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Amended
Return of Organization Exempt From Income Tax

2006

Open to Public
Inspection

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.

A For the 2006 calendar year, or tax year beginning

, 2006, and ending

, 20

B Check if applicable

Address change
 Name change
 Initial return
 Final return
 Amended return
 Application pending

C Name of organization

Burlington Supportive Housing Initiatives, Inc.

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

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

65 Main Street

D Employer identification number

20-1308308

E Telephone number

(802) 864-0538

F Accounting method: Cash Accrual
 Other (specify) ►

G Website: ► N/A

J Organization type (check only one) ► 501(c)(3) □ (insert no) 4947(a)(1) or 527K Check here ► if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ► 152,268

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 ►

H(c) Are all affiliates included? Yes No
(If "No," attach a list See instructions)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)

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

1 Contributions, gifts, grants, and similar amounts received:	1a		
a Contributions to donor advised funds	1b	151,190	
b Direct public support (not included on line 1a)	1c		
c Indirect public support (not included on line 1a)	1d		
d Government contributions (grants) (not included on line 1a)	1e	151,190	
e Total (add lines 1a through 1d) (cash \$ 151,190 noncash \$)	2		
2 Program service revenue including government fees and contracts (from Part VII, line 93)	3		
3 Membership dues and assessments	4	1,078	
4 Interest on savings and temporary cash investments	5		
5 Dividends and interest from securities	6a	NOV 23 2010	
6a Gross rents	6b	PR-BR-OGDEN	
b Less: rental expenses	6c		
c Net rental income or (loss). Subtract line 6b from line 6a	7		
7 Other investment income (describe ►			
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		
9 Special events and activities (attach schedule). If any amount is from gaming, check here ► <input type="checkbox"/>	8d		
a Gross revenue (not including \$ of contributions reported on line 1b)	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		
11 Other revenue (from Part VII, line 103)	11		
12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12	152,268	
13 Program services (from line 44, column (B))	13	49,294	
14 Management and general (from line 44, column (C))	14	4,307	
15 Fundraising (from line 44, column (D))	15	5,991	
16 Payments to affiliates (attach schedule)	16		
17 Total expenses. Add lines 16 and 44, column (A)	17	59,592	
18 Excess or (deficit) for the year. Subtract line 17 from line 12	18	92,676	
19 Net assets or fund balances at beginning of year (from line 73, column (A))	19	13,982	
20 Other changes in net assets or fund balances (attach explanation)	20		
21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21	106,658	

SCANNED NOV 23 2010 Revenue

Expenses

Net Assets

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

Form 990 (2006)

6/17

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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a	Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	22a			
22b	Other grants and allocations (attach schedule) (cash \$ <u>2,541</u> noncash \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	22b	<u>2,541</u>	<u>2,541</u>	
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25a	Compensation of current officers, directors, key employees, etc. listed in Part V-A (attach schedule)	25a			
b	Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach schedule)	25b			
c	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	25c			
26	Salaries and wages of employees not included on lines 25a, b, and c	26			
27	Pension plan contributions not included on lines 25a, b, and c	27			
28	Employee benefits not included on lines 25a - 27	28			
29	Payroll taxes	29			
30	Professional fundraising fees	30	<u>5,991</u>		<u>5,991</u>
31	Accounting fees	31	<u>3,000</u>	<u>3,000</u>	
32	Legal fees	32			
33	Supplies	33	<u>557</u>	<u>557</u>	
34	Telephone	34			
35	Postage and shipping	35			
36	Occupancy	36			
37	Equipment rental and maintenance	37			
38	Printing and publications	38	<u>200</u>	<u>200</u>	
39	Travel	39			
40	Conferences, conventions, and meetings	40			
41	Interest	41			
42	Depreciation, depletion, etc. (attach schedule)	42	<u>1,006</u>	<u>1,006</u>	
43	Other expenses not covered above (itemize):				
a	<u>Insurance</u>	43a	<u>750</u>		<u>750</u>
b	<u>Tenant Services</u>	43b	<u>45,547</u>	<u>45,547</u>	
c		43c			
d		43d			
e		43e			
f		43f			
g		43g			
44	Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	<u>59,592</u>	<u>49,294</u>	<u>4,307</u>
					<u>5,991</u>

