

Form **990**Department of the Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

OMB No 1545-0047

**2005**Open to Public  
Inspection**A** For the **2005** calendar year, or tax year beginning **JUL 1, 2005** and ending **JUN 30, 2006****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**HAP, INC.**

Number and street (or P.O. box if mail is not delivered to street address)

**322 MAIN STREET**

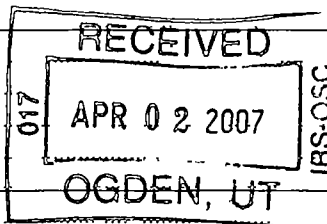
City or town, state or country, and ZIP + 4

**SPRINGFIELD, MA 01105****D** Employer identification number**04-2518368****E** Telephone number**(413) 785-1251****F** Accounting method ☐ Cash ☒ Accrual  
(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 ☒ No**H(b)** If "Yes," enter number of affiliates ▶ **N/A****H(c)** Are all affiliates included? **N/A** ☐ Yes ☐ No  
(If "No," attach a list.)**H(d)** Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No**I** Group Exemption Number ▶ **N/A****M** Check ☒ if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).**G** Website: ▶ **N/A****J** Organization type (check only one) ☒ 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 chooses to file a return, be sure to file a complete return. **Some states require a complete return****L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **35,120,737.****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

Revenue	1	Contributions, gifts, grants, and similar amounts received:			
	a	Direct public support	1a	186,802.	
	b	Indirect public support	1b		
	c	Government contributions (grants)	1c	33,140,910.	
	d	Total (add lines 1a through 1c) (cash \$ 33,327,712. noncash \$ )	1d	33,327,712.	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	1,168,921.	
	3	Membership dues and assessments	3		
	4	Interest on savings and temporary cash investments	4	94,994.	
	5	Dividends and interest from securities	5		
	6a	Gross rents SEE STATEMENT 1	6a	529,110.	
	b	Less: rental expenses SEE STATEMENT 2	6b	512,579.	
	c	Net rental income or (loss) (subtract line 6b from line 6a)	6c	16,531.	
7	Other investment income (describe ▶ )	7			
Expenses	8a	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other	
	b	Less: cost or other basis and sales expenses	8a		
	c	Gain or (loss) (attach schedule)	8b		
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8c		
	8d				
	9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>			
	a	Gross revenue (not including \$ of contributions reported on line 1a)	9a		
	b	Less: direct expenses other than fundraising expenses	9b		
	c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c		
	10a	Gross sales of inventory, less returns and allowances	10a		
	b	Less: cost of goods sold	10b		
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c		
Net Assets	11	Other revenue (from Part VII, line 103)	11		
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	34,608,158.	
	13	Program services (from line 44, column (B))	13	33,321,064.	
	14	Management and general (from line 44, column (C))	14	1,326,206.	
	15	Fundraising (from line 44, column (D))	15	49,684.	
	16	Payments to affiliates (attach schedule)	16		
	17	Total expenses (add lines 16 and 44, column (A))	17	34,696,954.	
	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	<88,796.>	
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	2,390,664.	
20	Other changes in net assets or fund balances (attach explanation)	20	0.		
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	2,301,868.		

523001  
02-03-06

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2005)

14100221 756950 36725

2005.08010 HAP, INC.

36725\_2

SCANNED APR 18 2007

**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.

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) (cash \$ <u>0</u> , noncash \$ <u>0</u> ) If this amount includes foreign grants, check here <input type="checkbox"/>				
23 Specific assistance to individuals (attach schedule)	23 28,656,951.	28,656,951.	STATEMENT 5	
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc **	25 421,707.	72,930.	348,777.	0.
26 Other salaries and wages	26 2,858,582.	2,470,646.	380,328.	7,608.
27 Pension plan contributions	27 99,778.	80,482.	19,067.	229.
28 Other employee benefits	28 425,447.	347,901.	76,625.	921.
29 Payroll taxes	29 284,622.	229,580.	54,388.	654.
30 Professional fundraising fees	30			
31 Accounting fees	31 53,920.	53,920.		
32 Legal fees	32			
33 Supplies	33 99,197.	64,683.	6,379.	28,135.
34 Telephone	34 45,043.	19,992.	24,926.	125.
35 Postage and shipping	35 78,159.	74,390.	3,097.	672.
36 Occupancy	36 86,508.	26,298.	59,406.	804.
37 Equipment rental and maintenance	37 54,870.		54,870.	
38 Printing and publications	38			
39 Travel	39 52,416.	45,115.	7,176.	125.
40 Conferences, conventions, and meetings	40			
41 Interest	41 128,968.	79,228.	49,740.	
42 Depreciation, depletion, etc (attach schedule)	42 160,108.	43,837.	116,271.	
43 Other expenses not covered above (itemize):				
a	43a			
b	43b			
c	43c			
d	43d			
e	43e			
f	43f			
g SEE STATEMENT 3	43g 1,190,678.	1,055,111.	125,156.	10,411.
44 Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44 34,696,954.	33,321,064.	1,326,206.	49,684.

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 ☒ NoIf "Yes," enter (i) the aggregate amount of these joint costs \$ N/A; (ii) the amount allocated to Program services \$ N/A;(iii) the amount allocated to Management and general \$ N/A; and (iv) the amount allocated to Fundraising \$ N/A

Form 990 (2005)

\*\* SEE STATEMENT 4

**Part III Statement of Program Service Accomplishments** (See the instructions)

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.

What is the organization's primary exempt purpose? ► **SEE STATEMENT 6**

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.)

**Program Service Expenses**  
(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)

**a THE AFFORDABLE HOUSING PROGRAM REHABS AFFORDABLE HOUSING FOR FIRST TIME HOME BUYERS.**

(Grants and allocations \$ ) If this amount includes foreign grants, check here ► ☐

572,476.

**b THE MOD REHAB PROG. PROVIDES A RENT SUPPLEMENT FOR SPECIFIC APT COMPLEXES OCCUPIED BY QUALIF'D LOW-INCOME TENANTS. THE RENT SUPPLEMENT ALLOWS THE TENANT TO PAY A REDUCED RENT BASED ON THEIR ANNUAL INCOME.**

(Grants and allocations \$ ) If this amount includes foreign grants, check here ► ☐

5,484,927.

**c MASS RESIDENTIAL VOUCHER PROGRAM PROVIDES RENTAL ASSISTANCE TO QUALIFIED LOW-INCOME APPLICANTS, BASED ON REQUIREMENTS ESTABLISHED BY THE STATE. THE RENT SUPPLEMENT ALLOWS THE APPLICANT TO OBTAIN AFFORDABLE HSNG.**

(Grants and allocations \$ ) If this amount includes foreign grants, check here ► ☐

1,516,501.

**d FEDERAL HSNG VOUCHER PROGRAM PROVIDES A RENT SUPPLEMENT TO QUALIF'D LOW INCOME APPLICANTS, BASED ON REQMENTS EST BY HUD THE SUPPLEMENT PAYS THE DIFF B/N FAIR MKT RENTS & APPLICANT PORTION BASED ON INCOME.**

(Grants and allocations \$ ) If this amount includes foreign grants, check here ► ☐

22,692,309.

**e Other program services (attach schedule) SEE STATEMENT 7**

(Grants and allocations \$ ) If this amount includes foreign grants, check here ► ☐

3,054,851.

**f Total of Program Service Expenses** (should equal line 44, column (B), Program services) ► **33,321,064.**

Form 990 (2005)

**Part IV Balance Sheets** (See the instructions.)

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year	(B) End of year
Assets	45 Cash - non-interest-bearing	111,599.	45 361,181.
	46 Savings and temporary cash investments	4,789,439.	46 5,220,587.
	47 a Accounts receivable	47a 1,029,165.	
	b Less: allowance for doubtful accounts	47b 169,522.	47c 859,643.
	48 a Pledges receivable	48a	48c
	b Less: allowance for doubtful accounts	48b	49
	49 Grants receivable		50
	50 Receivables from officers, directors, trustees, and key employees		
	51 a Other notes and loans receivable	51a 100,004.	
	b Less: allowance for doubtful accounts	51b	51c 100,004.
	52 Inventories for sale or use		52
	53 Prepaid expenses and deferred charges		53
	54 Investments - securities	Cost FMV	54
	Liabilities	55 a Investments - land, buildings, and equipment basis	55a 3,893,845.
b Less: accumulated depreciation STMT 8		55b 899,874.	55c 2,993,971.
56 Investments - other		SEE STATEMENT 9	56 178,950.
57 a Land, buildings, and equipment, basis		57a 1,892,573.	
b Less: accumulated depreciation STMT 10		57b 642,221.	57c 1,250,352.
58 Other assets (describe SEE STATEMENT 11)		926,691.	58 3,233,374.
59 Total assets (must equal line 74). Add lines 45 through 58		11,854,657.	59 14,198,062.
60 Accounts payable and accrued expenses		191,305.	60 466,423.
61 Grants payable			61
62 Deferred revenue		2,810,089.	62 2,930,969.
Net Assets or Fund Balances	63 Loans from officers, directors, trustees, and key employees		63
	64 a Tax-exempt bond liabilities		64a
	b Mortgages and other notes payable STMT 12 STMT 13	5,691,670.	64b 7,562,739.
	65 Other liabilities (describe SEE STATEMENT 14)	770,929.	65 936,063.
	66 Total liabilities. Add lines 60 through 65	9,463,993.	66 11,896,194.
	Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74	
67 Unrestricted		2,209,065.	67 2,289,868.
68 Temporarily restricted		181,599.	68 12,000.
69 Permanently restricted			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)		2,390,664.	73 2,301,868.
74 Total liabilities and net assets/fund balances. Add lines 66 and 73		11,854,657.	74 14,198,062.

Form 990 (2005)

### Part IV-A

c. Total revenue (Part I, line 12). Add lines c and d.			e
<b>Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return</b>			

**Part V-A** **Current Officers, Directors, Trustees, and Key Employees** (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

Form **990** (2005)

Yes	No
-----	----

14

75b

**X**

75c

**X**

75d

**X**

**(A) Name and address**

NONE

### (B) Loans and Advances

**(C) Compensation**

(D) Contributions to employee benefit plans & deferred compensation plans

	(E) Expense account and other allowances
--	--

	Yes	No
--	-----	----

76

**X**

77

**X**

78a

**x**

N/A

78b

1

79

**x**

80a

SEE STATEMENT 17

and check whether it is ☐ exempt or ☐ nonexempt

81a

0

81b

**x**

**Earn**

**Part VI Other Information** (continued)

		Yes	No
82 a	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?	82a	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)	82b	6,255.
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	N/A
	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		
c	Dues, assessments, and similar amounts from members	85c	N/A
d	Section 162(e) lobbying and political expenditures	85d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	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?	85h	N/A
86	501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12	86a	N/A
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87	501(c)(12) organizations Enter a Gross income from members or shareholders	87a	N/A
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	N/A
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	88	X
89 a	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) organizations. 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	89b	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.
90 a	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, 2005	90b	112
91 a	The books are in care of ▶ PETER GAGLIARDI Telephone no. ▶ 413-785-1251 Located at ▶ 322 MAIN STREET, SPRINGFIELD, MA ZIP + 4 ▶ 01105		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts	91b	X
c	At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country ▶ N/A	91c	X
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 ▶ 92		N/A

Form 990 (2005)

**Part VII Analysis of Income-Producing Activities** (See the instructions)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue					
a SEE STATEMENT 18					1,168,921.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	94,994.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					16,531.
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.		94,994.	1,185,452.
105 Total (add line 104, columns (B), (D), and (E))					1,280,446.

