Form **990**

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)

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047

2009

Open to Public Inspection

For the 2009 calendar year, or tax year beginning Sep 1 **, 2009, and ending** Aug 31 **, 2010**

B Check if applicable
- [ ] Address change
- [ ] Name change
- [ ] Initial return
- [ ] Termination
- [ ] Amended return
- [ ] Application pending

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

C Name of organization: WEST SIDE NEIGHBORHOOD HOUSING SERVICES, INC.

Number and street (or P O box if mail is not delivered to street addr) / Room/suite: 359 CONNECTICUT STREET

City, town or country / State / ZIP code + 4: BUFFALO NY 14213

D Employer Identification Number: 16-1167946

E Telephone number: (716) 885-2344

G Gross receipts $ 1,023,932.

F Name and address of principal officer: LINDA CHIARENZA 359 CONNECTICUT BUFFALO NY 14213

H(a) Is this a group return for affiliates? [ ] Yes [X] No

H(b) Are all affiliates included? [ ] Yes [ ] No
If 'No,' attach a list (see instructions)

H(c) Group exemption number ►

I Tax-exempt status [X] 501(c) (3) ◄ (insert no) [ ] 4947(a)(1) or [ ] 527

J Website: ► N/A

K Form of organization [X] Corporation [ ] Trust [ ] Association [ ] Other ►

L Year of Formation 1981 **M** State of legal domicile NY

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities A NON PROFIT CORPORATION DEDICATED TO THE PRESERVATION AND REVITALIZATION OF BUFFALO'S NEIGHBORHOODS BY PROVIDING SAFE, AFFORDABLE AND SUSTAINABLE HOUSING OPPORTUNITIES FOR INCOME-QUALIFIED RESIDENTS.

2 Check this box ► [ ] if the organization discontinued its operations or disposed of more than 25% of its assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	13
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	13
5	Total number of employees (Part V, line 2a)	5	
6	Total number of volunteers (estimate if necessary)	6	30
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	970,715.	882,223.
	9	Program service revenue (Part VIII, line 2g)	64,438.	91,435.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	70,509.	50,274.
	12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,105,662.	1,023,932.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	303,360.	214,992.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	b	Total fundraising expenses (Part IX, column (D), line 25) ► 0.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	647,407.	544,589.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	950,767.	759,581.
	19	Revenue less expenses Subtract line 18 from line 12	154,895.	264,351.

			Beginning of Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	4,041,908.	4,294,520.
	21	Total liabilities (Part X, line 26)	198,507.	151,862.
	22	Net assets or fund balances Subtract line 21 from line 20	3,843,401.	4,142,658.

RECEIVED
FEB 2 2 2011
OGDEN, UT

SCANNED MAR 15 2011

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

► [signature] Signature of officer — Date 2/14/11

► LINDA CHIARENZA Executive Director
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ► P G SIPPEL, CPA — Date 01/27/11 — Check if self-employed ► [X] — Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4 ► BATT, HULTMAN & SIPPEL, CPA's LLC
5500 MAIN ST, SUITE 208
WILLIAMSVILLE NY 14221-6755

EIN ►

Phone no ► (716) 626-1299

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [ ] No

5-17

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

A NON PROFIT CORPORATION

DEDICATED TO THE PRESERVATION AND REVITALIZATION OF BUFFALO'S

See Form 990, Page 2, Part III, Line 1 (continued)

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 $ 418,678. including grants of $ 0.) (Revenue $ 689,785.)

OWNER OCCUPIED REHABILITATION LOANS THROUGH NEIGHBORWORKS AMERICA AND NYS DEPARTMENT OF HOUSING & COMMUNITY RENEWAL AND NYS AFFORDABLE HOUSING CORPORATOIN TO LOW AND MODERATE INCOME RESIDENTS

4b (Code ________) (Expenses $ 31,328. including grants of $ 0.) (Revenue $ 183,438.)

HOME BUYER EDUCATION AND FORECLOSURE PREVENTION SERVICES. THE ORGANIZATION CONDUCTS MONTHLY SEMINARS FOR PRE AND POST PURCHASE COUNSELING FOR LOW TO MODERATE INCOME FIRST -TIME HOME BUYERS AS WELL AS FORECLOSURE PREVETION SEMINARS FOR EXISTING HOME OWNERS

4c (Code ________) (Expenses $ 31,328. including grants of $ 0.) (Revenue $ 34,906.)

