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Form 990-EZ

Short Form 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)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

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

Open to Public

OMB No 1545-1150

2009

Department of the Treasury Internal Revenue Service

or tax year beginning For the 2009 calendar year, and ending Please Name of organization Employer identification number Check if applicable use IRS MERRIMACK VALLEY HOUSING Address change label or PARTNERSHIP INC 04-2950316 Name change print or Number and street (or P O box, if mail is not delivered to street address) Telephone number type. Room/suite Initial return See 978-459-8490 PO BOX 1042 Termination **Specific** Amended return City or town, state or country, and ZIP + 4 Group Exemption Instruc-MA 01853 LOWELL Number Application pending tions • Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach G Accounting method Cash X Accrual a completed Schedule A (Form 990 or 990-EZ). Other (specify) WWW.MVHP.ORG |X| if the organization is not Website: ▶ Check ▶ required to attach Schedule B (Form 990, 990-EZ, or 990-PF) 3) ◀ (insert no) 4947(a)(1) or 527 X 501(c) (Tax-exempt status (check only one) -Check If the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000 A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ 410,292 **▶** \$ Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I) Part I 304,371 Contributions, gifts, grants, and similar amounts received 1 2 Program service revenue including government fees and contracts 2 3 Membership dues and assessments 3 105,921 4 4 Investment income 5a Gross amount from sale of assets other than inventory 5a 5b Less cost or other basis and sales expenses b Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5c Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here Gross revenue (not including \$ of contributions reported on line 1) 6a SOANNED JUN % 6b Less direct expenses other than fundraising expenses Net income or (loss) from special events and activities (Subtract line 6b from line 6a) 6c Gross sales of inventory, less returns and allowances 7a 7b Less cost of goods sold Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7с Other revenue (describe 8) 410,292 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 RECEIVED 10 Grants and similar amounts paid (attach schedule) 10 11 Benefits paid to or for members 11 $\tilde{\infty}$ MAY 17 2010 12 223,993 12 Salaries, other compensation, and employee benefits Q Ŗ 10,820 13 Professional fees and other payments to independent contractors 13 OGUEN. UT 9,086 14 14 Occupancy, rent, utilities, and maintenance 15 15 Printing, publications, postage, and shipping 61,988 Other expenses (describe ► SEE STATEMENT 1 16 16 Total expenses. Add lines 10 through 16 17 305,887 17 104,405 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 693,706 end-of-year figure reported on prior year's return) 19 SEE STATEMENT 2 Other changes in net assets or fund balances (attach explanation) 20 20 798. 21 Net assets or fund balances at end of year Combine lines 18 through 20 Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ (A) Beginning of year (B) End of year (See the instructions for Part II) 674,642 723,335 22 Cash, savings, and investments 22 23 Land and buildings 23 74, 777 19,068 24 SEE STATEMENT 3 24 Other assets (describe 693*.*710| 798,112 25 25 Total assets 0 SEE STATEMENT 4 4 26 26 Total liabilities (describe 693 706 798.112 27 27 Net assets or fund balances (line 27 of column (B) must agree with line 21)

Form **990-EZ** (2009)

DAA

For	m 990-ÈZ (2009) · MERRIMACK VALLEY HOUSING	04	-2950316				Page 2
F	Part III Statement of Program Service Accomplishments (See the instruct	ions for Part III	.)_		Ex	penses
Wh	nat is the organization's primary exempt purpose?				(R	equired	for section
7	TO ASSIST LOW INCOME FAMILIES IN FINDING HOUSING				50	11(c)(3) a	and 501(c)(4)
	scribe what was achieved in carrying out the organization's exempt purposes. In a					-	ons and section
ma	nner, describe the services provided, the number of persons benefited, or other re-	levant information fo	r				trusts, optional
	ch program title				foi	r others))
28	CONDUCTING SEMINARS TO EDUCATE-LOW INCOME FAMILIES ON HOW				•		
	TO OBTAIN HOME MORTGAGES AND ASSISTING LOW INCOME FAMILIE	ES			}		
	IN FINDING SUITABLE HOUSING.	1 . 1	_		00-		305 007
20	(Grants \$) If this amount includes foreign grants, chi	eck nere		L_L	28a		305,887
29							
	(Grants \$) If this amount includes foreign grants, chi	erk here	•	\Box	29a		
30	(Starts \$) If this amount includes foreign grants, circ	eck fiere		IL	230		
30							
	(Grants \$) If this amount includes foreign grants, chi	eck here	>	\Box	30a	1	
31	Other program services (attach schedule)						
	(Grants \$) If this amount includes foreign grants, chi	eck here	•	\Box	31a		
32	Total program service expenses (add lines 28a through 31a)			▶	32		305,887
F	Part IV List of Officers, Directors, Trustees, and Key Employees. List ea	ch one even if not co	mpensated (See t				art IV)
	(a) Name and address	(b) Title and average hours per week	(c) Compensation (If not paid,	(d) emol	Contrib	outions to efit plans &	(e) Expense account and
	(a) Name and address	devoted to position	enter -0)			pensation	other allowances
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Form **990-EZ** (2009)