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 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 20

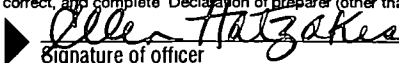

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See the instructions)

(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 STATEMENT 19	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See 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		3/20/07 Date	
Paid Preparer's Use Only	 Preparer's signature		2-26-07 Date	
	Firm's name (or yours if self-employed), address, and ZIP + 4 KOSTIN, RUFFKESS & COMPANY, LLC 76 Patterson Park Rd Farmington CT		Check if self-employed <input type="checkbox"/> Preparer's SSN or PTIN 048-62-0768 EIN 06-0754920 Phone no. 860 678-6000	



**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Organization Exempt Under Section 501(c)(3)**

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

**Supplementary Information-(See separate instructions.)**  
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

**2005**

Name of the organization

HAP, INC.

Employer identification number

04 2518368

**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 benefit plans & deferred compensation	(e) Expense account and other allowances
<u>NANCY RIVERA</u>	<u>PROGRAM DIR</u>			
<u>322 MAIN STREET, SPRINGFIELD, MA 0110</u>	<u>40.00</u>	<u>62,133.</u>	<u>9,826.</u>	
<u>SARAH PAGE</u>	<u>PROGRAM DIR</u>			
<u>322 MAIN STREET, SPRINGFIELD, MA 0110</u>	<u>40.00</u>	<u>66,207.</u>	<u>8,276.</u>	
<u>CHERYL BOUSQUET</u>	<u>CONTROLLER</u>			
<u>322 MAIN STREET, SPRINGFIELD, MA 0110</u>	<u>40.00</u>	<u>48,972.</u>	<u>5,021.</u>	
<u>MICHELLE MCADARAGH</u>	<u>PROGRAM DIR</u>			
<u>322 MAIN STREET, SPRINGFIELD, MA 0110</u>	<u>40.00</u>	<u>53,194.</u>	<u>9,407.</u>	

Total number of other employees paid over \$50,000 ▶

0

**Part II-A 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
<u>DIETZ &amp; CO ARCHITECTS INC.</u>		
<u>SPRINGFIELD, MA</u>	<u>ARCHITECTS</u>	<u>100,800.</u>
<u>KOSTIN, RUFFKESS &amp; CO. LLC</u>		
<u>FARMINGTON, CT</u>	<u>AUDIT &amp; TAX</u>	<u>60,795.</u>

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

0

**Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services**

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
<u>JOHN WALSH CONSTRUCTION</u>		
<u>SPRINGFIELD, MA</u>	<u>GENERAL CONTRACTOR</u>	<u>90,040.</u>

Total number of other contractors receiving over \$50,000 for other services ▶

0

**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 ► \$ _____ \$ <u>5,000.</u> (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) <b>VI-B, LINE I</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.	<b>1</b>	<b>X</b>
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?	<b>2a</b>	<b>X</b>
b Lending of money or other extension of credit?	<b>2b</b>	<b>X</b>
c Furnishing of goods, services, or facilities?	<b>2c</b>	<b>X</b>
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? <b>SEE PART V-A, FORM 990</b>	<b>2d</b>	<b>X</b>
e Transfer of any part of its income or assets?	<b>2e</b>	<b>X</b>
3 a 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.)	<b>3a</b>	<b>X</b>
b Do you have a section 403(b) annuity plan for your employees?	<b>3b</b>	<b>X</b>
c During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?	<b>3c</b>	<b>X</b>
4 a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	<b>4a</b>	<b>X</b>
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?	<b>4b</b>	<b>X</b>

**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) sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization: ☐ Type 1 ☐ Type 2 ☐ Type 3

Provide the following information about the supported organizations. (See page 6 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) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	33329890.	34779468.	32841191.	32337487.	133288036.
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	2,352,142.	2,460,841.	1,871,963.	843,721.	7,528,667.
18 Gross income from interest, dividends, amounts received from payments 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	568,063.	565,492.	543,061.	458,808.	2,135,424.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
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					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	36250095.	37805801.	35256215.	33640016.	142952127.
24 Line 23 minus line 17	33897953.	35344960.	33384252.	32796295.	135423460.
25 Enter 1% of line 23	362,501.	378,058.	352,562.	336,400.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 2,708,469.
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 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 0.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 135423460.
d Add: Amounts from column (e) for lines: 18 2,135,424. 19					26d 2,135,424.
22 26b					26e 133288036.
e Public support (line 26c minus line 26d total)					26f 98.4232%
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					
(2004) (2003) (2002) (2001)					
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 11b, 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					
(2004) (2003) (2002) (2001)					
c Add: Amounts from column (e) for lines: 15 16					27c N/A
17 20 21					27d N/A
d Add: Line 27a total and line 27b total					27e N/A
e Public support (line 27c total minus line 27d total)					
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					27f N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, 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.

NONE

**Part V Private School Questionnaire** (See page 7 of the instructions.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

**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?

Yes No

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.)

**34 a** 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

Schedule A (Form 990 or 990-EZ) 2005

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

N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

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.)

36 Total lobbying expenditures to influence public opinion (grassroots lobbying)

37 Total lobbying expenditures to influence a legislative body (direct lobbying)

38 Total lobbying expenditures (add lines 36 and 37)

39 Other exempt purpose expenditures

40 Total exempt purpose expenditures (add lines 38 and 39)

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)

43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36

44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38

**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				N/A
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

**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 instructions.)

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
	X	
	X	
	X	
	X	
	X	
	X	
X		5,000.
	X	
		5,000.

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

**SEE STATEMENT 23**

**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?

- (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

N/A

[illegible]

- 52 a** 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:

N/A

[illegible]

## Depreciation and Amortization Detail SPRINGFIELD MA

RENT

1

Asset Number	Description of property							
	Date placed in service	Method/ IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
	OTHER							
266	09/04	SL	20.00	16	31,250.		903.	1,084.
267	09/04	SL	40.00	16	5,372.		155.	186.
268	09/04	SL	40.00	16	620.		18.	22.
269	10/04	SL	20.00	16	338.		9.	12.
270	10/04	SL	20.00	16	1,099.		29.	38.
271	10/04	SL	40.00	16	3,464.		90.	120.
272	11/04	SL	40.00	16	1,106.		26.	39.
273	11/04	SL	20.00	16	3,500.		156.	233.
274	06/05	SL	40.00	16	7,800.		43.	520.
275	03/05	SL	40.00	16	4,911.		109.	327.
	* 990 RENTAL TOTAL OTHER				59,460.	0.	534.	3,450.
	DMR I							
	BUILDINGS							
207	BUILDING (1)							
	VARI	ESSL	30.00	16	189,994.		88,073.	6,333.
208	BUILDING (2)							
	VARI	ESSL	30.00	16	164,831.		77,215.	5,494.
209	BUILDING (3)							
	VARI	ESSL	30.00	16	219,109.		101,647.	7,304.
210	BUILDING (4)							
	VARI	ESSL	30.00	16	210,393.		99,108.	7,013.
211	BUILDING (5)							
	VARI	ESSL	30.00	16	176,373.		82,241.	5,879.
212	BUILDING (6)							
	VARI	ESSL	30.00	16	178,910.		84,190.	5,964.
	* 990 RENTAL TOTAL BUILDINGS				1,139,610.	0.	532,474.	37,987.
	FURNITURE & FIXTURES							
213	IMPROVEMENTS - BUILDING (4)							
	0117	94SL	40.00	16	3,447.		1,034.	86.
214	IMPROVEMENTS - BUILDING (4)							
	0117	94SL	40.00	16	2,611.		783.	65.
215	IMPROVEMENTS - BUILDING (4)							
	0701	96SL	40.00	16	1,582.		356.	40.
216	IMPROVEMENTS - BUILDING (4)							
	0201	97SL	40.00	16	5,120.		1,152.	128.
217	IMPROVEMENTS - BUILDING (6)							
	0312	98SL	40.00	16	1,457.		237.	36.

518261  
05-01-05

# - Current year section 179 (D) - Asset disposed

## Depreciation and Amortization Detail SPRINGFIELD MA

RENT

1

Asset Number	Description of property							
	Date placed in service	Method/ IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
218	IMPROVEMENTS - BUILDING (LUDLOW)							
	072799SL		40.0016		5,310.		797.	133.
219	IMPROVEMENTS - BUILDING (LUDLOW)							
	072799SL		40.0016		590.		89.	15.
220	IMPROVEMENTS - BUILDING (GREENFIELD)							
	042900SL		40.0016		5,431.		815.	136.
221	IMPROVEMENTS - BUILDING (GREENFIELD)							
	050800SL		40.0016		7,178.		1,077.	179.
222	IMPROVEMENTS - BUILDING (GREENFIELD)							
	062000SL		40.0016		6,061.		909.	152.
225	IMPROVEMENTS - BUILDING (DEWITT)							
	050201SL		40.0016		2,340.		292.	59.
226	IMPROVEMENTS - BUILDING (LUDLOW)							
	050201SL		40.0016		1,435.		179.	36.
227	ROOF (DEWITT)							
	070201SL		40.0016		5,400.		540.	135.
228	BUILDING IMPROVEMENTS							
	050602SL		40.0016		1,586.		159.	40.
229	BUILDING IMPROVEMENTS							
	050602SL		40.0016		15,200.		1,520.	380.
232	BUILDING IMPROVEMENTS							
	082802SL		40.0016		2,000.		150.	50.
233	BUILDING IMPROVEMENTS							
	091002SL		40.0016		920.		69.	23.
234	BUILDING IMPROVEMENTS							
	092402SL		40.0016		4,300.		323.	108.
235	HEATING & COOLING							
	103102SL		40.0016		605.		45.	15.
236	BUILDING IMPROVEMENTS							
	110802SL		40.0016		3,300.		248.	83.
237	BUILDING IMPROVEMENTS							
	123102SL		40.0016		1,658.		124.	41.
238	CARPET							
	021803SL		40.0016		2,308.		173.	58.
239	CARPET							
	021803SL		40.0016		2,337.		175.	58.
240	HEATING & COOLING							
	033103SL		40.0016		2,372.		178.	59.
241	CARPET							
	053003SL		40.0016		3,327.		250.	83.
252	HEATING & COOLING							
	103103SL		40.0016		2,390.		60.	60.
253	HEATING & COOLING							
	111903SL		40.0016		4,670.		117.	117.
254	CARPET							
	113003SL		40.0016		5,103.		128.	128.
255	HEATING & COOLING							
	043004SL		40.0016		2,068.		52.	52.
256	BUILDING IMPROVEMENTS							
	063004SL		40.0016		2,250.		56.	56.
261	LANDSCAPING (BRAY)							
	073004SL		20.0016		3,100.		78.	155.
262	TURNER							
	102004SL		40.0016		2,350.		29.	59.