RENTALS TO LOW INCOME INDIVIUALS.

4d Other program services (Describe in Schedule O)

(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses ► 481,334.

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 organizaiton'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 statement 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 statement for the tax year? *If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional* — 12 A: 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, and 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 comittee 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 transation 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
1 a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable	1 a	0			
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1 b	0			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1 c	X	
2 a 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	2 a				
2 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2 b	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)					
3 a Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?			3 a		X
b If 'Yes' has it filed a Form 990-T for this year? *If 'No,' provide an explanation in Schedule O*			3 b		
4 a 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)?			4 a		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					
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5 a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5 b		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?			5 c		
6 a 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?			6 a		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?			6 b		
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?			7 a		X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?			7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7 c		X
d If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d				
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7 e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7 f		X
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7 g		
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			7 h		
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		X
9 **Sponsoring organizations maintaining donor advised funds.**					
a Did the organization make any taxable distributions under section 4966?			9 a		X
b Did the organization make any distribution to a donor, donor advisor, or related person?			9 b		X
10 **Section 501(c)(7) organizations.** Enter:					
a Initiation fees and capital contributions included on Part VIII, line 12	10 a				
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 b				
11 **Section 501(c)(12) organizations.** Enter					
a Gross income from other members or shareholders	11 a				
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11 b				
12 a **Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12 a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12 b				

Part VI **Governance, Management and Disclosure** *For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body	1a 13		
b	Enter the number of voting members that are independent	1b 13		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If 'Yes,' provide the names and addresses in Schedule O*	9		X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? *If 'No,' go to line 13*	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? *If 'Yes,' describe in Schedule O how this is done*	12c	X	
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers of key employees of the organization	15b		X
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosures

17 List the states with which a copy of this Form 990 is required to be filed ► See States Form 990 Filed In

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply

☐ Own website ☐ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

► KRISTIN DUCEY 359 CONNECTICUT STREET, BUFFALO NY 14213 (716) 885-2344

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

1 a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organizations'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 employees '
- 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

☐ 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
JOHN HOCHADEL BOARD	2.00	X						0.	0.	0.
MARGARET ALFANO BOARD	2.00	X						0.	0.	0.
NICK BONIFACIO BOARD	2.00	X						0.	0.	0.
JOLENE BALLER BOARD	2.00	X						0.	0.	0.
TARA EVANS BOARD	2.00	X						0.	0.	0.
DEBORAH LOMBARDO BOARD	2.00	X						0.	0.	0.
DANA BOBINCHEK BOARD	2.00	X						0.	0.	0.
RAMON MORALES CHAIRMAN	2.00	X		X				0.	0.	0.
SCOTT DUNLAP BOARD	2.00	X						0.	0.	0.
STEPHEN M SCELLO TREASURER	2.00	X		X				0.	0.	0.
ROBIN JOHNSON SECRETARY	2.00	X		X				0.	0.	0.
MICHAEL PIERRO VICE CHAIRMAN	2.00	X		X				0.	0.	0.
KARLA GADLEY BOARD	2.00	X						0.	0.	0.

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

(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 ►

		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

(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 ►

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	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e 822,056.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 60,167.				
	g Noncash contribns included in lns 1a-1f.	$				
	h Total. Add lines 1a-1f ►		882,223.			
PROGRAM SERVICE REVENUE		Business Code				
	2a Interest on loans	900001	91,435.	0.	0.	91,435.
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f ►		91,435.			
	3 Investment income (including dividends, interest and other similar amounts) ►					
	4 Income from investment of tax-exempt bond proceeds ►					
	5 Royalties ►					
		(i) Real / (ii) Personal				
	6a Gross Rents					
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss) ►					
		(i) Securities / (ii) Other				
	7a 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) ►					
OTHER REVENUE	8a Gross income from fundraising events (not including $ of contributions reported on line 1c) See Part IV, line 18	a				
	b Less direct expenses	b				
	c Net income or (loss) from fundraising events ►					
	9a Gross income from gaming activities See Part IV, line 19	a				
	b Less direct expenses	b				
	c Net income or (loss) from gaming activities ►					
	10a 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				
	11a Miscellaneous	900099	14,052.	0.	0.	14,052.
	b Loan closing fees	531310	31,901.	0.	0.	31,901.
	c BAD DEBT RECOVERY	531310	4,321.	0.	0.	4,321.
	d All other revenue					
	e Total. Add lines 11a-11d ►		50,274.			
	12 Total revenue. See instructions ►		1,023,932.	0.	0.	141,709.