Joint Costs. Check ► if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ► Yes No
If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____;
(iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See 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? ► Housing Supportive Services			Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others)
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)			
a <u>Immigrant Initiatives Program -</u>	<p><u>This program works to improve the success of the over 800 African refugee families currently living in Vermont by assisting with long-term housing situations in the Burlington and Winooski area. Areas of emphasis are cultural integration in the neighborhoods and understanding leases, tenant rights and responsibilities.</u></p> <p>(Grants and allocations \$ <input type="checkbox"/>) If this amount includes foreign grants, check here ► <input type="checkbox"/> 40,430</p>		
b <u>Elderly and Disabled Wellness Program -</u>	<p><u>Provides a broad range of wellness services to the frail elderly and disadvantaged persons served by the Burlington Housing Authority.</u></p> <p>(Grants and allocations \$ <input type="checkbox"/>) If this amount includes foreign grants, check here ► <input type="checkbox"/> 2,359</p>		
c <u>Support of Summer Recreational Nutrition Program -</u>	<p><u>Assists the Burlington Department of Parks and Recreation in providing school-aged children with a healthy, well-balanced lunch during the summer months. The program is located at one of the properties owned by the Burlington Housing Authority.</u></p> <p>(Grants and allocations \$ <input type="checkbox"/>) If this amount includes foreign grants, check here ► <input type="checkbox"/> 1,950</p>		
d	<p>(Grants and allocations \$ <input type="checkbox"/>) If this amount includes foreign grants, check here ► <input type="checkbox"/> 1,950</p>		
e Other program services (attach schedule)	<p>(Grants and allocations \$ <input type="checkbox"/> 2,541) If this amount includes foreign grants, check here ► <input type="checkbox"/> 4,555</p>		
f <u>Total of Program Service Expenses (should equal line 44, column (B), Program services).</u>	<p>► 49,294</p>		

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
45	Cash—non-interest-bearing	13,484	45	93,835
46	Savings and temporary cash investments	N/A	46	N/A
47a	Accounts receivable	N/A		
b	Less: allowance for doubtful accounts	N/A	47c	N/A
48a	Pledges receivable	N/A		
b	Less: allowance for doubtful accounts	N/A	48c	N/A
49	Grants receivable	N/A	49	N/A
50a	Receivables from current and former officers, directors, trustees, and key employees (attach schedule)	N/A	50a	N/A
b	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	N/A	50b	N/A
51a	Other notes and loans receivable (attach schedule)	N/A		
b	Less: allowance for doubtful accounts	N/A	51c	N/A
52	Inventories for sale or use	N/A	52	N/A
53	Prepaid expenses and deferred charges	498	53	749
54a	Investments—publicly-traded securities	► <input type="checkbox"/> Cost <input type="checkbox"/> FMV	54a	N/A
b	Investments—other securities (attach schedule)	► <input type="checkbox"/> Cost <input type="checkbox"/> FMV	54b	N/A
55a	Investments—land, buildings, and equipment, basis	N/A		
b	Less: accumulated depreciation (attach schedule)	N/A	55c	N/A
56	Investments—other (attach schedule)	N/A	56	N/A
57a	Land, buildings, and equipment, basis	18,835		
b	Less: accumulated depreciation (attach schedule)	1,006	57c	17,829
58	Other assets, including program-related investments (describe ►)	N/A	58	N/A
59	Total assets (must equal line 74). Add lines 45 through 58	13,982	59	112,413
60	Accounts payable and accrued expenses	N/A	60	3,214
61	Grants payable	N/A	61	2,541
62	Deferred revenue	0	62	0
63	Loans from officers, directors, trustees, and key employees (attach schedule)	N/A	63	N/A
64a	Tax-exempt bond liabilities (attach schedule)	N/A	64a	N/A
b	Mortgages and other notes payable (attach schedule)	N/A	64b	N/A
65	Other liabilities (describe ►)	N/A	65	N/A
66	Total liabilities . Add lines 60 through 65	0	66	5,755
Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.				
67	Unrestricted	498	67	24,086
68	Temporarily restricted	13,484	68	82,572
69	Permanently restricted	N/A	69	N/A
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	N/A	70	N/A
71	Paid-in or capital surplus, or land, building, and equipment fund	N/A	71	N/A
72	Retained earnings, endowment, accumulated income, or other funds	N/A	72	N/A
73	Total net assets or fund balances . Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)	N/A	73	106,658
74	Total liabilities and net assets/fund balances . Add lines 66 and 73	13,982	74	112,413