516261  
05-01-05

# - Current year section 179 (D) - Asset disposed



## Depreciation and Amortization Detail SPRINGFIELD MA

RENT

1

Asset Number	Description of property							
	Date placed in service	Method/ IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
263	WALSH							
	11/30/04	SL	40.00	16	720.		9.	18.
264	REIDY							
	11/30/04	SL	40.00	16	719.		9.	18.
265	ABC MASONRY							
	05/31/05	SL	20.00	16	11,100.		46.	555.
298	SALAMON FLOORING INC.							
	10/31/05	SL	10.00	16	5,795.			386.
	* 990 RENTAL TOTAL FURNITURE & FIXTURES							
					128,140.	0.	12,258.	3,802.
	LAND							
201	LAND (1)							
		VARIESL			45,000.			0.
202	LAND (2)							
		VARIESL			40,000.			0.
203	LAND (3)							
		VARIESL			20,825.			0.
204	LAND (4)							
		VARIESL			41,310.			0.
205	LAND (5)							
		VARIESL			50,000.			0.
206	LAND (6)							
		VARIESL			41,440.			0.
	* 990 RENTAL TOTAL LAND							
					238,575.	0.	0.	0.
	* 990 RENTAL TOTAL - DMR I							
					1,506,325.	0.	544,732.	41,789.
	THE LORRAINE							
	BUILDINGS							
223	BUILDING (LORRAINE)							
	12/31/99	SL	40.00	16	372,000.		51,150.	9,300.
224	BUILDING (LORRAINE)							
		VARIESL	40.00	16	1,273,612.		142,360.	31,840.
	* 990 RENTAL TOTAL BUILDINGS							
					1,645,612.	0.	193,510.	41,140.
	FURNITURE & FIXTURES							
231	BUILDING IMPROVEMENTS (LORRAINE)							
	07/01/02	SL	40.00	16	1,614.		120.	40.
258	BUILDING IMPROVEMENTS							
	12/23/03	SL	40.00	16	2,000.		50.	50.
	* 990 RENTAL TOTAL FURNITURE & FIXTURES							
					3,614.	0.	170.	90.
	MACHINERY & EQUIPMENT							
230	CLOSED CIRCUIT TELEVISION							
	06/13/02	SL	5.00	16	5,442.		3,264.	1,088.
257	BUILDING EQUIPMENT							
	08/30/03	SL	5.00	16	880.		176.	176.
276	BUILDING EQUIPMENT							
	03/01/06	SL	5.00	16	2,783.			185.

516281  
05-01-05

# - Current year section 179 (D) - Asset disposed

## Depreciation and Amortization Detail SPRINGFIELD MA

RENT 1

Asset Number	Description of property							
	Date placed in service	Method/IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
	<b>* 990 RENTAL TOTAL MACHINERY &amp; EQUIPMENT</b>							
					9,105.	0.	3,440.	1,449.
	<b>* 990 RENTAL TOTAL - THE LORRAINE</b>							
					1,658,331.	0.	197,120.	42,679.
	<b>DMR IV</b>							
	<b>BUILDINGS</b>							
244	<b>BUILDING - STRONG</b>							
	121802	SL	27.50	16	125,404.		12,302.	4,560.
245	<b>BUILDING - PLUMTREE</b>							
	121802	SL	27.50	16	237,953.		21,632.	8,653.
246	<b>BUILDING - STRONG</b>							
	093003	SL	27.50	16	9,745.		620.	354.
247	<b>BUILDING - STRONG</b>							
	093003	SL	27.50	16	2,727.		173.	99.
248	<b>BUILDING - STRONG</b>							
	093003	SL	27.50	16	175,488.		11,167.	6,381.
251	<b>BUILDING ADDITIONS</b>							
	121802	SL	27.50	16	17,342.		1,262.	631.
	<b>* 990 RENTAL TOTAL BUILDINGS</b>							
					568,659.	0.	47,156.	20,678.
	<b>FURNITURE &amp; FIXTURES</b>							
249	<b>BLDG IMPROVEMENTS</b>							
	043004	SL	27.50	16	1,045.		38.	38.
250	<b>BLDG IMPROVEMENTS</b>							
	052404	SL	27.50	16	4,840.		176.	176.
260	<b>SIMONOKO FLOOR--BLDG IMPROVEMENT</b>							
	012405	SL	10.00	16	1,041.		43.	104.
277	<b>SALAMON FLOORING INC.</b>							
	081205	SL	10.00	16	5,735.			502.
278	<b>ABC MASONRY</b>							
	091905	SL	10.00	16	3,200.			253.
279	<b>SALAMON FLOORING INC.</b>							
	111405	SL	10.00	16	6,489.			406.
	<b>* 990 RENTAL TOTAL FURNITURE &amp; FIXTURES</b>							
					22,350.	0.	257.	1,479.
	<b>LAND</b>							
242	<b>LAND (1) - STRONG</b>							
	121802	L			57,000.			0.
243	<b>LAND (2) - PLUMTREE</b>							
	121802	L			41,200.			0.
259	<b>LAND</b>							
	070692	L			30,000.			0.
	<b>* 990 RENTAL TOTAL LAND</b>							
					128,200.	0.	0.	0.
	<b>* 990 RENTAL TOTAL - DMR IV</b>							
					719,209.	0.	47,413.	22,157.
	<b>* GRAND TOTAL 990 RENTAL DEPR</b>							
					3,943,325.	0.	789,799.	110,075.

516261  
05-01-05

# - Current year section 179 (D) - Asset disposed

Asset Number	Description of property							
	Date placed in service	Method/IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
	<b>BUILDINGS</b>							
2	<b>BUILDING IMPROVEMENTS - PROSPECT</b>							
	VARI	ESSL	20.00	16	27,150.		18,309.	1,358.
15	<b>BUILDING IMPROVEMENTS</b>							
	01	02SL	5.00	16	33,690.		23,583.	6,738.
16	<b>BUILDING IMPROVEMENTS</b>							
	04	02SL	5.00	16	16,902.		10,985.	3,380.
17	<b>BUILDING IMPROVEMENTS</b>							
	05	02SL	5.00	16	1,451.		918.	290.
19	<b>BLDG IMPROVEMENTS</b>							
	VARI	ESSL	5.00	16	67,067.		61,477.	5,590.
34	<b>PORCHES</b>							
	07	02SL	10.00	16	3,875.		1,960.	388.
35	<b>HOT WATER HEATER</b>							
	04	03SL	10.00	16	1,218.		418.	122.
36	<b>FLOORING</b>							
	06	03SL	10.00	16	4,245.		877.	425.
57	<b>BUILDING IMPROVEMENTS</b>							
	07	03SL	27.50	16	8,225.		598.	299.
	<b>* 990 PAGE 2 TOTAL BUILDINGS</b>							
					163,823.	0.	119,125.	18,590.
	<b>FURNITURE &amp; FIXTURES</b>							
18	<b>WB MASON-FURNITURE &amp; FIXTURES</b>							
	01	01SL	5.00	16	4,744.		3,321.	949.
38	<b>FURNITURE AND FIXTURES</b>							
	01	03SL	5.00	16	1,170.		429.	234.
54	<b>FURNITURE AND FIXTURES</b>							
	11	03SL	5.00	16	1,080.		216.	216.
294	<b>PROP MGMT FURNITURE</b>							
	03	06SL	5.00	16	1,683.			337.
	<b>* 990 PAGE 2 TOTAL FURNITURE &amp; FIXTURES</b>							
					8,677.	0.	3,966.	1,736.
	<b>MACHINERY &amp; EQUIPMENT</b>							
3	<b>COMPUTER/PRINTER</b>							
	11	99SL	3.00	16	1,608.		1,608.	0.
4	<b>COMPUTER</b>							
	03	00SL	3.00	16	2,840.		2,840.	0.
5	<b>COMPUTER SOFTWARE</b>							
	03	00SL	3.00	16	4,791.		4,791.	0.
6	<b>NOTEBOOK COMPUTER</b>							
	04	01SL	3.00	16	2,094.		2,094.	0.
7	<b>COMPUTER SOFTWARE</b>							
	11	01SL	3.00	16	61,582.		61,582.	0.
8	<b>NOTEBOOK COMPUTER</b>							
	11	01SL	3.00	16	2,144.		2,144.	0.
9	<b>WHALLEY/COMPUTER</b>							
	02	02SL	3.00	16	10,295.		10,295.	0.
10	<b>PRINTER</b>							
	03	02SL	3.00	16	1,515.		1,515.	0.
11	<b>COMPUTER</b>							
	05	02SL	3.00	16	1,198.		1,198.	0.

Asset Number	Description of property							
	Date placed in service	Method/IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
12	DATABASE							
	05	02SL	3.00	16	2,335.		2,334.	0.
13	TELEDEX							
	03	02SL	3.00	16	5,091.		5,091.	0.
14	TELEDEX							
	0630	02SL	3.00	16	49,599.		42,411.	0.
20	COMPUTER EQUIPMENT							
	12	00SL	3.00	16	25,910.		25,191.	0.
21	COMPUTER							
	03	01SL	3.00	16	1,164.		1,164.	0.
22	COMPUTER							
	05	01SL	3.00	16	8,885.		8,885.	0.
23	ALTERNATE ADV COMPUTER							
	06	01SL	3.00	16	1,595.		1,152.	0.
24	COMPUTERS							
	04	02SL	3.00	16	4,792.		2,529.	0.
25	BLACKBAUD SETUP & TRAINING							
	01	02SL	3.00	16	7,840.		7,840.	0.
26	COMPUTER							
	08	02SL	5.00	16	3,845.		3,226.	619.
27	COMPUTER							
	11	02SL	5.00	16	1,836.		1,387.	367.
28	COMPUTER							
	04	03SL	5.00	16	1,850.		1,141.	370.
29	COMPUTER							
	05	03SL	5.00	16	1,045.		615.	209.
30	COMPUTER							
	04	03SL	5.00	16	499.		128.	100.
31	COMPUTER							
	03	03SL	5.00	16	650.		419.	130.
37	COMMUNICATION EQUIPMENT							
	06	03SL	5.00	16	1,685.		1,046.	337.
39	COMPUTER							
	04	02SL	5.00	16	4,792.		4,219.	573.
40	COMPUTER							
	12	03SL	4.00	16	3,530.		1,398.	883.
41	COMPUTER							
	01	04SL	4.00	16	2,471.		927.	618.
42	COMPUTER							
	02	04SL	4.00	16	5,926.		2,099.	1,482.
43	COMPUTER							
	03	04SL	4.00	16	2,769.		923.	692.
44	COMPUTER							
	05	04SL	3.00	16	1,794.		787.	598.
45	COMPUTER							
	06	04SL	3.00	16	903.		326.	301.
46	COMPUTER							
	06	04SL	3.00	16	1,303.		470.	434.
47	COMPUTER EQUIPMENT							
	07	03SL	3.00	16	714.		517.	197.
48	COMPUTER EQUIPMENT							
	03	04SL	2.50	16	1,453.		805.	581.
55	COMPUTER SOFTWARE							
	01	04SL	3.00	16	102,040.		52,545.	34,013.

Asset Number	Description of property							
	Date placed in service	Method/IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
56	COMPUTER SOFTWARE							
01	04	SL	3.00	16	23,935.		12,325.	7,978.
58	50-XP PROFS							
08	03	SL	4.00	16	3,320.		1,591.	830.
59	3 PRINTERS							
08	03	SL	4.00	16	4,866.		2,332.	1,217.
60	25 COMPUTERS AND SCREENS							
10	03	SL	4.00	16	31,509.		13,785.	7,877.
61	DIGITAL PROJECTOR							
10	03	SL	4.00	16	1,829.		800.	457.
62	FILE SERVERS							
11	03	SL	4.00	16	4,864.		2,027.	1,216.
63	COMPUTER SOFTWARE							
11	03	SL	4.00	16	3,762.		1,568.	941.
64	COMPUTER SOFTWARE							
11	03	SL	4.00	16	893.		372.	223.
65	5DW FLAT FILE FOR PLANS							
12	03	SL	4.00	16	1,521.		1,040.	380.
67	COMPUTER							
08	04	SL	3.00	16	776.		237.	259.
68	SOFTWARE							
12	04	SL	3.00	16	2,046.		398.	682.
69	DESKTOP COMPUTERS							
02	05	SL	3.00	16	10,049.		1,396.	3,350.
70	BLACKBAUD MODULE							
02	05	SL	3.00	16	1,158.		161.	386.
71	CDW-GOVERNMENT							
02	05	SL	3.00	16	2,042.		284.	681.
72	COLOR PRINTER							
02	05	SL	3.00	16	1,495.		208.	498.
73	COMPUTER- LAPTOPS							
02	05	SL	3.00	16	4,743.		659.	1,581.
74	BELKIN SWITCH							
04	05	SL	3.00	16	508.		42.	169.
75	SERVER							
05	05	SL	5.00	16	3,929.		131.	786.
76	PRI CARD							
12	04	SL	5.00	16	3,080.		359.	616.
77	PROPERTY MGMT SYSTEM							
06	01	05	SL	5.00	16	13,030.	217.	2,606.
280	ADP SERVER							
09	05	SL	3.00	16	4,567.			1,522.
281	6 PC'S WITH MONITORS							
10	05	SL	3.00	16	5,482.			1,827.
282	QUANTUM BACKUP DEVICE							
10	05	SL	3.00	16	4,347.			1,449.
283	EXCHANGE LICENSE UPGRADE							
10	05	SL	3.00	16	1,675.			558.
284	LAPTOP - LB							
01	06	SL	3.00	16	1,464.			488.
285	PAYROLL SOFTWARE							
02	06	SL	3.00	16	4,950.			1,650.
286	SCREWDRIVER SOFTWARE							
02	06	SL	3.00	16	1,798.			599.

