Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:
AIDS PROJECT GREATER DANBURY (APGD)PROVIDES TEMPORARY HOUSING, HOUSING ASSISTANCE, AND COUNSELING TO PERSONS WITH AIDS AND THOSE WHO ARE HIV POSITIVE. APGD ALSO PROVIDES AIDS AND HIV EDUCATION TO THE GENERAL PUBLIC IN THE GREATER DANBURY AREA

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code) (Expenses $ 205,440. including grants of $ 205,440.) (Revenue $ 100.)
RENTAL ASSISTANCE TO PERSONS WITH AIDS, SUPPORTIVE SERVICES ARE PROVIDED TO PROGRAM PARTICIPANTS THROUGH QUALIFIED STAFF. HOUSING INFORMATION SERVICES INCLUDING HOUSING SEARCH AND ASSISTANCE, REFERRAL, ADVOCACY AND COUNSELING. RESOURCE IDENTIFICATION THROUGH STAFF OUTREACH, RELATIONSHIP BUILIDNG,AND LOCATIN HOUSING OPPORTUNITIES AND VACANCIES

4b (Code) (Expenses $ 371,246. including grants of $ 371,246.) (Revenue $ 0.)
SUPPORTIVE SERVICES TO PERSONS WITH AIDS WHICH INCLUDES, CASE MANAGEMENT, MENTAL HEALTH COUNSELING, SUBSTANCE ABUSE COUNSELING, HOUSING REFERRALS, TRANSPORTATION, EMERGENCY FINANCIAL ASSISTANCE, LIFE SKILLS BUILDING, HIV COUNSELING AND TESTING, YOUTH & COMMUNITY OUTREACH AND NEEDLE EXCHANGE.

4c (Code) (Expenses $ 192,222. including grants of $ 192,222.) (Revenue $ 0.)
PRIMARY CARE FOR FOOD, UTILITIES, AND MEDICAL EXPENSES TO PERSONS WITH AIDS FOR PREVENTION AND OUTREACH. PROGRAM STAFF WILL UTILIZE MULTIPLE TECHNIQUES TO DELIVER CULTURALLY AND LANGUAGE APPROPRIATE PREVENTION AND RISK REDUCTION INFORMATION TO THE COMMUNITY. INDIVIDUAL LEVEL AND OUTREACH ACTIVITIES ARE BROUGHT TO WHERE PEOPLE ACTUALLY CONGREGATE. DISTRIBUTION OF HIV/AIDS PREVENTION MATERIALS, EDUCATIONAL LITERATURE AND INFORMATION REGARDING COUNSELING AND TESTING FOR HIV AND OTHE SEXUALLY TRANSMITED DISEASES IS MADE AVAILABLE THROUGH THE AIDS PROJECT.

4d Other program services (Describe in Schedule O)
(Expenses $ 257,628. including grants of $ 257,628.) (Revenue $)

4e Total program service expenses ▶ $ 1,026,536.

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*	4		X
5	**Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		X
11	Is the organization's answer to any of the following questions "Yes"? *If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable*	11	X	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*			
	• Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII.*			
	• Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*			
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*			
	• Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*			
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? *If "Yes," complete Schedule D, Part X.*			
12	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional* — 12A Yes: ___ No: X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Part I*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Part II*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Part III*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	X	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		X

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	X	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K If "No", go to line 25*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization 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*	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35		X
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable	1a	0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	12			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b		X
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* this return. (see instructions)					
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			3b		
4a	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)?			4a		X
b	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					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				

Form **990** (2009)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year Use Schedule J-2 if additional space is needed

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers, key employees, highest compensated employees, and former such persons

[X] Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
ROBIN HOWELL SECRETARY	1.00	X		X				0.	0.	0.
JEFF CARRINE TREASURER	1.00	X		X				0.	0.	0.
DONALD EVANS MD PRESIDENT	1.00	X		X				0.	0.	0.
WILLIAM LAVERY DIRECTOR	1.00	X						0.	0.	0.
WANDA MCGARRY VICE PRESIDENT	1.00	X		X				0.	0.	0.
KENNETH COUSAR DIRECTOR	1.00	X						0.	0.	0.
DR LANA TIKHOMIROVA DIRECTOR	1.00	X						0.	0.	0.
BOB GODFREY DIRECTOR	1.00	X						0.	0.	0.
BARBARA LOVE DIRECTOR	1.00	X						0.	0.	0.
RICHARD DELGUIDICE DIRECTOR	1.00	X						0.	0.	0.
JACK CHIUSA DIRECTOR	1.00	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(continued)*

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
1b Total ▶								0.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶ 0