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

a Total revenue, gains, and other support per audited financial statements	a	N/A
b Amounts included on line a but not on Part I, line 12:		
1 Net unrealized gains on investments	b1	
2 Donated services and use of facilities	b2	
3 Recoveries of prior year grants	b3	
4 Other (specify):	b4	
Add lines b1 through b4		
c Subtract line b from line a	c	
d Amounts included on Part I, line 12, but not on line a:		
1 Investment expenses not included on Part I, line 6b	d1	
2 Other (specify):	d2	
Add lines d1 and d2		
e Total revenue (Part I, line 12). Add lines c and d ►	e	

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

a Total expenses and losses per audited financial statements	a	N/A
b Amounts included on line a but not on Part I, line 17:		
1 Donated services and use of facilities	b1	
2 Prior year adjustments reported on Part I, line 20	b2	
3 Losses reported on Part I, line 20	b3	
4 Other (specify):	b4	
Add lines b1 through b4		
c Subtract line b from line a	c	
d Amounts included on Part I, line 17, but not on line a:		
1 Investment expenses not included on Part I, line 6b	d1	
2 Other (specify):	d2	
Add lines d1 and d2		
e Total expenses (Part I, line 17). Add lines c and d ►	e	

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.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Brian Pine, CEDO Office, Room 32, City Hall 149 Church Street, Burlington, VT 05401	President 16 hours/annually	0	0	0
Bruce Plumley 9 Franklin Square, Burlington, VT 05401	Vice President 16 hours/annually	0	0	0
Sheila McLaughlin Gorski 84 South Meadow Drive, Burlington, VT 05401	Secretary 16 hours/annually	0	0	0
Neil Wheelwright 305 Maple Street, Burlington, VT 05401	Director 16 hours/annually	0	0	0
Jeanne B. Hutchins, Elder Care Services 792 College Parkway, Suite 205, Colchester, VT 05446	Director 16 hours/annually	0	0	0

Part VI Other Information (continued)

	Yes	No
82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	<input checked="" type="checkbox"/>
b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b	
83a Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	<input checked="" type="checkbox"/>
b Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	83b	<input checked="" type="checkbox"/>
84a Did the organization solicit any contributions or gifts that were not tax deductible?	84a	<input checked="" type="checkbox"/>
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	
b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85b	
c Dues, assessments, and similar amounts from members	85c	
d Section 162(e) lobbying and political expenditures	85d	
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
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	
86 501(c)(7) orgs Enter: a Initiation fees and capital contributions included on line 12.	86a	
b Gross receipts, included on line 12, for public use of club facilities	86b	
87 501(c)(12) orgs Enter: a Gross income from members or shareholders	87a	
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	
88a 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	88a	<input checked="" type="checkbox"/>
b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b	<input checked="" type="checkbox"/>
89a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ► 0 ; section 4912 ► 0 ; section 4955 ► 0	89a	
b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	<input checked="" type="checkbox"/>
c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	89c	0
d Enter: Amount of tax on line 89c, above, reimbursed by the organization	89d	0
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	<input checked="" type="checkbox"/>
f All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	<input checked="" type="checkbox"/>
g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	N/A
90a List the states with which a copy of this return is filed ►		
b Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)	90b	0
91a The books are in care of ► <u>Burlington Supportive Housing Initiatives</u> Telephone no. ► (802) 864-0538 Located at ► <u>65 Main Street, Burlington, VT</u> ZIP + 4 ► <u>05401-8408</u>		
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 ►	91b	<input checked="" type="checkbox"/>
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		