Asset Number	Description of property							
	Date placed in service	Method/IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
287	LASERJET PRINTER							
	02	06SL	3.00	16	1,330.			443.
288	P/R CONV CONSULT SVCS							
	02	06SL	3.00	16	6,638.			2,213.
289	CDW-G							
	04	06SL	3.00	16	15,056.			5,019.
290	VOICEMAIL SYSTEM							
	05	0106SL	4.00	16	14,751.			3,688.
299	NEXTEL - PHONES							
	06	0106SL	3.00	16	3,700.			103.
	* 990 PAGE 2 TOTAL MACHINERY & EQUIPMENT							
					519,496.	0.	297,574.	94,796.
	TRANSPORTATION EQUIPMENT							
66	VEHICLE							
	11	04SL	3.00	16	23,885.		5,308.	7,962.
	* 990 PAGE 2 TOTAL TRANSPORTATION EQUIPMENT							
					23,885.	0.	5,308.	7,962.
	LAND							
1	LAND - PROSPECT SHELTER							
		VARIESL			20,889.			0.
33	LAND							
	06	03SL	.000	16	265,000.			0.
	* 990 PAGE 2 TOTAL LAND							
					285,889.	0.	0.	0.
	PROGRAM SERVICES							
49	BUILDING IMPROVEMENTS							
	12	03SL	30.00	16	10,347.		864.	345.
50	BUILDING IMPROVEMENTS							
	04	04SL	30.00	16	18,671.		941.	622.
51	BUILDING IMPROVEMENTS							
	04	04SL	15.00	16	59,512.		5,951.	3,967.
52	BUILDING IMPROVEMENTS							
	04	04SL	30.00	16	3,300.		165.	110.
53	BUILDING IMPROVEMENTS							
	04	04SL	30.00	16	10,373.		691.	346.
	* 990 PAGE 2 TOTAL PROGRAM SERVICES							
					102,203.	0.	8,612.	5,390.
	MANAGEMENT AND GENERAL							
32	BUILDING							
	06	03SL	30.00	16	756,416.		51,767.	25,214.
291	CARPET/STAIR VINYL							
	08	05SL	10.00	16	12,263.			1,226.
292	CARPETS PROP MGMT OFCS							
	10	05SL	10.00	16	4,371.			437.
293	BUILDING IMPROVEMENTS							
	01	06SL	30.00	16	15,550.			518.
	* 990 PAGE 2 TOTAL MANAGEMENT AND GENERAL							
					788,600.	0.	51,767.	27,395.
	* GRAND TOTAL 990 PAGE 2 DEPR							
					1,892,573.	0.	486,352.	155,869.

FORM 990	RENTAL INCOME	STATEMENT	1
----------	---------------	-----------	---

KIND AND LOCATION OF PROPERTY	ACTIVITY NUMBER	GROSS RENTAL INCOME
SPRINGFIELD MA	1	529,110.
TOTAL TO FORM 990, PART I, LINE 6A		529,110.

FORM 990	RENTAL EXPENSES	STATEMENT	2
----------	-----------------	-----------	---

DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
DEPRECIATION		110,075.	
PAYROLL		37,005.	
INTEREST		106,663.	
INSURANCE		12,693.	
PROFESSIONAL SERVICES		33,269.	
OTHER TAXES		46,407.	
TELEPHONE		6,508.	
FRINGES AND TAXES		8,515.	
TRAVEL		2,288.	
AUDIT		6,000.	
OFFICE SUPPLIES		138.	
OTHER EXPENSES		5,272.	
BAD DEBT		3,660.	
UTILITIES		32,076.	
REPAIRS AND MAINTENANCE		102,010.	
- SUBTOTAL -	1		512,579.
TOTAL TO FORM 990, PART I, LINE 6B			512,579.

FORM 990	OTHER EXPENSES	STATEMENT	3
----------	----------------	-----------	---

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
PROFESSIONAL SERVICES	200,108.	146,913.	48,054.	5,141.
OTHER TAXES	23,851.		19,276.	4,575.
INSURANCE	27,066.	13,834.	13,195.	37.
LICENSES, DUES AND FEES	39,221.	36,658.	2,416.	147.

HAP, INC.

04-2518368

PROGRAM EXPENSE	130,529.	109,530.	20,999.	
EMPLOYEE TRAINING	18,703.	17,953.	349.	401.
CONSTRUCTION COSTS	597,025.	597,025.		
MATERIALS PRODUCTION PROVIDER	44,162.	44,162.		
REIMBURSEMENTS	75,598.	54,621.	20,867.	110.
OTHER EXPENSES	18,365.	18,365.		
BAD DEBT	16,050.	16,050.		
TOTAL TO FM 990, LN 43	<u>1,190,678.</u>	<u>1,055,111.</u>	<u>125,156.</u>	<u>10,411.</u>



FORM 990

OFFICER COMPENSATION ALLOCATION  
PART II, LINE 25

STATEMENT 4

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
PETER GAGLIARDI	106,577.	12,481.	5,893.	124,951.
A. PROGRAM SERVICES				
B. MANAGEMENT AND GENERAL	106,577.	12,481.	5,893.	124,951.
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
ELLEN HATZAKIS	70,181.	6,037.		76,218.
A. PROGRAM SERVICES				
B. MANAGEMENT AND GENERAL	70,181.	6,037.		76,218.
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
LINDA MORLEY	69,431.	4,798.		74,229.
A. PROGRAM SERVICES				
B. MANAGEMENT AND GENERAL	69,431.	4,798.		74,229.
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
JAMES REIS	67,386.	5,993.		73,379.
A. PROGRAM SERVICES				
B. MANAGEMENT AND GENERAL	67,386.	5,993.		73,379.
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
KAREN ANN LEVEILLE	67,016.	5,914.		72,930.
A. PROGRAM SERVICES	67,016.	5,914.		72,930.
B. MANAGEMENT AND GENERAL				
C. FUNDRAISING				

TOTAL PROGRAM SERVICES				72,930.
TOTAL MANAGEMENT AND GENERAL				348,777.
TOTAL FUNDRAISING				
TOTAL OFFICER, ETC., COMPENSATION INCLUDED ON PARTS V-A AND V-B				421,707.

FORM 990	SPECIFIC ASSISTANCE TO INDIVIDUALS	STATEMENT	5
----------	------------------------------------	-----------	---

DESCRIPTION	AMOUNT
RENTAL ASSISTANCE PAYMENTS PAID TO LANDLORDS ON THE BEHALF OF QUALIFIED LOW-INCOME INDIVIDUALS	28,656,951.
TOTAL TO FORM 990, PART II, LINE 23	28,656,951.

---



---

FORM 990      STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE      STATEMENT      6  
PART III

---

## EXPLANATION

TO PROVIDE HOUSING ASSISTANCE AND TECHNICAL ASSISTANCE TO LOW-INCOME AND  
DISABLED INDIVIDUALS IN WESTERN MASSACHUSETTS

---



---

FORM 990      OTHER PROGRAM SERVICES      STATEMENT      7

---

DESCRIPTION	GRANTS AND ALLOCATIONS	EXPENSES
OTHER CLIENT SERVICES AND HOME OWNERSHIP PROGRAMS		1,356,477.
PROPERTY MANAGEMENT		165,657.
TEMPORARY SHELTER FOR THE HOMELESS		633,548.
OTHER RENTAL ASSISTANCE PROGRAMS		226,601.
OTHER DEVELOPMENT PROGRAMS		672,568.
TOTAL TO FORM 990, PART III, LINE E		3,054,851.

---



---

FORM 990      DEPRECIATION OF ASSETS HELD FOR INVESTMENT      STATEMENT      8

---

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
LAND (1)	45,000.	0.	45,000.
LAND (2)	40,000.	0.	40,000.
LAND (3)	20,825.	0.	20,825.
LAND (4)	41,310.	0.	41,310.
LAND (5)	50,000.	0.	50,000.
LAND (6)	41,440.	0.	41,440.
BUILDING (1)	189,994.	94,406.	95,588.
BUILDING (2)	164,831.	82,709.	82,122.
BUILDING (3)	219,109.	108,951.	110,158.
BUILDING (4)	210,393.	106,121.	104,272.
BUILDING (5)	176,373.	88,120.	88,253.
BUILDING (6)	178,910.	90,154.	88,756.
IMPROVEMENTS - BUILDING (4)	3,447.	1,120.	2,327.
IMPROVEMENTS - BUILDING (4)	2,611.	848.	1,763.
IMPROVEMENTS - BUILDING (4)	1,582.	396.	1,186.
IMPROVEMENTS - BUILDING (4)	5,120.	1,280.	3,840.
IMPROVEMENTS - BUILDING (6)	1,457.	273.	1,184.
IMPROVEMENTS - BUILDING (LUDLOW)	5,310.	930.	4,380.

IMPROVEMENTS - BUILDING (LUDLOW)	590.	104.	486.
IMPROVEMENTS - BUILDING (GREENFIELD)	5,431.	951.	4,480.
IMPROVEMENTS - BUILDING (GREENFIELD)	7,178.	1,256.	5,922.
IMPROVEMENTS - BUILDING (GREENFIELD)	6,061.	1,061.	5,000.
BUILDING (LORRAINE)	372,000.	60,450.	311,550.
BUILDING (LORRAINE) IMPROVEMENTS - BUILDING (DEWITT)	1,273,612.	174,200.	1,099,412.
IMPROVEMENTS - BUILDING (LUDLOW)	2,340.	351.	1,989.
ROOF (DEWITT)	1,435.	215.	1,220.
BUILDING IMPROVEMENTS	5,400.	675.	4,725.
BUILDING IMPROVEMENTS	1,586.	199.	1,387.
CLOSED CIRCUIT TELEVISION	15,200.	1,900.	13,300.
BUILDING IMPROVEMENTS (LORRAINE)	5,442.	4,352.	1,090.
BUILDING IMPROVEMENTS	1,614.	160.	1,454.
BUILDING IMPROVEMENTS	2,000.	200.	1,800.
BUILDING IMPROVEMENTS	920.	92.	828.
BUILDING IMPROVEMENTS	4,300.	431.	3,869.
HEATING & COOLING	605.	60.	545.
BUILDING IMPROVEMENTS	3,300.	331.	2,969.
BUILDING IMPROVEMENTS	1,658.	165.	1,493.
CARPET	2,308.	231.	2,077.
CARPET	2,337.	233.	2,104.
HEATING & COOLING	2,372.	237.	2,135.
CARPET	3,327.	333.	2,994.
LAND (1) - STRONG	57,000.	0.	57,000.
LAND (2) - PLUMTREE	41,200.	0.	41,200.
BUILDING - STRONG	125,404.	16,862.	108,542.
BUILDING - PLUMTREE	237,953.	30,285.	207,668.
BUILDING - STRONG	9,745.	974.	8,771.
BUILDING - STRONG	2,727.	272.	2,455.
BUILDING - STRONG	175,488.	17,548.	157,940.
BLDG IMPROVEMENTS	1,045.	76.	969.
BLDG IMPROVEMENTS	4,840.	352.	4,488.
BUILDING ADDITIONS	17,342.	1,893.	15,449.
HEATING & COOLING	2,390.	120.	2,270.
HEATING & COOLING	4,670.	234.	4,436.
CARPET	5,103.	256.	4,847.
HEATING & COOLING	2,068.	104.	1,964.
BUILDING IMPROVEMENTS	2,250.	112.	2,138.
BUILDING EQUIPMENT	880.	352.	528.
BUILDING IMPROVEMENTS	2,000.	100.	1,900.
LAND	30,000.	0.	30,000.
SIMONOKO FLOOR--BLDG IMPROVEMENT	1,041.	147.	894.
LANDSCAPING (BRAY)	3,100.	233.	2,867.
TURNER	2,350.	88.	2,262.
WALSH	720.	27.	693.