		Yes	No
3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization NONE

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶ 0

Part VIII Statement of Revenue

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	1,060,283.				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	2,728.				
	g	Noncash contributions included in lines 1a-1f $						
	h	**Total.** Add lines 1a-1f ▶			1,063,011.			
Program Service Revenue			Business Code					
	2 a	HOUSING RENTS	900099		7,405.	7,405.		
	b							
	c							
	d							
	e							
	f	All other program service revenue						
	g	**Total.** Add lines 2a-2f ▶			7,405.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶			2,061.			2,061.
	4	Income from investment of tax-exempt bond proceeds ▶						
	5	Royalties ▶						
			(i) Real	(ii) Personal				
	6 a	Gross Rents						
	b	Less rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss) ▶						
			(i) Securities	(ii) Other				
	7 a	Gross amount from sales of assets other than inventory						
	b	Less cost or other basis and sales expenses						
	c	Gain or (loss)						
	d	Net gain or (loss) ▶						
	8 a	Gross income from fundraising events (not including $ ______ of contributions reported on line 1c) See Part IV, line 18	a	30,795.				
	b	Less direct expenses	b	21,442.				
	c	Net income or (loss) from fundraising events ▶			9,353.			9,353.
	9 a	Gross income from gaming activities See Part IV, line 19	a					
	b	Less direct expenses	b					
	c	Net income or (loss) from gaming activities ▶						
	10 a	Gross sales of inventory, less returns and allowances	a					
	b	Less cost of goods sold	b					
	c	Net income or (loss) from sales of inventory ▶						
		Miscellaneous Revenue	Business Code					
	11 a							
	b							
	c							
	d	All other revenue						
	e	**Total.** Add lines 11a-11d ▶						
	12	**Total revenue** See instructions ▶			1,081,830.	7,405.	0.	11,414.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2 Grants and other assistance to individuals in the U S See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	498,909.	455,586.	30,945.	12,378.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	25,905.	10,782.	13,464.	1,659.
10 Payroll taxes	99,665.	84,059.	11,586.	4,020.
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	5,000.	1,000.	4,000.	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other	18,276.	15,967.	542.	1,767.
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	76,324.	63,375.	9,712.	3,237.
17 Travel	19,833.	18,755.	1,078.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	15,867.	12,694.	2,380.	793.
23 Insurance				
24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a PASS THROUGH TO OTHER A	158,440.	158,440.		
b ASSISTANCE	143,850.	143,850.		
c OTHER	29,831.	15,272.	14,092.	467.
d INSURANCE	23,466.	18,700.	3,753.	1,013.
e REPAIRS & MAINTENANCE	16,178.	12,942.	2,427.	809.
f All other expenses	19,691.	15,114.	3,972.	605.
25 **Total functional expenses** Add lines 1 through 24f	1,151,235.	1,026,536.	97,951.	26,748.
26 **Joint costs** Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		477,420.	1	343,487.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		121,067.	3	243,536.
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		39,209.	9	29,353.
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 587,184.			
	b	Less accumulated depreciation	10b 380,674.	216,848.	10c	206,510.
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line 11			12	
	13	Investments - program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		5,051.	15	5,051.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		859,595.	16	827,937.
Liabilities	17	Accounts payable and accrued expenses		88,765.	17	126,512.
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities Complete Part X of Schedule D			25	
	26	**Total liabilities.** Add lines 17 through 25		88,765.	26	126,512.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		770,830.	27	701,425.
	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117, check here ▶ [ ] and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		770,830.	33	701,425.
	34	Total liabilities and net assets/fund balances		859,595.	34	827,937.

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other ______ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both. ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b	X	

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Name of the organization AIDS PROJECT GREATER DANBURY, INC
AIDS PROJECT GREATER DANBURY, INC

Employer identification number 22-2951387

Part I **Reason for Public Charity Status** (All organizations must complete this part) See instructions

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box)

07

1 [ ] A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 [ ] A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 [ ] A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 [ ] A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state·

5 [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 [ ] A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 [X] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 [ ] A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 [ ] 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 exempt 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).** (Complete Part III)

10 [ ] An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 [ ] An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a [ ] Type I b [ ] Type II c [ ] Type III - Functionally integrated d [ ] Type III - Other

e [ ] By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box [ ]

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)		
(ii) A family member of a person described in (i) above?	11g(ii)		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document? Yes	No	(v) Did you notify the organization in col (i) of your support? Yes	No	(vi) Is the organization in col (i) organized in the U S ? Yes	No	(vii) Amount of support
Total									

Part II **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) ▶	(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.")	754,635.	804,008.	777,116.	955,551.	1063011.	4354321.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	754,635.	804,008.	777,116.	955,551.	1063011.	4354321.
5 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)						
6 **Public support.** Subtract line 5 from line 4						4354321.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	754,635.	804,008.	777,116.	955,551.	1063011.	4354321.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	8,113.	13,642.	12,555.	6,547.	2,061.	42,918.
9 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)						
11 **Total support.** Add lines 7 through 10						4397239.