Part VI Other Information (continued)		Yes	No
c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c <input checked="" type="checkbox"/> x			
If "Yes," enter the name of the foreign country ►			
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ► 92 <input type="checkbox"/>			

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

Note: Enter gross amounts unless otherwise indicated.

93 Program service revenue:

- a
- 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
- 96 Dividends and interest from securities
- 97 Net rental income or (loss) from real estate:
 - a debt-financed property
 - b not debt-financed property
- 98 Net rental income or (loss) from personal property
- 99 Other investment income
- 100 Gain or (loss) from sales of assets other than inventory
- 101 Net income or (loss) from special events
- 102 Gross profit or (loss) from sales of inventory
- 103 Other revenue: a
- b
- c
- d
- e

104 Subtotal (add columns (B), (D), and (E))

105 Total (add line 104, columns (B), (D), and (E)) ►

1,078

Note: Line 105 plus line 1e, 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).
▼	

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
	%			
	%			
	%			
	%			

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)

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

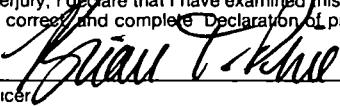
			Yes	No
106	Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.			x

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
	Totals			

			Yes	No
107	Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity			x

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
	Totals			

			Yes	No
108	Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?			

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		Date	11/12/10
	Type or print name and title	Brian T. Pine President		
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN (See Gen Inst X)
	Firm's name (or years if self-employed), address, and ZIP + 4	WALLACE W. TAPIA PC PO BOX 5777 BURLINGTON, VT 05402	EIN	► 03-0323274

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

OMB No 1545-0047

2006

Department of the Treasury
Internal Revenue Service

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

Name of the organization

Burlington Supportive Housing Initiatives

Employer identification number
20 | 1308308

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 2 of the instructions. List each one. If there are none, enter "None.")

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

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

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

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

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

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

Part III Statements About Activities (See page 2 of the instructions.)			Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ (Must equal amounts on line 38, Part VI-A, or line of Part VI-B.)	1	X	
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.				
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)			
2a	a Sale, exchange, or leasing of property?	2a	X	
2b	b Lending of money or other extension of credit?	2b	X	
2c	c Furnishing of goods, services, or facilities?	2c	X	
2d	d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	X	
2e	e Transfer of any part of its income or assets?	2e	X	
3a	3a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)	3a	X	
3b	b Did the organization have a section 403(b) annuity plan for its employees?	3b	X	
3c	c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c	X	
3d	d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d	X	
4a	4a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a	X	
4b	b Did the organization make any taxable distributions under section 4966?	4b	N/A	
4c	c Did the organization make a distribution to a donor, donor advisor, or related person?	4c	N/A	
d	d Enter the total number of donor advised funds owned at the end of the tax year ►			N/A
e	e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ►			N/A
f	f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ►			N/A
g	g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ►			N/A

Part IV **Reason for Non-Private Foundation Status** (See pages 4 through 7 of the instructions.)

I certify that 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 33½% 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 33½% 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 otherwise meets the requirements of section 509(a)(3) Check the box that describes the type of supporting organization

Type I Type II Type III-Functionally Integrated Type III-Other

Provide the following information about the supported organizations. (See page 7 of the instructions.)