REIDY	719.	27.	692.
ABC MASONRY	11,100.	601.	10,499.
LANDSCAPING	31,250.	1,987.	29,263.
FURNICE COIL	5,372.	341.	5,031.
PLUMBING	620.	40.	580.
ENTRANCE IMPROVEMENTS	338.	21.	317.
ENTRANCE IMPROVEMENTS	1,099.	67.	1,032.
ESC OIL TANK REMOVAL	3,464.	210.	3,254.
TANK REMOVAL RPT	1,106.	65.	1,041.
GUARD RAIL PARKING LOT	3,500.	389.	3,111.
TOWSLEY ASSOC HVAC STUDY	7,800.	563.	7,237.
FURNACE	4,911.	436.	4,475.
BUILDING EQUIPMENT	2,783.	185.	2,598.
SALAMON FLOORING INC.	5,735.	502.	5,233.
ABC MASONRY	3,200.	253.	2,947.
SALAMON FLOORING INC.	6,489.	406.	6,083.
SALAMON FLOORING INC.	5,795.	386.	5,409.
DEPRECIATION OVERRIDE			
ADJUSTMENT	0.	<135.>	135.

TOTAL TO FORM 990, PART IV, LN 55	3,943,325.	899,874.	3,043,451.
-----------------------------------	------------	----------	------------

FORM 990	OTHER INVESTMENTS	STATEMENT	9
----------	-------------------	-----------	---

DESCRIPTION	VALUATION METHOD	AMOUNT
INVESTMENT IN JV'S AND LP'S	COST	178,950.
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		178,950.

FORM 990	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT	STATEMENT	10
----------	--	-----------	----

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
LAND - PROSPECT SHELTER	20,889.	0.	20,889.
BUILDING IMPROVEMENTS - PROSPECT	27,150.	19,667.	7,483.
COMPUTER/PRINTER	1,608.	1,608.	0.
COMPUTER	2,840.	2,840.	0.
COMPUTER SOFTWARE	4,791.	4,791.	0.
NOTEBOOK COMPUTER	2,094.	2,094.	0.
COMPUTER SOFTWARE	61,582.	61,582.	0.
NOTEBOOK COMPUTER	2,144.	2,144.	0.
WHALLEY/COMPUTER	10,295.	10,295.	0.
PRINTER	1,515.	1,515.	0.

COMPUTER	1,198.	1,198.	0.
DATABASE	2,335.	2,334.	1.
TELEDEX	5,091.	5,091.	0.
TELEDEX	49,599.	42,411.	7,188.
BUILDING IMPROVEMENTS	33,690.	30,321.	3,369.
BUILDING IMPROVEMENTS	16,902.	14,365.	2,537.
BUILDING IMPROVEMENTS	1,451.	1,208.	243.
WB MASON-FURNITURE & FIXTURES	4,744.	4,270.	474.
BLDG IMPROVEMENTS	67,067.	67,067.	0.
COMPUTER EQUIPMENT	25,910.	25,191.	719.
COMPUTER	1,164.	1,164.	0.
COMPUTER	8,885.	8,885.	0.
ALTERNATE ADV COMPUTER	1,595.	1,152.	443.
COMPUTERS	4,792.	2,529.	2,263.
BLACKBAUD SETUP & TRAINING	7,840.	7,840.	0.
COMPUTER	3,845.	3,845.	0.
COMPUTER	1,836.	1,754.	82.
COMPUTER	1,850.	1,511.	339.
COMPUTER	1,045.	824.	221.
COMPUTER	499.	228.	271.
COMPUTER	650.	549.	101.
BUILDING	756,416.	76,981.	679,435.
LAND	265,000.	0.	265,000.
PORCHES	3,875.	2,348.	1,527.
HOT WATER HEATER	1,218.	540.	678.
FLOORING	4,245.	1,302.	2,943.
COMMUNICATION EQUIPMENT	1,685.	1,383.	302.
FURNITURE AND FIXTURES	1,170.	663.	507.
COMPUTER	4,792.	4,792.	0.
COMPUTER	3,530.	2,281.	1,249.
COMPUTER	2,471.	1,545.	926.
COMPUTER	5,926.	3,581.	2,345.
COMPUTER	2,769.	1,615.	1,154.
COMPUTER	1,794.	1,385.	409.
COMPUTER	903.	627.	276.
COMPUTER	1,303.	904.	399.
COMPUTER EQUIPMENT	714.	714.	0.
COMPUTER EQUIPMENT	1,453.	1,386.	67.
BUILDING IMPROVEMENTS	10,347.	1,209.	9,138.
BUILDING IMPROVEMENTS	18,671.	1,563.	17,108.
BUILDING IMPROVEMENTS	59,512.	9,918.	49,594.
BUILDING IMPROVEMENTS	3,300.	275.	3,025.
BUILDING IMPROVEMENTS	10,373.	1,037.	9,336.
FURNITURE AND FIXTURES	1,080.	432.	648.
COMPUTER SOFTWARE	102,040.	86,558.	15,482.
COMPUTER SOFTWARE	23,935.	20,303.	3,632.
BUILDING IMPROVEMENTS	8,225.	897.	7,328.
50-XP PROFS	3,320.	2,421.	899.
3 PRINTERS	4,866.	3,549.	1,317.
25 COMPUTERS AND SCREENS	31,509.	21,662.	9,847.
DIGITAL PROJECTOR	1,829.	1,257.	572.
FILE SERVERS	4,864.	3,243.	1,621.
COMPUTER SOFTWARE	3,762.	2,509.	1,253.

COMPUTER SOFTWARE	893.	595.	298.
5DW FLAT FILE FOR PLANS	1,521.	1,420.	101.
VEHICLE	23,885.	13,270.	10,615.
COMPUTER	776.	496.	280.
SOFTWARE	2,046.	1,080.	966.
DESKTOP COMPUTERS	10,049.	4,746.	5,303.
BLACKBAUD MODULE	1,158.	547.	611.
CDW-GOVERNMENT	2,042.	965.	1,077.
COLOR PRINTER	1,495.	706.	789.
COMPUTER- LAPTOPS	4,743.	2,240.	2,503.
BELKIN SWITCH	508.	211.	297.
SERVER	3,929.	917.	3,012.
PRI CARD	3,080.	975.	2,105.
PROPERTY MGMT SYSTEM	13,030.	2,823.	10,207.
ADP SERVER	4,567.	1,522.	3,045.
6 PC'S WITH MONITORS	5,482.	1,827.	3,655.
QUANTUM BACKUP DEVICE	4,347.	1,449.	2,898.
EXCHANGE LICENSE UPGRADE	1,675.	558.	1,117.
LAPTOP - LB	1,464.	488.	976.
PAYROLL SOFTWARE	4,950.	1,650.	3,300.
SCREWDRIVER SOFTWARE	1,798.	599.	1,199.
LASERJET PRINTER	1,330.	443.	887.
P/R CONV CONSULT SVCS	6,638.	2,213.	4,425.
CDW-G	15,056.	5,019.	10,037.
VOICEMAIL SYSTEM	14,751.	3,688.	11,063.
CARPET/STAIR VINYL	12,263.	1,226.	11,037.
CARPETS PROP MGMT OFCS	4,371.	437.	3,934.
BUILDING IMPROVEMENTS	15,550.	518.	15,032.
PROP MGMT FURNITURE	1,683.	337.	1,346.
NEXTEL - PHONES	3,700.	103.	3,597.
TOTAL TO FORM 990, PART IV, LN 57	1,892,573.	642,221.	1,250,352.

FORM 990	OTHER ASSETS	STATEMENT 11
----------	--------------	--------------

DESCRIPTION	AMOUNT
OTHER ASSETS	78,526.
WORK IN PROCESS	2,737,255.
NOTE RECEIVABLE - AFFILIATE	417,593.
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B	3,233,374.

FORM 990

MORTGAGES PAYABLE

STATEMENT 12

DESCRIPTIONBALANCE DUE

TD BANK NORTH	867,846.
VARIOUS HOUSING AUTHORITIES AND COMMUNITY DEVELOPMENT CORPORATION	270,000.
CITY OF NORTHAMPTON	170,000.
MASSACHUSETTS HOUSING PARTNERSHIP BOARD	500,000.
MASS DHCD	500,000.
FLORENCE SAVINGS BANK	112,424.
BANK OF AMERICA	273,941.
BANK OF AMERICA	933,046.
BANK OF AMERICA	146,847.
TD BANKNORTH	104,942.

TOTAL INCLUDED ON FORM 990, PART IV, LINE 64B, COLUMN B

3,879,046.



## FORM 990

## OTHER NOTES AND LOANS PAYABLE

STATEMENT 13

## LENDER'S NAME

## TERMS OF REPAYMENT

DIOCESS OF WESTERN  
MASSACHUSETTS

2,000/QRT INTEREST ONLY

DATE OF  
NOTEMATURITY  
DATEORIGINAL  
LOAN AMOUNTINTEREST  
RATE

03/07/09

200,000.

4.00%

## SECURITY PROVIDED BY BORROWER

## PURPOSE OF LOAN

PROVIDE FUNDING FOR LOAN FUND  
USED TO FINANCE AFFORDABLE  
HOUSING

## RELATIONSHIP OF LENDER

NONE

## DESCRIPTION OF CONSIDERATION

FMV OF  
CONSIDERATION

## BALANCE DUE

0.

200,000.

## LENDER'S NAME

## TERMS OF REPAYMENT

LIFE INSURANCE COMMUNITY  
INVESTMENT INITIATIVE

QRTL INTEREST PAYMENTS

DATE OF  
NOTEMATURITY  
DATEORIGINAL  
LOAN AMOUNTINTEREST  
RATE

04/01/07

500,000.

6.00%

## SECURITY PROVIDED BY BORROWER

## PURPOSE OF LOAN

\$50,000 CERTIFICATE OF  
DEPOSITSPROVIDE FUNDING FOR LOAN FUND  
USED TO FINANCE AFFORDABLE  
HOUSING

## RELATIONSHIP OF LENDER

NONE

## DESCRIPTION OF CONSIDERATION

FMV OF  
CONSIDERATION

## BALANCE DUE

0.

500,000.