12 Gross receipts from related activities, etc. (see instructions) | 12 | 89,989.

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 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	99.02 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	98.91 %

16a **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 ▶ [X]

b **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 ▶ ☐

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

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

Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I)

Section A. Public Support

Calendar 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 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						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar 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						
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)						

14 **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

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) | 15 | %

16 Public support percentage from 2008 Schedule A, Part III, line 15 | 16 | %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2009** (line 10c, column (f) divided by line 13, column (f)) | 17 | %

18 Investment income percentage from **2008** Schedule A, Part III, line 17 | 18 | %

19a **33 1/3% support tests - 2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests - 2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Schedule D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047
2009
Open to Public Inspection

Name of the organization AIDS PROJECT GREATER DANBURY, INC
AIDS PROJECT GREATER DANBURY, INC

Employer identification number 22-2951387

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
☐ Preservation of land for public use (e g , recreation or pleasure)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ ______

4 Number of states where property subject to conservation easement is located ▶ ______

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ ______

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ______

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ ______

(ii) Assets included in Form 990, Part X ▶ $ ______

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ______

b Assets included in Form 990, Part X ▶ $ ______

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply).

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV **Escrow and Custodial Arrangements.** Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table.

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

Part V **Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

a Board designated or quasi-endowment ▶ ______ %

b Permanent endowment ▶ ______ %

c Term endowment ▶ ______ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI **Investments - Land, Buildings, and Equipment.** See Form 990, Part X, line 10

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		37,000.		37,000.
b Buildings		368,607.	222,428.	146,179.
c Leasehold improvements				
d Equipment				
e Other		181,577.	158,246.	23,331.
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				206,510.

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
Total (Col (b) must equal Form 990, Part X, col (B) line 12) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Total (Col (b) must equal Form 990, Part X, col (B) line 13) ▶		

Part IX Other Assets. See Form 990, Part X, line 15

(a) Description	(b) Book value
Total *(Column (b) must equal Form 990, Part X, col (B) line 15)* ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of liability	(b) Amount
Federal income taxes	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

AIDS PROJECT GREATER DANBURY, INC

Part XI | Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,081,830.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,151,235.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	<69,405.>
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 through 8	9	0.
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	<69,405.>

Part XII | Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	1,081,830.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	0.
3	Subtract line **2e** from line **1**			3	1,081,830.
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total revenue Add lines **3** and **4c**. *(This must equal Form 990, Part I, line 12)*			5	1,081,830.

Part XIII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	1,151,235.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	0.
3	Subtract line **2e** from line **1**			3	1,151,235.
4	Amounts included on Form 990, Part IX, line 25, but not on line **1**.				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total expenses Add lines **3** and **4c**. *(This must equal Form 990, Part I, line 18)*			5	1,151,235.

Part XIV | Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4; Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

▶ Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2009

Open To Public Inspection

Name of the organization AIDS PROJECT GREATER DANBURY, INC
AIDS PROJECT GREATER DANBURY, INC

Employer identification number 22-2951387

Part I Fundraising Activities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply

a [ ] Mail solicitations
b [ ] Internet and email solicitations
c [ ] Phone solicitations
d [ ] In-person solicitations
e [ ] Solicitation of non-government grants
f [ ] Solicitation of government grants
g [X] Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? [ ] Yes [ ] No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
Total ▶						

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 on Form 990-EZ, line 6a List events with gross receipts greater than $5,000

		(a) Event #1 FUND RAISING CAPITOL STE (event type)	(b) Event #2 (event type)	(c) Other events NONE (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	30,795.			30,795.
	2 Less: Charitable contributions				
	3 Gross income (line 1 minus line 2)	30,795.			30,795.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	21,442.			21,442.
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				(21,442.)
	11 Net income summary Combine line 3, column (d), and line 10 ▶				9,353.

Part III **Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				( )
	8 Net gaming income summary Combine line 1, column (d), and line 7 ▶				

		Yes	No
9 Enter the state(s) in which the organization operates gaming activities: ____			
a Is the organization licensed to operate gaming activities in each of these states?	9a		
b If "No," explain.			
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a		
b If "Yes," explain.			
11 Does the organization operate gaming activities with nonmembers?	11		
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12		

			Yes	No
13 Indicate the percentage of gaming activity operated in.				
a The organization's facility	**13a**	%		
b An outside facility	**13b**	%		
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records. Name ▶ Address ▶				
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		**15a**		
b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ ________ and the amount of gaming revenue retained by the third party ▶ $ ________				
c If "Yes," enter name and address of the third party: Name ▶ Address ▶				
16 Gaming manager information Name ▶ Gaming manager compensation ▶ $ Description of services provided ▶ ☐ Director/officer ☐ Employee ☐ Independent contractor				
17 Mandatory distributions.				
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		**17a**		
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $				

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22

▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization AIDS PROJECT GREATER DANBURY, INC
AIDS PROJECT GREATER DANBURY, INC

Employer identification number 22-2951387

Part I **General Information on Grants and Assistance**

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☒ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II **Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000 Check this box if no one recipient received more than $5,000 Use Part IV and Schedule I-1 (Form 990) if additional space is needed ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DANBURY HOSPITAL HOSPITAL AVE DANBURY, CT 06810			0.	0.			
INTERFAITH AIDS MINISTRY ROSE STREET DANBURY, CT 06810			0.	0.			