Pa	rt V Other Information (Note the statement requirements in the instructions for I	Part V.)			
	1			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed				
	description of each activity		33		Х
34	Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of				
	the changes		34		Х
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not	reported			
	on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T				
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section				
	6033(e) notice, reporting, and proxy tax requirements?		35a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		35b		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets				
	during the year? If "Yes," complete applicable parts of Schedule N		36		<u>X</u>
37a	Enter amount of political expenditures, direct or indirect, as described in the instr				
b	Did the organization file Form 1120-POL for this year?		37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were)			
	any such loans made in a prior year and still outstanding at the end of the period covered by this return?		38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	<u> </u>			
39	Section 501(c)(7) organizations Enter				
а	Initiation fees and capital contributions included on line 9				
b	Gross receipts, included on line 9, for public use of club facilities 39b				
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under				
	section 4911 ▶, section 4912 ▶, section 4955 ▶				
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benef	t			
	transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified				
	person in a prior year, and that the transaction has not been reported on any of the organization's prior				
	Forms 990 or 990-EZ? If "Yes," complete Schedule L. Part I		40b		X
С	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on				
	organization managers or disqualified persons during the year under sections 4912,				
	4955, and 4958 ▶	······································			
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c				
	reimbursed by the organization				
0	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter				
	transaction? If "Yes," complete Form 8886-T		40e		X
41	List the states with which a copy of this return is filed MA				
42a	The organization's books are in care of ▶ JAMES WILDE	Telephone no ► 978	-45	9 - 8	490
	PO BOX 1042				
	Located at ► LOWELL, MA	ZIP+4 ▶ 018	53		
þ	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			Yes	No
	account)?		42b		X
	If "Yes," enter the name of the foreign country				
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank				
	and Financial Accounts.				
C	At any time during the calendar year, did the organization maintain an office outside of the U.S.?		42c		X
	If "Yes," enter the name of the foreign country				
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here	1 1			
	and enter the amount of tax-exempt interest received or accrued during the tax year	▶ 43			
				¥	
	Dath			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of		44		v
	Form 990-EZ		44		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If		4.5	:	v
	"Yes," Form 990 must be completed instead of Form 990-EZ		45	n_=7	(2009)
		Fo	orm 33	U-E&	. (2009)

Date

04/26/1

Check d

employed >

EIN

Phone

20-2019806

978-372-8222

Preparer's Identifying Number (See instr.)

P00118769

Paid

Preparer's

Use Only

Preparer's

signature

Firm's name (or yours

address, and ZIP + 4

if self-employed),

ROSATONE

116 SUMMER

HAVERHILL,

May the IRS discuss this return with the preparer shown above? See instructions

&

BELL,

01830-6032

ST

MA

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2009 Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