LENDER'S NAME	TERMS OF REPAYMENT
PROPERTY AND CASUALTY INITIATIVE	QRTLY INTEREST PAYMENTS

DATE OF NOTE	MATURITY DATE	ORIGINAL LOAN AMOUNT	INTEREST RATE
	01/01/07	250,000.	5.50%

SECURITY PROVIDED BY BORROWER	PURPOSE OF LOAN
	PROVIDE FUNDING FOR LOAN FUND USED TO FINANCE AFFORDABLE HOUSING

RELATIONSHIP OF LENDER

NONE

DESCRIPTION OF CONSIDERATION	FMV OF CONSIDERATION	BALANCE DUE
	0.	250,000.

LENDER'S NAME	TERMS OF REPAYMENT
LIFE INSURANCE INITIATIVE	QRTLY INTEREST PAYMENTS

DATE OF NOTE	MATURITY DATE	ORIGINAL LOAN AMOUNT	INTEREST RATE
	01/01/07	250,000.	4.00%

SECURITY PROVIDED BY BORROWER	PURPOSE OF LOAN
	PROVIDE FUNDING FOR LOAN FUND USED TO FINANCE AFFORDABLE HOUSING

RELATIONSHIP OF LENDER

NONE

DESCRIPTION OF CONSIDERATION	FMV OF CONSIDERATION	BALANCE DUE
	0.	250,000.

<u>LENDER'S NAME</u>	<u>TERMS OF REPAYMENT</u>
COMMUNITY ECONOMIC DEVELOPMENT ASSISTANCE CORP	DUE UPON OBTAINING PERM. FINANCING

<u>DATE OF NOTE</u>	<u>MATURITY DATE</u>	<u>ORIGINAL LOAN AMOUNT</u>	<u>INTEREST RATE</u>
		6,375.	7.00%

<u>SECURITY PROVIDED BY BORROWER</u>	<u>PURPOSE OF LOAN</u>
	DEVELOPEMENT PHASE LOAN FOR THE DEVELOPMENT OF AFFORDABLE HOUSING

RELATIONSHIP OF LENDER

NONE

<u>DESCRIPTION OF CONSIDERATION</u>	<u>FMV OF CONSIDERATION</u>	<u>BALANCE DUE</u>
	0.	6,375.

<u>LENDER'S NAME</u>	<u>TERMS OF REPAYMENT</u>
COOPERATIVE FUND OF NEW ENGLAND	\$766 MONTH

<u>DATE OF NOTE</u>	<u>MATURITY DATE</u>	<u>ORIGINAL LOAN AMOUNT</u>	<u>INTEREST RATE</u>
	05/ /08	0.	6.50%

<u>SECURITY PROVIDED BY BORROWER</u>	<u>PURPOSE OF LOAN</u>
	CONSTRUCTION LOAN FOR CONSTRUCTION OF AFFORDABLE HOUSING

RELATIONSHIP OF LENDER

NONE

<u>DESCRIPTION OF CONSIDERATION</u>	<u>FMV OF CONSIDERATION</u>	<u>BALANCE DUE</u>
	0.	16,528.

LENDER'S NAME	TERMS OF REPAYMENT
---------------	--------------------

COOPERATIVE FUND OF NEW ENGLAND	2,316/MONTH
---------------------------------	-------------

DATE OF NOTE	MATURITY DATE	ORIGINAL LOAN AMOUNT	INTEREST RATE
	08/15/07	75,000.	7.00%

SECURITY PROVIDED BY BORROWER	PURPOSE OF LOAN
-------------------------------	-----------------

CERTAIN REAL PROPERTY, OFFICE EQUIP AND RECEIVABLES	PURCHASE OF EQUIPMENT
---	-----------------------

RELATIONSHIP OF LENDER

NONE

DESCRIPTION OF CONSIDERATION	FMV OF CONSIDERATION	BALANCE DUE
	0.	31,070.

LENDER'S NAME	TERMS OF REPAYMENT
---------------	--------------------

COOPERATIVE FUND OF NEW ENGLAND	2,297/MONTH
---------------------------------	-------------

DATE OF NOTE	MATURITY DATE	ORIGINAL LOAN AMOUNT	INTEREST RATE
	08/15/07	75,000.	7.50%

SECURITY PROVIDED BY BORROWER	PURPOSE OF LOAN
-------------------------------	-----------------

CERTAIN REAL PROPERTY, OFFICE EQUIP AND RECEIVABLES	PURCHASE OF EQUIPMENT
---	-----------------------

RELATIONSHIP OF LENDER

NONE

DESCRIPTION OF CONSIDERATION	FMV OF CONSIDERATION	BALANCE DUE
	0.	30,699.

<u>LENDER'S NAME</u>	<u>TERMS OF REPAYMENT</u>
----------------------	---------------------------

DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT	11,667/QTR
--	------------

<u>DATE OF NOTE</u>	<u>MATURITY DATE</u>	<u>ORIGINAL LOAN AMOUNT</u>	<u>INTEREST RATE</u>
	12/31/06	0.	.00%

<u>SECURITY PROVIDED BY BORROWER</u>	<u>PURPOSE OF LOAN</u>
	PURCHASE OF EQUIPMENT

RELATIONSHIP OF LENDER

NONE

<u>DESCRIPTION OF CONSIDERATION</u>	<u>FMV OF CONSIDERATION</u>	<u>BALANCE DUE</u>
	0.	23,333.

<u>LENDER'S NAME</u>	<u>TERMS OF REPAYMENT</u>
----------------------	---------------------------

MASS HOUSING PARTNERSHIP FUND	
----------------------------------	--

<u>DATE OF NOTE</u>	<u>MATURITY DATE</u>	<u>ORIGINAL LOAN AMOUNT</u>	<u>INTEREST RATE</u>
		5,000.	.00%

<u>SECURITY PROVIDED BY BORROWER</u>	<u>PURPOSE OF LOAN</u>
	PRE-DEVELOPMENT COSTS

RELATIONSHIP OF LENDER

NONE

<u>DESCRIPTION OF CONSIDERATION</u>	<u>FMV OF CONSIDERATION</u>	<u>BALANCE DUE</u>
	0.	5,000.

LENDER'S NAME	TERMS OF REPAYMENT
---------------	--------------------

MASS HOUSING PARTNERSHIP  
FUND

DATE OF NOTE	MATURITY DATE	ORIGINAL LOAN AMOUNT	INTEREST RATE
		5,000.	.00%

SECURITY PROVIDED BY BORROWER	PURPOSE OF LOAN
	PRE-DEVELOPMENT COSTS

RELATIONSHIP OF LENDER

NONE

DESCRIPTION OF CONSIDERATION	FMV OF CONSIDERATION	BALANCE DUE
	0.	5,000.

LENDER'S NAME	TERMS OF REPAYMENT
---------------	--------------------

COMMUNITY ECONOMIC DEVELOPMENT ASSISTANCE CORP	DUE UPON OBTAINING PERM. FINANCING
--	---------------------------------------

DATE OF NOTE	MATURITY DATE	ORIGINAL LOAN AMOUNT	INTEREST RATE
		135,607.	7.00%

SECURITY PROVIDED BY BORROWER	PURPOSE OF LOAN
	PRE-DEVELOPMENT COSTS

RELATIONSHIP OF LENDER

NONE

DESCRIPTION OF CONSIDERATION	FMV OF CONSIDERATION	BALANCE DUE
	0.	135,607.

<u>LENDER'S NAME</u>	<u>TERMS OF REPAYMENT</u>
COMMUNITY ECONOMIC DEVELOPMENT ASSISTANCE CORP	DUE UPON OBTAINING PERM. FINANCING

<u>DATE OF NOTE</u>	<u>MATURITY DATE</u>	<u>ORIGINAL LOAN AMOUNT</u>	<u>INTEREST RATE</u>
		16,031.	7.00%

<u>SECURITY PROVIDED BY BORROWER</u>	<u>PURPOSE OF LOAN</u>
	PRE-DEVELOPMENT COSTS

RELATIONSHIP OF LENDER

NONE

<u>DESCRIPTION OF CONSIDERATION</u>	<u>FMV OF CONSIDERATION</u>	<u>BALANCE DUE</u>
	0.	16,031.

<u>LENDER'S NAME</u>	<u>TERMS OF REPAYMENT</u>
HOUSING PARTNERSHIP VENTURES, INC.	INT QTRLY

<u>DATE OF NOTE</u>	<u>MATURITY DATE</u>	<u>ORIGINAL LOAN AMOUNT</u>	<u>INTEREST RATE</u>
	03/31/09	51,510.	4.00%

<u>SECURITY PROVIDED BY BORROWER</u>	<u>PURPOSE OF LOAN</u>
	PURCHASE OF EQUIPMENT

RELATIONSHIP OF LENDER

NONE

<u>DESCRIPTION OF CONSIDERATION</u>	<u>FMV OF CONSIDERATION</u>	<u>BALANCE DUE</u>
	0.	51,510.

LENDER'S NAME TERMS OF REPAYMENT

MASS HOUSING INVESTMENT LINE OF CREDIT  
CORP

DATE OF NOTE	MATURITY DATE	ORIGINAL LOAN AMOUNT	INTEREST RATE
-----------------	------------------	-------------------------	------------------

09/ /06	117,138.	6.00%
---------	----------	-------

SECURITY PROVIDED BY BORROWER PURPOSE OF LOAN

RELATIONSHIP OF LENDER

NONE

DESCRIPTION OF CONSIDERATION	FMV OF CONSIDERATION	BALANCE DUE
	0.	117,138.

LENDER'S NAME TERMS OF REPAYMENT

GMAC \$656 MONTH

DATE OF NOTE	MATURITY DATE	ORIGINAL LOAN AMOUNT	INTEREST RATE
-----------------	------------------	-------------------------	------------------

12/06/07	17,616.	6.25%
----------	---------	-------

SECURITY PROVIDED BY BORROWER PURPOSE OF LOAN

CERTAIN AUTOMOBILE

RELATIONSHIP OF LENDER

NONE

DESCRIPTION OF CONSIDERATION	FMV OF CONSIDERATION	BALANCE DUE
	0.	10,647.



LENDER'S NAME	TERMS OF REPAYMENT
---------------	--------------------

COOPERATIVE FUND OF NEW ENGLAND	\$1,544/MONTH
---------------------------------	---------------

DATE OF NOTE	MATURITY DATE	ORIGINAL LOAN AMOUNT	INTEREST RATE
	06/15/09	50,000.	7.00%

SECURITY PROVIDED BY BORROWER	PURPOSE OF LOAN
CERTAIN REAL AND PERS PROPERTY, ASSIGN OF LEASES/RENTS	PURCHASE OF EQUIPMENT

RELATIONSHIP OF LENDER

NONE

DESCRIPTION OF CONSIDERATION	FMV OF CONSIDERATION	BALANCE DUE
	0.	50,000.

LENDER'S NAME	TERMS OF REPAYMENT
---------------	--------------------

DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT	DUE AT MATURITY
---	-----------------

DATE OF NOTE	MATURITY DATE	ORIGINAL LOAN AMOUNT	INTEREST RATE
	08/15/35	775,000.	.00%

SECURITY PROVIDED BY BORROWER	PURPOSE OF LOAN
	PRE-DEVELOPMENT COSTS

RELATIONSHIP OF LENDER

NONE

DESCRIPTION OF CONSIDERATION	FMV OF CONSIDERATION	BALANCE DUE
	0.	775,000.

<u>LENDER'S NAME</u>	<u>TERMS OF REPAYMENT</u>
----------------------	---------------------------

MASSACHUSETTS HOUSING PARTNERSHIP BOARD	DUE AT MATURITY
--	-----------------

<u>DATE OF NOTE</u>	<u>MATURITY DATE</u>	<u>ORIGINAL LOAN AMOUNT</u>	<u>INTEREST RATE</u>
	08/15/55	715,000.	.00%

<u>SECURITY PROVIDED BY BORROWER</u>	<u>PURPOSE OF LOAN</u>
	PRE-DEVELOPMENT COSTS

RELATIONSHIP OF LENDER

NONE

<u>DESCRIPTION OF CONSIDERATION</u>	<u>FMV OF CONSIDERATION</u>	<u>BALANCE DUE</u>
	0.	643,500.