2 Enter total number of section 501(c)(3) and government organizations ▶

3 Enter total number of other organizations ▶

LHA **For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.** **Schedule I (Form 990) 2009**

932101 02-02-10

AIDS PROJECT GREATER DANBURY, INC
AIDS PROJECT GREATER DANBURY, INC
22-2951387

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization: AIDS PROJECT GREATER DANBURY, INC
AIDS PROJECT GREATER DANBURY, INC

Employer identification number 22-2951387

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

LIVING WITH HIV/AIDS, THEIR FAMILIES, AND LOVED ONES AND TO ACTIVELY

PROMOTE AIDS EDUCATION AND PREVENTION IN THE COMMUNITY

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

EDUCATION PROGRAMS, AIDS PREVENTION,

EXPENSES $ 257628. INCLUDING GRANTS OF $ 257628. REVENUE $ 0.

FORM 990, PART VI, SECTION B, LINE 11: THE BOARD OF DIRECTORS MEETS WITH THE CERTIFIED PUBLIC ACCOUNTANT TO REVIEW THE FINANCIAL STATEMENTS, MANAGEMENT LETTER , FORM 990 AND ANY OTHER REPORTS ISSUED.

FORM 990, PART VI, SECTION B, LINE 12C: ALL EMPLOYEES AND DIRECTORS OF THE ORGANZIATION ARE REQUIRED TO FILE AN ANNUAL CODE OF CONDUCT AND CONFLICT OF INTEREST STATEMENT THAT REAFFIRMS THEIR INDEPENDENCE.

FORM 990, PART VI, SECTION B, LINE 15A: THE EXECUTIVE DIRECTORS SALARY IS DETERMINED BY A REVIEW OF THE BOARD OF DIRECTORS OF SALARIES PAID BY OTHER NON-PROFIT ORGANIZATIONS IN THE GREATER DANBURY AREA

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATIONS ORGANIZING DOCUMENTS, FINANCIAL STATEMENTS AND FORM 990 ARE AVAILABLE FOR PUBLIC INSPECTION UPON A WRITTEN REQUEST TO THE EXECUTIVE DIRECTOR

PART XI LINE 2C

COMMITTEE CHARGED WITH OVERSIGHT OF THE AUDIT

SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization	Employer identification number
AIDS PROJECT GREATER DANBURY, INC AIDS PROJECT GREATER DANBURY, INC	22-2951387

THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS APPROVES THE APPOINTMENT OF THE INDEPENDENT ACCOUNTANT ANNUALLY. IN ADDITION, THE COMMITTEE MEETS WITH THE INDEPENDENT ACCOUNTANT TO REVIEW THE AUDITED FINANCIAL STATEMENTS AND FORM 990.

2009 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10 990

Asset No.	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
1	LAND	030193	L			37,000.			37,000.			0.
	* 990 PAGE 10 TOTAL OTHER					37,000.		0.	37,000.	0.	0.	0.
	PROGRAM SERVICES											
2	BUILDING	030193	SL	27.50	16	353,607.			353,607.	204,118.		12,858.
3	FURNITURE	040197	SL	10.00	16	1,119.			1,119.	1,119.		0.
4	HOUSE FURNITURE	070198	SL	10.00	16	946.			946.	946.		0.
5	OFFICE FURNITURE	050198	SL	10.00	16	710.			710.	213.		0.
6	HOUSE IMPROVEMENT	070199	SL	10.00	16	18,591.			18,591.	18,591.		0.
7	OFFICE FURNITURE	070199	SL	10.00	16	3,743.			3,743.	3,743.		0.
8	HOUSE FURNITURE	070199	SL	10.00	16	2,700.			2,700.	2,565.		135.
9	ROOF REPLACEMENT	070100	SL	27.50	16	15,000.			15,000.	4,907.		545.
10	DUCT WORK	100102	SL	5.00	16	5,200.			5,200.	5,200.		0.
11	GLASS	100102	SL	5.00	16	9,325.			9,325.	9,325.		0.
12	DUCT WORK	110102	SL	5.00	16	2,600.			2,600.	2,600.		0.
13	DUCT WORK	120102	SL	5.00	16	325.			325.	325.		0.
14	ELECTRICAL IMPROVEMENTS	120402	SL	5.00	16	6,950.			6,950.	6,950.		0.
15	STOVE	120402	SL	5.00	16	1,250.			1,250.	1,250.		0.
16	TELEPHONE SYSTEM	120402	SL	5.00	16	1,021.			1,021.	1,021.		0.