14 An organization organized and operated to test for public safety Section 509(a)(4) (See page 7 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) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	10,000	0	0	0	10,000
16 Membership fees received	0	0	0	0	0
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc, purpose	0	0	0	0	0
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	176	0	0	0	176
19 Net income from unrelated business activities not included in line 18.	0	0	0	0	0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	0	0	0	0	0
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge	0	0	0	0	0
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	0	0	0	0	0
23 Total of lines 15 through 22	10,176	0	0	0	10,176
24 Line 23 minus line 17	10,176	0	0	0	10,176
25 Enter 1% of line 23	102	0	0	0	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ►	26a	203			
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 2002 through 2005 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	10,176			
d Add. Amounts from column (e) for lines: 18 176 19 0 22 0 26b 0 ►	26d	176			
e Public support (line 26c minus line 26d total)	26e	10,000			
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ►	26f	98 %			
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:					
(2005) _____ (2004) _____ (2003) _____ (2002) _____					
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:					
(2005) _____ (2004) _____ (2003) _____ (2002) _____					
c Add: Amounts from column (e) for lines: 15 16 17 20 21 ►	27c				
d Add: Line 27a total _____ and line 27b total _____ ►	27d				
e Public support (line 27c total minus line 27d total)	27e				
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) ►	27f				
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	27g	%			
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ►	27h	%			
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return. Do not include these grants in line 15.					

Part V Private School Questionnaire (See page 9 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) ----- ----- -----	31	
32 Does the organization maintain the following: a Records indicating the racial composition of the student body, faculty, and administrative staff? b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? d Copies of all material used by the organization or on its behalf to solicit contributions?	32a	
	32b	
	32c	
	32d	
33 Does the organization discriminate by race in any way with respect to: a Students' rights or privileges? b Admissions policies? c Employment of faculty or administrative staff? d Scholarships or other financial assistance? e Educational policies? f Use of facilities? g Athletic programs? h Other extracurricular activities?	33a	
	33b	
	33c	
	33d	
	33e	
	33f	
	33g	
	33h	
34a Does the organization receive any financial aid or assistance from a governmental agency? b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	34a	
	34b	
35 Does the organization certify that it has complied with the applicable requirements of sections 401 through 4.05 of Rev. Proc. 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35	

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

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

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 13 of the instructions.)

		Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ►		(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
45	Lobbying nontaxable amount					
46	Lobbying ceiling amount (150% of line 45(e))					
47	Total lobbying expenditures					
48	Grassroots nontaxable amount					
49	Grassroots ceiling amount (150% of line 48(e))					
50	Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 13 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)

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

Part VII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 13 of the instructions.)**

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

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

- (i) Cash
- (ii) Other assets

b Other transactions.

- (i) Sales or exchanges of assets with a noncharitable exempt organization
- (ii) Purchases of assets from a noncharitable exempt organization
- (iii) Rental of facilities, equipment, or other assets
- (iv) Reimbursement arrangements
- (v) Loans or loan guarantees
- (vi) Performance of services or membership or fundraising solicitations

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

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

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

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

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

Burlington Supportive Housing Initiatives, Inc.
EIN # 20-1308308

The 2006 tax return included herewith has been amended to reflect 2006 contributions, gifts, grants, etc. (as corrected) of \$151,190 (on Form 990, Part I, Line 1b and 1e) with corresponding revisions made to Schedule A, part IV-A and Schedule B, Part I.

In addition, grants expenses have been restated in Parts II and III of Form 990, and Part VII has been completed.

Burlington Supportive Housing Initiatives, Inc.
Part III – Statement of Program Service Accomplishments
January 1, 2006 – December 31, 2006
20-1308308

Part III, Line e

Neighborhood Networks Technology Center Program – To offer BHA public housing residents a path to economic self-sufficiency through the attainment of technological skills	\$1,006
Other – Local Programs	<u>\$3,549</u>
	<u>\$4,555</u>

Part II, Line 22b

Other Grants: Burlington Housing Authority Housing Initiatives	<u>\$2,541</u>
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