<u>LENDER'S NAME</u>	<u>TERMS OF REPAYMENT</u>
----------------------	---------------------------

COMMUNITY ECONOMIC DEVELOPMENT ASSISTANCE CORP	DUE AT MATURITY
--	-----------------

<u>DATE OF NOTE</u>	<u>MATURITY DATE</u>	<u>ORIGINAL LOAN AMOUNT</u>	<u>INTEREST RATE</u>
	08/15/35	815,000.	5.00%

<u>SECURITY PROVIDED BY BORROWER</u>	<u>PURPOSE OF LOAN</u>
	PRE-DEVELOPMENT COSTS

RELATIONSHIP OF LENDER

NONE

<u>DESCRIPTION OF CONSIDERATION</u>	<u>FMV OF CONSIDERATION</u>	<u>BALANCE DUE</u>
	0.	466,255.

LENDER'S NAME	TERMS OF REPAYMENT
---------------	--------------------

DIOCESS OF WESTERN MASSACHUSETTS	DUE AT MATURITY
-------------------------------------	-----------------

DATE OF NOTE	MATURITY DATE	ORIGINAL LOAN AMOUNT	INTEREST RATE
	09/01/08	100,000.	4.00%

SECURITY PROVIDED BY BORROWER	PURPOSE OF LOAN
-------------------------------	-----------------

PROVIDE FUNDING FOR LOAN FUND  
USED TO FINANCE AFFORDABLE  
HOUSING

RELATIONSHIP OF LENDER

NONE

DESCRIPTION OF CONSIDERATION	FMV OF CONSIDERATION	BALANCE DUE
	0.	100,000.

TOTAL INCLUDED ON FORM 990, PART IV, LINE 64, COLUMN B	3,683,693.
--	------------

FORM 990	OTHER LIABILITIES	STATEMENT 14
----------	-------------------	--------------

DESCRIPTION	AMOUNT
ESCROW LIABILITIES	260,318.
ACCRUED LIABILITIES	467,887.
DEFERRED INCOME	207,858.
TOTAL TO FORM 990, PART IV, LINE 65, COLUMN B	936,063.

FORM 990	OTHER REVENUE NOT INCLUDED ON FORM 990	STATEMENT 15
----------	--	--------------

DESCRIPTION	AMOUNT
RENTAL EXPENSES USED TO REDUCE INCOME ON PAGE 1	512,579.
TOTAL TO FORM 990, PART IV-A	512,579.

FORM 990

PART V-A - LIST OF OFFICERS, DIRECTORS,  
TRUSTEES AND KEY EMPLOYEES

STATEMENT 16

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
PETER GAGLIARDI 322 MAIN STREET SPRINGFIELD, MA 01105	EXEC DIRECTOR 40.00	106,577.	12,481.	5,893.
ELLEN HATZAKIS 322 MAIN STREET SPRINGFIELD, MA 01105	CFO 40.00	70,181.	6,037.	0.
LINDA MORLEY 322 MAIN STREET SPRINGFIELD, MA 01105	LEGAL COUNSEL 40.00	69,431.	4,798.	0.
KAREN ANN LEVEILLE 322 MAIN STREET SPRINGFIELD, MA 01105	REAL ESTATE OFFICER 40.00	67,016.	5,914.	0.
JAMES REIS 322 MAIN STREET SPRINGFIELD, MA 01105	ASSOCIATE EXEC DIRECTOR 40.00	67,386.	5,993.	0.
NEAL MCBRIDE 322 MAIN STREET SPRINGFIELD, MA 01105	PRESIDENT 0.00	0.	0.	0.
CARLOS VEGA 322 MAIN STREET SPRINGFIELD, MA 01105	VICE PRESIDENT 0.00	0.	0.	0.
MR. JOSEPH LAPLANTE 322 MAIN STREET SPRINGFIELD, MA 01105	VICE PRESIDENT 0.00	0.	0.	0.
MR. CHARLES RUCKS 322 MAIN STREET SPRINGFIELD, MA 01105	TREASURER 0.00	0.	0.	0.
REV. CHARLES PINK 322 MAIN STREET SPRINGFIELD, MA 01105	CLERK 0.00	0.	0.	0.
JAMES SHERBO 322 MAIN STREET SPRINGFIELD, MA 01105	VICE PRESIDENT 0.00	0.	0.	0.

HAP, INC.

04-2518368

JAMES BOARDMAN 322 MAIN STREET SPRINGFIELD, MA 01105	DIRECTOR 0.00	0.	0.	0.
MS. JOANNE CAMPBELL 322 MAIN STREET SPRINGFIELD, MA 01105	DIRECTOR 0.00	0.	0.	0.
MR. JOHN DOWNS 322 MAIN STREET SPRINGFIELD, MA 01105	DIRECTOR 0.00	0.	0.	0.
MS. MARY FORD 322 MAIN STREET SPRINGFIELD, MA 01105	DIRECTOR 0.00	0.	0.	0.
BLISS YOUNG 322 MAIN STREET SPRINGFIELD, MA 01105	DIRECTOR 0.00	0.	0.	0.
WILLIAM FENTON 322 MAIN STREET SPRINGFIELD, MA 01105	DIRECTOR 0.00	0.	0.	0.
THOMAS ZATKO 322 MAIN STREET SPRINGFIELD, MA 01105	DIRECTOR 0.00	0.	0.	0.
PAUL BAILEY SPRINGFIELD, MA 01105	DIRECTOR 0.00	0.	0.	0.

TOTALS INCLUDED ON FORM 990, PART V-A

380,591.	35,223.	5,893.
----------	---------	--------

FORM 990

IDENTIFICATION OF RELATED ORGANIZATIONS  
PART VI, LINE 80B

STATEMENT 17

NAME OF ORGANIZATION	EXEMPT	NONEXEMPT
HAP-CHS INC II		X
DWIGHT & CLINTON JOINT VENTURE		X
HAP COMMUNITY HOUSING		X
SOUTH CITY HOUSING CORP.		X
THIRD CANAL INC.		X
QUADRANGLE COURT INC.		X
KENDALL INC.		X
KENWYN PARK INC.		X
BUTTERNUT HOUSING CORPORATION		X
BUTTERNUT LIMITED PARTNERSHIP		X
KIBBE COURT INC		X
VERANO, INC		X
NEIGHBORHOOD COLLABORATIVE, LLC		X

HAP, INC.

04-2518368

POMEROY HOUSING INC.

X

FORM 990

PROGRAM SERVICE REVENUE

STATEMENT 18

DESCRIPTION	BUS CODE	UNRELATED BUSINESS INC	EXCL CODE	EXCLUDED AMOUNT	RELATED OR EXEMPT FUNC- TION INCOME
DEVELOPMENT					804,674.
HOMEOWNERSHIP					112,507.
CLIENT SERVICES					59,933.
PROPERTY MGMT					151,437.
TECH SERVICES					30,069.
RENTAL ASSISTANCE					10,301.
TO FORM 990, PART VII, LINE 93					1,168,921.

FORM 990

PART IX - INFORMATION REGARDING TAXABLE  
SUBSIDIARIES AND DISREGARDED ENTITIES

STATEMENT 19

## NAME OF CORPORATION, PARTNERSHIP OR DISREGARDED ENTITY

HAP-CHS, INC II (OWNED BY A SUBSIDIARY OF HAP INC.)

## ADDRESS

322 MAIN ST, SPRINGFIELD, MA 01105

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
04-3062889	100.00%	HOUSING SERVICES	2,229.	1,789,655.

## NAME OF CORPORATION, PARTNERSHIP OR DISREGARDED ENTITY

SOUTH CITY HOUSING CORPORATION

## ADDRESS

322 MAIN ST, SPRINGFIELD, MA 01105

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
04-3071479	75.00%	LOW-INCOME HOUSING	<1,130.>	0.

## NAME OF CORPORATION, PARTNERSHIP OR DISREGARDED ENTITY

DWIGHT &amp; CLINTON JOINT VENTURE (OWNED BY A SUBSIDIARY OF HAP INC.)

## ADDRESS

322 MAIN ST, SPRINGFIELD, MA 01105

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
04-3006085	50.00%	RENTAL OF AFFORDABLE HOUSING	<19,888.>	1,170,904.

## NAME OF CORPORATION, PARTNERSHIP OR DISREGARDED ENTITY

HAP COMMUNITY HOUSING INC

## ADDRESS

322 MAIN ST, SPRINGFIELD, MA 01105

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
04-2770112	100.00%	SPONSOR OF AFFORDABLE HOUSING & RENTAL OF AFFORDABLE HOUSING	2,940.	1,745,655.

## NAME OF CORPORATION, PARTNERSHIP OR DISREGARDED ENTITY

THIRD CANAL INC.(OWNED BY A SUBSIDIARY OF HAP INC.)

## ADDRESS

322 MAIN ST, SPRINGFIELD, MA 01105

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
04-3225504	60.00%	SPONSOR OF AFFORDABLE HOUSING	<1,134.>	101,165.

## NAME OF CORPORATION, PARTNERSHIP OR DISREGARDED ENTITY

QUADRANGLE COURT INC.(OWNED BY A SUBSIDIARY OF HAP INC)

## ADDRESS

322 MAIN ST, SPRINGFIELD, MA 01105

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
04-3329073	100.00%	SPONSOR OF AFFORDABLE HOUSING	<1,287.>	0.



## NAME OF CORPORATION, PARTNERSHIP OR DISREGARDED ENTITY

KENDALL INC.(OWNED BY A SUBSIDIARY OF HAP INC.)

## ADDRESS

322 MAIN ST, SPRINGFIELD, MA 01105

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
04-3205019	79.00%	SPONSOR OF AFFORDABLE HOUSING	1.	27,175.

## NAME OF CORPORATION, PARTNERSHIP OR DISREGARDED ENTITY

KENWYN PARK INC. (OWNED BY A SUBSIDIARY OF HAP INC.)

## ADDRESS

322 MAIN ST, SPRINGFIELD, MA 01105

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
04-3238388	79.00%	SPONSOR OF AFFORDABLE HOUSING	61.	0.

## NAME OF CORPORATION, PARTNERSHIP OR DISREGARDED ENTITY

BUTTERNUT HOUSING CORPORATION (OWNED BY A SUBSIDIARY OF HAP INC.)

## ADDRESS

322 MAIN ST, SPRINGFIELD, MA 01105

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
04-3742817	100.00%	SPONSOR OF AFFORDABLE HOUSING	<496.>	87.

## NAME OF CORPORATION, PARTNERSHIP OR DISREGARDED ENTITY

BUTTERNUT LIMITED PARTNERSHIP (OWNED BY A SUBSIDIARY OF HAP, INC.)

## ADDRESS

322 MAIN ST, SPRINGFIELD, MA 01105

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
56-2320595	100.00%	RENTAL OF AFFORDABLE HOUSING	8,718.	515,943.

## NAME OF CORPORATION, PARTNERSHIP OR DISREGARDED ENTITY

KIBBE COURT INC. (OWNED BY A SUBSIDIARY OF HAP, INC.)

## ADDRESS

322 MAIN ST, SPRINGFIELD, MA 01105

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
54-2063788	100.00%	SPONSOR OF AFFORDABLE HOUSING	<1,474.>	89,945.