928102
06-24-09

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2009 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10 990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
17	COMPUTER	120402	SL	3.00	16	2,999.			2,999.	2,999.		0.
18	HOUSE IMPROVEMENT	030103	SL	5.00	16	4,265.			4,265.	4,265.		0.
28	FURNITURE & FIXTURES	060198	SL	5.00	16	41,829.			41,829.	31,404.		0.
34	VAN	070101	SL	5.00	16	8,999.			8,999.	8,999.		0.
35	COMPUTER	090101	SL	5.00	16	11,971.			11,971.	11,971.		0.
45	OFFICE FURNITURE	040903	SL	5.00	16	5,525.			5,525.	5,525.		0.
46	WINDOWS	081203	SL	5.00	16	1,200.			1,200.	1,200.		0.
47	CARPET	111403	SL	5.00	16	1,691.			1,691.	1,691.		0.
48	FURNITURE	120303	SL	5.00	16	4,898.			4,898.	4,898.		0.
49	COMPUTER	120603	SL	3.00	16	1,594.			1,594.	1,594.		0.
50	DONATED VEHICLE	051903	SL	3.00	16	1,025.			1,025.	1,025.		0.
51	STOVE	063003	SL	3.00	16	1,496.			1,496.	1,496.		0.
52	DONATED COPIER	063003	SL	3.00	16	8,000.			8,000.	8,000.		0.
53	FURNITURE	100303	SL	5.00	16	1,225.			1,225.	1,225.		0.
54	OTHER	100103	SL	3.00	16	1,496.			1,496.	1,496.		0.
55	SERVER	102204	SL	3.00	16	2,495.			2,495.	2,495.		0.
56	COMPUTER	052804	SL	3.00	16	1,594.			1,594.	1,594.		0.
57	COMPUTER	061004	SL	3.00	16	1,511.			1,511.	1,511.		0.

928102
06-24-09

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
58	COMPUTER	052505	SL	3.00	16	681.			681.	681.		0.
59	COMPUTER	061705	SL	3.00	16	681.			681.	454.		227.
60	LAND IMPROVEMENT	060305	SL	10.00	16	8,900.			8,900.	3,189.		890.
61	SERVER	030206	SL	3.00	16	2,150.			2,150.	2,150.		0.
62	REMODELING	102506	SL	10.00	16	4,068.			4,068.	1,221.		73.
63	COMPUTER	123107	SL	3.00	16	1,274.			1,274.	850.		424.
64	COMPUTER	060109	SL	3.00	16	770.			770.			128.
65	COMPUTER	062509	SL	3.00	16	770.			770.			128.
66	COMPUTER	070109	SL	3.00	16	1,540.			1,540.			256.
67	SERVER	100209	SL	3.00	16	2,450.			2,450.			204.
	* 990 PAGE 10 TOTAL PROGRAM SERVICES					550,184.		0.	550,184.	364,806.	0.	15,868.
	* GRAND TOTAL 990 PAGE 10 DEPR					587,184.		0.	587,184.	364,806.	0.	15,868.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

AIDS Project Greater Danbury, Inc.

Financial Statements

December 31, 2009 and December 31, 2008

SW

STUDLEY, WHITE & ASSOCIATES, P.C.

CERTIFIED PUBLIC ACCOUNTANTS

AIDS PROJECT GREATER DANBURY, INC.
Financial Statements
December 31, 2009 and December 31, 2008

Table of Contents

STUDLEY, WHITE & ASSOCIATES, P.C.
CERTIFIED PUBLIC ACCOUNTANTS

Donald T Studley, C P A
Brian C White, C P A

July 27, 2010

INDEPENDENT AUDITOR'S REPORT

To The Board of Directors
AIDS Project Greater Danbury, Inc.

We have audited the accompanying statements of financial position of AIDS Project Greater Danbury, Inc.(a non-profit organization) as of December 31, 2009 and December 31, 2008 and the related statements of activities, cash flows and functional expenses for the years then ended These financial statements are the responsibility of the AIDS Project Greater Danbury, Inc.'s management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in Government Auditing Standards issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and the significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion

In our opinion, the financial statements referred to above present fairly, in all material respects the financial position of AIDS Project Greater Danbury, Inc as of December 31, 2009 and 2008, and the changes in its net assets and cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America

In accordance with Government Auditing Standards, we have also issued our report dated July 27, 2010 on our consideration of AIDS Project Greater Danbury, Inc.'s internal control over financial reporting and our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements and other matters The purpose of that report is to describe the scope of our testing on internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the internal control over financial reporting or on compliance That report is an integral part of an audit performed in accordance with Government Auditing Standards and is important for assessing the results of our audit.