MERRIMACK VALLEY HOUSING

PARTNERSHIP INC

Employer identification number 04 - 2950316

Pa	Part 1 Reason for Public Charity Status (All organizations must complete this part.) See instructions.												
	e organization is not a private foundation because it is. (For lines 1 through 11, check only one box.)												
1	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).												
2	П	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)											
3	П	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4	Н	•	•	d in conjunction with a hospital de				(A)(iii)	Enter th	e hospi	ital's name		
•	ш		•	a in conjunction with a neophar de				(,, ,,().		.ссор.			
_		city, and state		of a college or university award or	. aparatad	h., a aa.,a	romonto	l unit do	aaribad				
5		•	•	of a college or university owned or	operated	by a gove	mmenta	n urni de	scribed	III			
	$\overline{}$		b)(1)(A)(iv). (Complete Part										
6			•	overnmental unit described in sec	•		-						
7	X			substantial part of its support from	n a govern	mental un	it or fron	n the gei	neral pu	blic			
		described in s	section 170(b)(1)(A)(vi). (C	omplete Part II)									
8		A community	trust described in section 1	70(b)(1)(A)(vi) . (Complete Part II	1)								
9		An organization	on that normally receives (1	I) more than 33 1/3 % of its suppo	ort from co	ntributions	s, memb	ership fe	es, and	t gross			
		receipts from	activities related to its exen	npt functions-subject to certain e	exceptions,	and (2) n	o more	han 33	1/3 % of	lts			
		support from	gross investment income ar	nd unrelated business taxable inc	ome (less	section 51	11 tax) fr	om busi	nesses				
		acquired by th	ne organization after June 3	0, 1975 See section 509(a)(2) . (Complete	Part III)							
10		An organization	on organized and operated	exclusively to test for public safety	See sec	tion 509(a	a)(4).						
11	П	An organization	on organized and operated	exclusively for the benefit of, to pe	erform the	functions	of, or to	carry ou	t the				
	_	purposes of o	ne or more publicly support	ed organizations described in sec	tion 509(a)(1) or sec	ction 509	(a)(2). S	See sec	tion			
		509(a)(3). Ch	eck the box that describes t	he type of supporting organization	n and com	plete lines	11e thr	ough 11	h				
		a Type		c Type III-Functions			d		e III-Otl	ner			
е			·	anization is not controlled directly			or more						
	لبيا			and other than one or more publi						tion			
		•	ection 509(a)(2)	and and war and a mare pass	o.,								
		, ,, ,		rmination from the IRS that it is a	Type I Ty	nell or T	voe III s	unnortin	a				
f			check this box		1) 1 1 1	pc 11, 01 1	ypc 5	аррогии	9				П
		-		tion accepted any gift or contribut	on from a	ny of the							Ш
g				tion accepted any gift of contribut	ion ironi ai	ly of the							
		following per					al .a. (11)					Van	No
		• • •	•	ontrols, either alone or together w	iin persons	s describe	a in (ii)				44.00	Yes	No
				f the supported organization?							11g(i)		
			member of a person descri								11g(li	-	
		(iii) A 35% c	ontrolled entity of a person of	described in (i) or (ii) above?							11g(ii	9)1	1
h		Provide the f	ollowing information about t	he supported organization(s)			ſ						
(i)		e of supported	(ii) EIN	(iii) Type of organization	1 ' '	organization		ou notify		s the		ount of	
	org	anization		(described on lines 1–9 above or IRC section	1 ''	sted in your		nization in of your	organizat (i) organi	zed in the		port	
				(see instructions))	governing document?		sup	oort?	U	S ?			
					Yes	No	Yes	No	Yes	No			
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				1									
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Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A, Public Support Calendar year (or fiscal year beginning in) ▶ (b) 2006 (a) 2005 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 274,000 282,856 352,643 344,383 304,371 1,558,253 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 282,856 Total. Add lines 1 through 3 274,000 352,643 344,383 304,371 1,558,253 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 1,558,253 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Amounts from line 4 274,000 282,856 352,643 344,383 304,371 1,558,253 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar <u>16,4</u>59 13,491 19,309 9,043 17.447 75,749 sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. Add lines 7 through 10 11 1,634,002 12 12 Gross receipts from related activities, etc. (see instructions) 105,921 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 95 36% 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2008 Schedule A, Part II, line 14 95 90% 15 33 1/3 % support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3 % support test-2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test-2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or

more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2009

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Schedule À (Form 990'or 990-EZ) 2009 MERRIMACK VALLEY HOUSING

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

<u></u>	(Complete only if you che	cked the box	on line 9 of Pa	π ι.)		·	
	tion A, Public Support		1	1	1	1	
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received	1					į
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year				 	 	
C	Add lines 7a and 7b		<u> </u>			<u> </u>	
8	Public support (Subtract line 7c from line 6)						
	tion B. Total Support	Τ		1	,	·	r
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b		ļ	<u> </u>	<u> </u>		
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,					[
	and 12)		<u> </u>	<u></u>	<u> </u>		
14	First five years. If the Form 990 is for the o	•	second, third, four	th, or fifth tax year a	as a section 501(c)	(3)	
	organization, check this box and stop here					 	<u> </u>
Sec	tion C. Computation of Public Su	ipport Percent	tage				,
15	Public support percentage for 2009 (line 8,		-	(f))		15	%
<u>16</u>	Public support percentage from 2008 Sche					16	<u></u> %
Sec	tion D. Computation of Investme	nt Income Per	centage				
17	Investment income percentage for 2009 (lin	ne 10c, column (f) o	divided by line 13, o	column (f))		_17	%
18	Investment income percentage from 2008					18	%
19a							
b	17 is not more than 33 1/3 %, check this bo 33 1/3 % support tests—2008. If the organ		•		-		▶ <u> </u>
	line 18 is not more than 33 1/3 %, check th	is box and stop h e	re. The organization	on qualifies as a pu	blicly supported org	anization	▶ [_
20	Private foundation. If the organization did	not check a box or	n line 14 19a or 19	9h check this how a	and see instructions		▶