## NAME OF CORPORATION, PARTNERSHIP OR DISREGARDED ENTITY

VERANO, INC (OWNED BY A SUBSIDIARY OF HAP INC.)

## ADDRESS

322 MAIN ST, SPRINGFIELD, MA 01105

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
20-1647984	100.00%	SPONSOR OF AFFORDABLE HOUSING	<456.>	97.

## NAME OF CORPORATION, PARTNERSHIP OR DISREGARDED ENTITY

NEIGHBORHOOD COLLABORATIVE, LLC

## ADDRESS

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
20-2737538	100.00%	HOUSING REHABILITATION	<530.>	304,412.

## NAME OF CORPORATION, PARTNERSHIP OR DISREGARDED ENTITY

POMEROY HOUSING INC.

## ADDRESS

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
04-3191514	40.00%	SPONSOR OF AFFORDABLE HOUSING	4,501.	176,862.

FORM 990      PART VIII - RELATIONSHIP OF ACTIVITIES TO      STATEMENT 20  
ACCOMPLISHMENT OF EXEMPT PURPOSES

LINE	EXPLANATION OF RELATIONSHIP OF ACTIVITIES
93A	HAP, INC. DEVELOPS & MANAGES REAL PROPERTY TO PROVIDE TEMPORARY AND PERMANENT HOUSING FOR THE HOMELESS & QUALIFIED LOW-INCOME INDIVIDUALS
93B	HAP, INC. PROVIDES FINANCIAL COUNSELING FOR QUALIFIED LOW-INCOME INDIVIDUALS WHO ARE AT RISK OF LOSING THEIR HOMES.
93E	HAP INC PROVIDES TECHNICAL AND EDUCATION SERVICES RELATED TO THE HAZARDS OF LEAD PAINT AND THE REHAB WORK REQUIRED TO PROVIDE SAFE HOUSING.
93C	HAP INC. PROVIDES LEGAL AND FINANCIAL COUNSELING AND HOUSING EDUCATION SERVICES TO QUALIFIED INDIVIDUALS TO PRESERVE AFFORDABLE HOUSING.
93D	HAP INC. MANAGES REAL PROPERTY TO PROVIDE HOUSING FOR QUALIFIED LOW INCOME INDIVIDUALS AND MENTALLY RETARDED INDIVIDUALS.
93F	THE RENTAL ASSISTANCE PROGRAM PROVIDES RENT SUPPLEMENTS TO QUALIFIED INDIVIDUALS TO ALLOW THEM TO SECURE AFFORDABLE HOUSING.
97	HAP INC OWNS REAL PROPERTY TO PROVIDE HOUSING FOR QUALIFIED LOW INCOME INDIVIDUALS AND MENTALLY RETARDED INDIVIDUALS.

## SCHEDULE A

EXPLANATION OF TRANSACTIONS  
PART III, LINE 2B

STATEMENT 21

HAP, THROUGH ITS WHOLLY OWNED SUBSIDIARY HAP-CHS IS IN TURN THE MAJORITY OWNER OF SEVERAL CORPORATIONS WHOSE SOLE PURPOSE IS TO DEVELOP AND OPERATE THROUGH LIMITED PARTNERSHIPS AFFORDABLE HOUSING. THE ANNUAL OPERATING EXPENSES ARE FUNDED BY HAP AND INCLUDE TAX FILING FEES AND COSTS TO PREPARE TAX RETURNS. DURING THE CURRENT YEAR HAP INC ALSO RECEIVED REIMBURSEMENT OF DEVELOPERS OVERHEAD AND FEES RELATED TO PROJECTS IN DEVELOPMENT.

## SCHEDULE A

EXPLANATION OF TRANSACTIONS  
PART III, LINE 2C

STATEMENT 22

HAP INC PROVIDES SERVICES TO HER, INC, ANOTHER 501(C)(3) ORGANIZATION  
WHOSE OFFICERS ARE EMPLOYEES OF HAP, INC. SERVICES PROVIDED DURING THE  
YEAR TOTALED \$21,887.

SCHEDULE A

STATEMENT OF LOBBYING ACTIVITIES - PART VI-B

STATEMENT 23

PAYMENT TO LOBBYIST

4562

Form  
(Rev. January 2006)  
Department of the Treasury  
Internal Revenue Service  
Name(s) shown on return

# Depreciation and Amortization 990

(Including Information on Listed Property)

▶ See separate instructions.

▶ Attach to your tax return.

OMB No 1545-0172

2005

Attachment  
Sequence No 67

HAP, INC.

FORM 990 PAGE 2

04-2518368

**Part I Election To Expense Certain Property Under Section 179** *Note: If you have any listed property, complete Part V before you complete Part I.*

1	Maximum amount See the instructions for a higher limit for certain businesses	1	105,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	420,000.
4	Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2004 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2006 Add lines 9 and 10, less line 12	13	

**Note:** Do not use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property)**

14	Special allowance for certain aircraft, certain property with a long production period, and qualified NYL or GO Zone property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	155,869.

**Part III MACRS Depreciation (Do not include listed property) (See instructions)****Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2005	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

**Section B - Assets Placed in Service During 2005 Tax Year Using the General Depreciation System**

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

**Section C - Assets Placed in Service During 2005 Tax Year Using the Alternative Depreciation System**

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

**Part IV Summary (see instructions)**

21	Listed property Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	155,869.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

516251  
01-05-06

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 4562 (2005) (Rev. 1-2006)

55

14100221 756950 36725

2005.08010 HAP, INC.

36725\_\_2

**Part V Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)  
**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

**Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)**

**24a** Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No **24b** If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
<b>25</b> Special allowance for certain aircraft, certain property with a long production period, and qualified NYL or GO Zone property placed in service during the tax year and used more than 50% in a qualified business use						<b>25</b>		
<b>26</b> Property used more than 50% in a qualified business use								
		%						
		%						
		%						
<b>27</b> Property used 50% or less in a qualified business use								
		%				S/L -		
		%				S/L -		
		%				S/L -		
<b>28</b> Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1						<b>28</b>		
<b>29</b> Add amounts in column (i), line 26. Enter here and on line 7, page 1							<b>29</b>	

**Section B - Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
<b>30</b> Total business/investment miles driven during the year (do not include commuting miles)												
<b>31</b> Total commuting miles driven during the year												
<b>32</b> Total other personal (noncommuting) miles driven												
<b>33</b> Total miles driven during the year Add lines 30 through 32												
<b>34</b> Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
<b>35</b> Was the vehicle used primarily by a more than 5% owner or related person?												
<b>36</b> Is another vehicle available for personal use?												

**Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

<b>37</b> Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
<b>38</b> Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners.		
<b>39</b> Do you treat all use of vehicles by employees as personal use?		
<b>40</b> Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
<b>41</b> Do you meet the requirements concerning qualified automobile demonstration use?		

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
<b>42</b> Amortization of costs that begins during your 2005 tax year					
<b>43</b> Amortization of costs that began before your 2005 tax year					<b>43</b>
<b>44</b> Total. Add amounts in column (f). See the instructions for where to report					<b>44</b>



**Depreciation and Amortization RENT 1**  
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No 1545-0172

**2005**

Attachment  
Sequence No **67**

HAP, INC.

SPRINGFIELD MA

04-2518368

**Part I Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I

1	Maximum amount See the instructions for a higher limit for certain businesses	105,000.
2	Total cost of section 179 property placed in service (see instructions)	
3	Threshold cost of section 179 property before reduction in limitation	420,000.
4	Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	
5	Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	
6	(a) Description of property	(b) Cost (business use only)
		(c) Elected cost
7	Listed property. Enter the amount from line 29	7
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8
9	Tentative deduction Enter the smaller of line 5 or line 8	9
10	Carryover of disallowed deduction from line 13 of your 2004 Form 4562	10
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12
13	Carryover of disallowed deduction to 2006 Add lines 9 and 10, less line 12	13

Note: Do not use Part II or Part III below for listed property Instead, use Part V

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property)**

14	Special allowance for certain aircraft, certain property with a long production period, and qualified NYL or GO Zone property (other than listed property) placed in service during the tax year	14
15	Property subject to section 168(f)(1) election	15
16	Other depreciation (including ACRS)	110,075.

**Part III MACRS Depreciation (Do not include listed property) (See instructions.)**

**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2005	17
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	

**Section B - Assets Placed in Service During 2005 Tax Year Using the General Depreciation System**

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

**Section C - Assets Placed in Service During 2005 Tax Year Using the Alternative Depreciation System**

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

**Part IV Summary (see instructions)**

21	Listed property Enter amount from line 28	21
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations - see instr	110,075.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23

**Part V Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement)  
**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable

**Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles)**

24a Do you have evidence to support the business/investment use claimed? <input type="checkbox"/> Yes <input type="checkbox"/> No					24b If "Yes," is the evidence written? <input type="checkbox"/> Yes <input type="checkbox"/> No				
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost	
25 Special allowance for certain aircraft, certain property with a long production period, and qualified NYL or GO Zone property placed in service during the tax year and used more than 50% in a qualified business use							25		
26 Property used more than 50% in a qualified business use:									
		%							
		%							
		%							
27 Property used 50% or less in a qualified business use									
		%				S/L -			
		%				S/L -			
		%				S/L -			
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1							28		
29 Add amounts in column (i), line 26 Enter here and on line 7, page 1								29	

**Section B - Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
30 Total business/investment miles driven during the year (do not include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

**Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2005 tax year					
43 Amortization of costs that began before your 2005 tax year					43
44 Total. Add amounts in column (f) See the instructions for where to report					44

- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** and check this box ☒

**Note:** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

**Part II Additional (not automatic) 3-Month Extension of Time - Must file Original and One Copy.**

Type or print.  File by the extended due date for filing the return. See instructions.	Name of Exempt Organization	Employer identification number
	HAP, INC.	04-2518368
	Number, street, and room or suite no. If a P.O. box, see instructions.	For IRS use only
	322 MAIN STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	SPRINGFIELD, MA 01105	

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

- ☒ Form 990   
 ☐ Form 990-EZ   
 ☐ Form 990-T (sec. 401(a) or 408(a) trust)   
 ☐ Form 1041-A   
 ☐ Form 5227   
 ☐ Form 8870  
☐ Form 990-BL   
☐ Form 990-PF   
☐ Form 990-T (trust other than above)   
☐ Form 4720   
☐ Form 6069

**STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

- The books are in the care of **PETER GAGLIARDI**  
 Telephone No **413-785-1251** FAX No \_\_\_\_\_
- 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 is for

- 4 I request an additional 3-month extension of time until **MAY 15, 2007**
- 5 For calendar year \_\_\_\_\_, or other tax year beginning **JUL 1, 2005** and ending **JUN 30, 2006**
- 6 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period
- 7 State in detail why you need the extension

**ADDITIONAL TIME IS REQUIRED TO FILE AN ACCURATE RETURN.**

- 8a 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, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 \$ \_\_\_\_\_
- c **Balance Due.** Subtract line 8b from line 8a. 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 \$ **N/A**

**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 \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

**Notice to Applicant - To Be Completed by the IRS**

- ☐ We **have** approved this application. Please attach this form to the organization's return
- ☐ We **have not** approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return
- ☐ We **have not** approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.
- ☐ We **cannot consider** this application because it was filed after the extended due date of the return for which an extension was requested
- ☐ Other \_\_\_\_\_

By: \_\_\_\_\_ Date \_\_\_\_\_

**Alternate Mailing Address** - Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above

Type or print  523832 05-01-05	Name
	KOSTIN, RUFFKESS & COMPANY, LLC KAN
	Number and street (include suite, room, or apt. no.) or a P.O. box number
	76 BATTERSON PARK ROAD
	City or town, province or state, and country (including postal or ZIP code)
	FARMINGTON, CT 06032