Studley White & Associates PC
STUDLEY, WHITE & ASSOCIATES, P.C.

One Ives Street, Suite 201, P O Box 399, Danbury, CT 06813-0399 • (203) 748-6517 • FAX (203) 792-0296
www StudleyWhiteCPA com

AIDS PROJECT GREATER DANBURY, INC.
Statements of Financial Position
December 31,

	2009	2008
Assets		
Cash and cash equivalents	$ 343,487	$ 477,420
Grant receivable	216,789	120,086
Prepaid expenses	29,353	39,209
Security deposit	5,051	5,051
Accounts receivable - other	26,747	981
Fixed assets, net	206,510	216,848
Total Assets	**$ 827,937**	**$ 859,595**
Liabilities and Net Assets		
Liabilities:		
Accounts payable	$ 46,648	$ 19,432
Accrued payroll and payroll taxes	18,634	15,689
Refundable advances	28,840	29,666
Accrued vacation	32,390	23,978
Total Liabilities	**126,512**	**88,765**
Net Assets:		
Unrestricted:		
Board designated for emergency assistance	3,571	3,571
Invested in property, equipment and improvements	206,510	216,848
Unrestricted and undesignated	491,344	550,411
Total Net Assets	**701,425**	**770,830**
Total Liabilities and Net Assets	**$ 827,937**	**$ 859,595**

See accompanying notes to financial statements.

AIDS PROJECT GREATER DANBURY, INC.
Statements of Activities
For the Years Ended December 31,

	2009	2008
Revenues		
Special events revenue	$ 30,795	$ 41,048
Special events expense	(21,442)	(31,263)
Net special events	9,353	9,785
Grants	1,060,283	952,804
Contributions	2,728	2,747
Program service fees	7,405	9,862
Investment income	2,061	6,547
Total Revenue	**1,081,830**	**981,745**
Expenses		
Housing	205,440	174,918
Supporting services	371,246	351,669
Primary care	192,222	122,585
Prevention and education	257,628	239,511
Total Program Expenses	1,026,536	888,683
Management	97,951	85,472
Fund raising	26,748	25,733
Total Management and Fund Raising	124,699	111,205
Total Expenses	**1,151,235**	**999,888**
Increase (decrease) in net assets	**(69,405)**	**(18,143)**
Net assets at beginning of year	770,830	788,973
Net assets at end of year	**$ 701,425**	**$ 770,830**

See accompanying notes to financial statements.

AIDS PROJECT GREATER DANBURY, INC.
Statements of Cash Flows
For the Years Ended December 31,

	2009	2008
Cash flows from operating activities:		
Increase (Decrease) in net assets	$ (69,405)	$ (18,143)
Adjustments to reconcile change in net assets to net cash provided by operating activities:		
Depreciation	15,868	18,643
Change in assets and liabilities:		
(Increase) decrease in:		
- Grant receivable	(96,703)	75,522
- Prepaid expenses	9,856	(627)
- Accounts receivable - other	(25,766)	1,505
Increase (decrease) in:		
- Accounts payable	27,216	(31,358)
- Refundable advances	(826)	29,666
- Accrued payroll and payroll taxes	2,945	(1,667)
- Accrued vacation	8,412	11,878
Net cash provided (used) by operating activities	**(128,403)**	**85,419**
Cash flows from investing activities:		
Acquisition of fixed assets	(5,530)	-
Net cash used by investing activities	**(5,530)**	**-**
Net increase (decrease) in cash	**(133,933)**	**85,419**
Cash and cash equivalents, beginning of year	477,420	392,001
Cash and cash equivalents, end of year	**$ 343,487**	**$ 477,420**

See accompanying notes to financial statements.

AIDS PROJECT GREATER DANBURY, INC.
Statement of Functional Expenses
For the Year Ended December 31, 2009