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	184,740.	45,856.	138,884.	0.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	30,252.	15,334.	14,918.	0.
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Prof fundraising svcs See Part IV, ln 17				
f Investment management fees				
g Other				
12 Advertising and promotion	4,786.	679.	4,107.	0.
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	1,082.	0.	1,082.	0.
17 Travel	11,320.	271.	11,049.	0.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	439.	439.	0.	0.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	21,244.	21,244.	0.	0.
23 Insurance	10,621.	2,242.	8,379.	0.
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 Postage	1,880.	445.	1,435.	0.
b Property rehab	131,974.	131,974.	0.	0.
c Utilities	17,808.	10,964.	6,844.	0.
d Consultants	86,420.	56,771.	29,649.	0.
e Bank charges	1,462.	540.	922.	0.
f All other expenses	255,553.	194,574.	60,979.	0.
25 Total functional expenses Add lines 1 through 24f	759,581.	481,333.	278,248.	0.
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			1,494,848.	1	1,618,788.
	2	Savings and temporary cash investments			0.	2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			101,346.	4	9,200.
	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			2,049,976.	7	2,370,662.
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges				9	6,440.
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	692,041.			
	b	Less accumulated depreciation	10b	402,611.	304,807.	10c	289,430.
	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			90,931.	15	0.
	16	**Total assets** Add lines 1 through 15 (must equal line 34)			4,041,908.	16	4,294,520.
LIABILITIES	17	Accounts payable and accrued expenses			25,266.	17	32,916.
	18	Grants payable			4,923.	18	27,470.
	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			168,318.	25	91,476.
	26	**Total liabilities.** Add lines 17 through 25			198,507.	26	151,862.
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			456,691.	27	527,493.
	28	Temporarily restricted net assets			483,540.	28	373,440.
	29	Permanently restricted net assets			2,903,170.	29	3,241,725.
		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, and equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			3,843,401.	33	4,142,658.
	34	Total liabilities and net assets/fund balances			4,041,908.	34	4,294,520.

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		

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	Employer identification number
WEST SIDE NEIGHBORHOOD HOUSING SERVICES, INC.	16-1167946

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)

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 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 ☒ 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 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 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 organizations

(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?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the US?		(vii) Amount of Support
			Yes	No	Yes	No	Yes	No	
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 'unusual grants ')	1,257,053.	558,868.	558,868.	790,275.	970,715.	4,135,779.
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge						
4 **Total.** Add lines 1 through 3	1,257,053.	558,868.	558,868.	790,275.	970,715.	4,135,779.
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						4,135,779.

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	1,257,053.	558,868.	558,868.	790,275.	970,715.	4,135,779.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	105,577.	109,052.	109,052.	112,119.	96,370.	532,170.
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						4,667,949.

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

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	88.60 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	89.12 %

16a **33-1/3 support test – 2009.** If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☒

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 yr 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 'unusual grants ')						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a 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, 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 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 yr 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 form 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 inline 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 lns 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 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 ► ☐

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.

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, lines 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	Employer Identification number
WEST SIDE NEIGHBORHOOD HOUSING SERVICES, INC.	16-1167946

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 may 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 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 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 easement 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 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.

1 a 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 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				
b Buildings		582,361.	293,515.	288,846.
c Leasehold improvements				
d Equipment		109,680.	109,096.	584.
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ►				289,430.

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. *(Column (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. *(Column (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
PROPERTY HELD FOR RESALE	0.
Total. *(Column (b) must equal Form 990, Part X, col (B), line 15)* ►	0.

Part X Other Liabilities (See Form 990, Part X, line 25)

(a) Description of Liability	(b) Amount
Federal Income Taxes	
RENT DEPOSITS & GRANT ESCROWS	91,476.
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ►	91,476.

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

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1,023,932.
2	Total expenses (Form 990, Part IX, column (A), line 25)	759,581.
3	Excess or (deficit) for the year Subtract line 2 from line 1	264,351.
4	Net unrealized gains (losses) on investments	
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	
9	Total adjustments (net) Add lines 4 through 8	
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	264,351.