Schedule A (Form 990 or 990-EZ) 2009 MERRIMACK VALLEY HOUSING

04-2950316

Page 4

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

▶ See separate instructions.

► Attach to your tax return.

Attachment Sequence No

MERRIMACK VALLEY HOUSING Identifying number Name(s) shown on return PARTNERSHIP INC 04-2950316 Business or activity to which this form relates INDIRECT DEPRECIATION **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. 250,000 1 Maximum amount. See the instructions for a higher limit for certain businesses. 2 2 Total cost of section 179 property placed in service (see instructions) 800,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0- If married filing separately, see instructions 5 (b) Cost (business use only) (c) Elected cost (a) Description of property Listed property Enter the amount from line 29 7 8 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 Tentative deduction Enter the smaller of line 5 or line 8 9 9 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 12 Section 179 expense deduction, Add lines 9 and 10, but do not enter more than line 11 12 Carryover of disallowed deduction to 2010 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 Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instr.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 during the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 15 16 16 Other depreciation (including ACRS) Part III MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 3,354 17 MACRS deductions for assets placed in service in tax years beginning before 2009 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 2009 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (e) Convention (f) Method (a) Depreciation deduction (a) Classification of property placed in (business/investment use period only-see instructions) service 19a 3-year property 2,157 5.0 HY 200DB 432 5-year property 7-year property d 10-year property 15-year property 20-year property S/L 25-year property 25 yrs 27 5 vrs MM S/L Residential rental property MM 27 5 yrs S/L MM S/L Nonresidential real 39 yrs property MM S/L Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life S/L S/I 12 yrs b 12-year MM S/L 40-year 40 yrs Part IV Summary (See instructions.) 21 Listed property Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 22 3,786 and on the appropriate lines of your return. Partnerships and S corporations—see instructions 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

Form 4562 (2009)

For Paperwork Reduction Act Notice, see separate instructions.

1307 MERRIMACK VALLEY HOUSING

04-2950316

Federal Statements

4/26/2010 8:51 AM

FYE: 12/31/2009

Statement 1 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
EXPENSES	\$
ADVERTISING AND PROMOTION	4,974
OFFICE	9,129
INFORMATION TECHNOLOGY	3,819
TRAVEL	1,554
CONFERENCES/MEETINGS	1,717
INSURANCE	3,145
COURSE MATERIALS	1,538
FOOD FOR MEETINGS/CLASSES	9,612
PROFESSIONAL SUBSCRIPTION	2,315
COMPUTER TECH ASSISTANCE	2,764
COPYING & PRINTING&DESIGN	16,908
TELEPHONE	2,277
OTHER	2,236
TOTAL	\$ 61,988

Statement 2 - Form 990-EZ, Part I, Line 20 - Other Changes in Net Assets or Fund Balances

	Description		<u>int</u>
ROUNDING		\$	1
TOTAL		\$	1

Statement 3 - Form 990-EZ, Part II, Line 24 - Other Assets

Description	 Beginning of Year	 End of Year
ACCOUNTS RECEIVABLE	\$ 7,680	\$ 65,017
LESS ACCUMULATED DEPRECIATION	 67,542 56,154	 69,700 59,940
	 19,068	 74,777

Statement 4 - Form 990-EZ, Part II, Line 26 - Total Liabilities

Description	inning Year	End of Year
ACCOUNTS PAYABLE AND ACCRUED EXPENSES	\$ 4	\$
	 4	

Year Ended: December 31, 2009 04-2950316

MERRIMACK VALLEY HOUSING PARTNERSHIP INC PO BOX 1042 LOWELL, MA 01853

Electing out of the 50% Bonus Depreciation Allowance for 5-Year Property

The taxpayer elects out of the 50% first-year bonus depreciation allowance under IRC Section 168(k) for 5-year depreciable property acquired after December 31, 2007. This election applies to all such qualified 50% bonus depreciation property placed in service during the tax year.



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2009-2010

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