	Housing	Supporting Services	Primary Care	Prevention and Education	Total	Management and General	Fund Raising	Total Expenses
Salaries	$ 44,111	$ 225,485	$ 18,567	$ 167,423	$ 455,586	$ 30,945	$ 12,378	$ 498,909
Payroll taxes	9,236	31,006	9,774	34,043	84,059	11,586	4,020	99,665
Fringe benefits	3,318	2,488	2,488	2,488	10,782	13,464	1,659	25,905
Office and occupancy	18,052	25,899	3,237	16,187	63,375	9,712	3,237	76,324
Printing and postage	353	1,411	176	882	2,822	529	176	3,527
Service and professional	3,534	6,606	2,525	4,302	16,967	4,542	1,767	23,276
Travel	1,078	15,521	1,078	1,078	18,755	1,078		19,833
Telephone	1,551	1,926	241	1,204	4,922	722	241	5,885
Staff development	-	720	-	-	720	-	-	720
Depreciation	1,587	6,347	793	3,967	12,694	2,380	793	15,867
Assistance	111,690	27,067	1,099	3,994	143,850	-	-	143,850
Advertising	298	1,192	149	745	2,384	447	149	2,980
Dues	1,516	309	39	193	2,057	2,274	39	4,370
Miscellaneous	933	3,739	468	10,132	15,272	14,092	467	29,831
Repairs and Maintenance	1,618	6,471	809	4,044	12,942	2,427	809	16,178
Auto	1,325	442	-	442	2,209	-	-	2,209
Insurance	5,240	5,943	1,013	6,504	18,700	3,753	1,013	23,466
Grants	-	8,674	149,766	-	158,440	-	-	158,440
Total Expenses before before Fund Raising	205,440	371,246	192,222	257,628	1,026,536	97,951	26,748	1,151,235
Special Events					-		21,442	21,442
Total	$ 205,440	$ 371,246	$ 192,222	$ 257,628	$ 1,026,536	$ 97,951	$ 48,190	$ 1,172,677

See accompanying notes to financial statements.

AIDS PROJECT GREATER DANBURY, INC.
Statement of Functional Expenses
For the Year Ended December 31, 2008

	Housing	Supporting Services	Primary Care	Prevention and Education	Total	Management and General	Fund Raising	Total Expenses
Salaries	$ 43,333	$ 210,405	$ 17,644	$ 151,562	$ 422,944	$ 29,406	$ 11,762	$ 464,112
Payroll taxes	8,652	27,337	8,432	29,372	73,793	9,894	3,443	87,130
Fringe benefits	2,087	1,565	1,565	1,566	6,783	14,487	1,044	22,314
Office and occupancy	20,313	26,782	3,348	16,740	67,183	10,043	3,348	80,574
Printing and postage	456	1,824	228	1,139	3,647	684	228	4,559
Service and professional	4,072	9,155	2,898	5,505	21,630	5,246	2,036	28,912
Travel	1,110	8,422	1,110	1,112	11,754	1,110	-	12,864
Telephone	1,888	1,620	202	1,013	4,723	607	202	5,532
Staff development	-	200	-	-	200	-	-	200
Depreciation	1,864	7,457	932	4,661	14,914	2,797	932	18,643
Assistance	80,256	26,454	690	4,532	111,932	-	-	111,932
Advertising	272	1,088	136	681	2,177	408	136	2,721
Dues	1,156	392	49	244	1,841	1,734	49	3,624
Miscellaneous	1,085	4,342	543	8,775	14,745	2,299	543	17,587
Repairs and Maintenance	1,777	7,109	889	4,443	14,218	2,666	889	17,773
Auto	2,831	944	-	944	4,719	-	-	4,719
Insurance	3,766	6,630	1,121	7,222	18,739	4,091	1,121	23,951
Grants	-	9,943	82,798	-	92,741	-	-	92,741
Total Expenses before before Fund Raising	174,918	351,669	122,585	239,511	888,683	85,472	25,733	999,888
Special Events					-			-
Total	$ 174,918	$ 351,669	$ 122,585	$ 239,511	$ 888,683	$ 85,472	$ 25,733	$ 999,888

Note 1 - General

AIDS Project Greater Danbury, Inc. (APGD) provides temporary housing, housing assistance, and counseling to persons with AIDS and those who are HIV positive. APGD also provides AIDS and HIV education to the general public in the greater Danbury, Connecticut metropolitan area.

Note 2 - Summary of Significant Accounting Policies

(a) Basis of Accounting

The accompanying financial statements are presented on the accrual basis of accounting.

(b) Basis of Presentation

AIDS Project Greater Danbury, Inc. has adopted Statements of Financial Accounting Standards No. 116, "Accounting for Contributions Received and Contributions Made" (SFAS No. 116) and No. 117, "Financial Statements for Not-For-Profit Organizations." Under these provisions, net assets and revenues, expenses, gains, and losses are classified based on the existence or absence of donor-imposed restrictions. Accordingly, net assets of the Agency and changes therein are classified and reported as follows.

Unrestricted net assets - Net assets that are not subject to donor-imposed stipulations.

Temporarily restricted net assets - Net assets subject to donor-imposed stipulations that may or will be met either by actions of the Agency and/or the passage of time. As of December 31, 2009 and 2008, AIDS Project Greater Danbury, Inc. had no temporarily restricted net assets.

Permanently restricted net assets - Net assets subject to donor-imposed stipulations that the principal be maintained permanently by AIDS Project Greater Danbury, Inc. Generally, the donors of these assets permit AIDS Project Greater Danbury, Inc. to use all or part of the income earned on related investments for either general or donor-specific purposes. As of December 31, 2009 and 2008, AIDS Project Greater Danbury, Inc. had no permanently restricted net assets.

