>	<u>Noncash</u>	<u>Total</u>
Other Contributions	\$ 413,525	\$	\$ 413,525
Total	\$ 413,525	\$ 0	\$ 413,525

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

<u>Description</u>	<u>Cash</u>	<u>Noncash</u>	<u>Total</u>
Other Contributions	\$ 101,357	\$	\$ 101,357
Total	\$ 101,357	\$ 0	\$ 101,357

NEIGHBORHOOD OF AFFORDABLE HOUSING, INC.
BOARD OF DIRECTORS-June 30, 2004

Mary Ellen Welch, **President**
225 Webster Street
East Boston, MA 02128

Kimberly Epstein, Board Member
48 Electric Avenue
Somerville, MA 02144-1604

Ulises Rosa, **Treasurer**
150 Orleans Street, #305
East Boston, MA 02128

Kathy D'Alessandro, Board Member
16 Clippership Lane
East Boston, MA 02128

Kathy Burlinson, **Secretary/Clerk**
14 Leverett Ave
East Boston, MA 02128

Jeff Howe, Board Member
64 Beal Street
Winthrop, MA 02152

Anjie Preston, **Assistant Clerk**
35 Wordsworth Street, 1st Floor
East Boston, MA 02128

Doris Rubio, Board Member
152 Falcon Street
East Boston, MA 02128

Dharmena Downey, Board Member
857 Washington Street
Gloucester, MA 01930

Gloribell Mota, Board Member
115 Everett Street, 2-A
East Boston, MA 02128

Gail Miller, Board Member
232 Orient Avenue
East Boston, MA 02128

Kempton Flemming, Board Member
209 Trenton Street
East Boston, MA 02128

David Foss, Board Member
Cumsky and Levin LLP
6 University Place
Cambridge, MA 02138

None are compensated.

Form **8868**

(December 2000)

Department of the Treasury

Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

▶ 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.

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.

- I request an automatic 3-month (6-month, for 990-T corporation) extension of time until 2/15/05 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 7/01/03 , and ending 6/30/04 .
- If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period
- 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 \$ _____
 - 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 \$ _____
 - 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 A. Hester Title ▶ CPA Date ▶ 11/09/04

For Paperwork Reduction Act Notice, see instruction

Form **8868** (12-2000)