(c) Fixed Assets

All expenditures for equipment in excess of $500 are capitalized. Depreciation is provided on a straight line basis over the estimated useful lives of the assets generally 5 to 28 years.

(d) Cash and Cash Equivalents

Cash and cash equivalents consist of bank accounts and all highly liquid debt instruments purchased with a maturity of three months or less.

Note 2 - Summary of Significant Accounting Policies (Continued)

(e) Grants

Support received under grants is recorded as support when the related amounts are determined to be due from the grantor agencies (generally when grant expenditures have been made). Amounts received in advance of being recognized as support are classified as refundable advances in the accompanying financial statement. Management considers all amounts to be collectible.

(f) Tax Status

AIDS Project Greater Danbury, Inc. is exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code. The Internal Revenue Service has also determined that it is not a private foundation.

(g) Contributed Services

The value of contributed services meeting the requirements for recognition in the financial statements was not material and has not been recorded. In addition, many individuals volunteer their time and perform a variety of tasks that assist APGD with the housing program and at the office. APGD receives more than 250 volunteer hours per year.

(h) Functional Expenses

The Agency allocates its expenses on a functional basis among its various programs. Expenses that can be identified with a specific program are allocated directly according to their natural expense classification.

(i) Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements. They also affect the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

(j) Contributions

Contributions are recorded when received and are considered to be available for unrestricted use unless specifically restricted by the donor.

(k) Reclassifications

Certain accounts in the prior year financial statements have been reclassified for comparative purposes to conform with the presentation in the current year financial statements.

(l) Grants Receivable

Grants receivable balances include amounts to the Agency from various federal, state and local awarding agencies. Management has not provided an allowance for doubtful accounts. Management believes all amounts are fully collectible from the funding source.

Note 3 – Fixed Assets

Fixed assets at December 31, consists of the following:

	December 31, 2009	December 31, 2008
Land	$ 37,000	$ 37,000
Buildings and improvements	468,927	468,927
Vehicles	8,999	8,999
Furniture and equipment	72,258	66,728
	587,184	581,654
Less accumulated depreciation	(380,674)	(364,806)
	$ 206,510	$ 216,848

Note 4 - Operating Leases

The Agency rents its office facilities under a lease that began on April 1, 2002. The lease agreement was for five years and ended on March 31, 2008. The Agency is continuing to rent its office facilities on a month to month basis.

Future lease payments are as follows:

December 31, 2010	$ 43,200

Note 5 - Concentration of Risk

The Agency receives substantial amount of revenue from grants and from the State of Connecticut and pass through grants from the Federal Government. Revenues received from these sources as a percentage of total Agency revenues were as follows at December 31:

	2009	2008
State of Connecticut, Department of Social Services,	23%	20%
City of New Haven	29%	24%
Connecticut Department of Public Health	35%	36%
City of Bridgeport	6%	11%
City of Danbury	1%	2%

The Organization maintains cash balances at various banks. These balances are insured by the federal deposit insurance corporation. At December 31, 2009 the uninsured portion of this balance was $88,098 and $233,326 at December 31, 2008.

Note 6 – Fair Value of Financial Instruments

GAAP requires disclosure of an estimate of fair value of certain financial instruments. The Organization's significant financial instruments are cash, accounts receivable, marketable equity securities, and other short-term assets and liabilities. For these financial instruments, carrying values approximate fair value.

Note 7 – Subsequent Event

Subsequent events were evaluated through July 27, 2010, which is the date the financial statements were available to be issued.

AIDS PROJECT GREATER DANBURY, INC AIDS P 22-2951387

ORM 8688	EXPLANATION FOR EXTENSION	STATEMENT 1

XPLANATION

HE AUDIT HAS NOT BEEN COMPLETED AND THE FORM 990 IS PREPARED BASED UPON HE AUDITED FINANCIAL STATEMENTS. THE CLIENT'S BOOKKEEPER IS IN THE ROCESS OF RECONCILING SEVERAL BALANCE SHEET ACCOUNTS.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** and check this box ▶ [X]

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.** Only file the original (no copies needed).

Type or print File by the extended due date for filing the return See instructions	Name of Exempt Organization AIDS PROJECT GREATER DANBURY, INC AIDS PROJECT GREATER DANBURY, INC	**Employer identification number** 22-2951387
	Number, street, and room or suite no If a P.O box, see instructions. 30 WEST STREET	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions DANBURY, CT, CT 06810	

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

[X] 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 ▶ ROBERTA STEWART 30 WEST STREET, DANBURY CT - 06810

Telephone No ▶ 203.778.2437 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 NOVEMBER 15, 2010.

5 For calendar year 2009 , or other tax year beginning ______ , and ending ______ .

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
SEE STATEMENT 1

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	8a	$
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	8b	$
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.	8c	$ 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 ▶ EXECUTIVE DIRECTOR Date ▶

923832
05-26-09