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	
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	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
a	Investments 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	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	

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

1	Total expenses and losses per audited financial statements			1	
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	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investments 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	
5	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)			5	

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

Part XIV Supplemental Information *(continued)*

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
WEST SIDE NEIGHBORHOOD HOUSING SERVICES, INC.	16-1167946

Pt VI-B, Line 11A THE FORM 990 IS REVIEWED BY A MEMBER OF THE FINANCE COMMITTEE PRIOR TO FILING WITH THE IRS.

Pt VI-B, Line 12c EMPLOYEES & BOARD MEMBERS ARE REQUIRED TO DIGN A CONFLICT OF INTEREST STATEMENT ANNUALLY.

Schedule O (Form 990), Supplemental Information to Form 990

Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission

NEIGHBORHOODS BY PROVIDING SAFE, AFFORDABLE AND SUSTAINABLE HOUSING OPPORTUNITIES FOR INCOME-QUALIFIED RESIDENTS.

Form 990, Page 6, Line 17

States Form 990 Filed In

New York

Note 1 - Organization and Summary of Significant Accounting Policies

Organization - West Side Neighborhood Housing Services, Inc. (the Corporation) is a non-profit corporation incorporated on August 27, 1981. The Corporation is dedicated to the preservation and revitalization of Buffalo's west side neighborhood. The Corporation collaborates with the various funding sources, including NeighborWorks® America, the City of Buffalo, New York State, commercial lenders, insurance representatives and area residents who realize that only a concerted effort can ensure the future of the surrounding neighborhood.

Basis of Accounting - The accompanying financial statements have been prepared on the accrual basis of accounting

Basis of Presentation - Financial statement presentation follows the recommendations of the Financial Accounting Standards Board in its Statement of Financial Accounting Standards (SFAS) No 117, Financial Statements of Not-for-Profit Organizations. Under SFAS No 117, the Corporation is required to report information regarding its financial position and activities according to three classes of net assets. Unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

Cash - For the purposes of the statement of cash flows, the Corporation considers all highly liquid investments with a maturity of three months or less to be cash equivalents.

Restricted and Unrestricted Support and Revenue - Support and revenue are recorded as unrestricted, temporarily restricted or permanently restricted, depending on the existence and/or nature of any restrictions. When a restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), temporarily restricted net assets are reclassified to unrestricted net assets and reported in the Statements of Activities as net assets released from restrictions.

Revenue Recognition - the Corporation recognizes revenue when earned Contract revenue is recorded as qualifying expenses are incurred. Refundable advances represent contract advances to provide working capital for the operation of the program

Income Taxes - The Corporation is exempt from taxes under Section 501(c) (3) of the Internal Revenue Code, and is classified as "other than a private foundation " Therefore, no provision for income taxes is reflected in the financial statements

Functional Allocation of Expenses - The costs of various programs and supporting services have been summarized on a functional basis. Accordingly, certain costs have been allocated among the programs and supporting services benefited

Use of Estimates - The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures Accordingly, actual results could differ from those estimates.

Note 1 - Organization and Summary of Significant Accounting Policies (continued)

NeighborWorks® Collaborative - NeighborWorks® America provides funding to several housing agencies in western New York State. During the year August 31, 2009, a collaborating housing organization surrendered its' charter to NeighborWorks® America and transferred to West Side $264,477 in cash and $201,215 in loans related to the NeighborWorks® Capital Funds Program.

Note 2 – Comparative Data

The financial information for 2009, presented for comparative purposes, is not intended to be a complete financial statement presentation in accordance with SFAS 117.

Note 3 – One-Third Matching and In-Kind Contributions

The organization received sufficient funding from various sources to meet the rules for the New York State Department of Housing and Community Renewal (D H.C.R) one-third matching requirement

Note 4 - Loans Receivable

General - The Corporation provides down payment assistance loans and property rehabilitation loans primarily to low to moderate income individuals in Buffalo's west side neighborhood. All loans are approved by a vote of the Corporation's loan committee and are made in accordance with any grant restrictions. Interest rates range from 0% to the prevailing market rate. Terms generally range from 1 to 20 years. All loans are secured by a lien on the debtor's property. A mortgage lien is required for any rehabilitation loan greater than $1,000.

Loan Sold With Recourse - The Corporation periodically sells loans receivable, at current balance, to Neighborhood Housing Services of America, Inc (NHSA). The terms of the sales agreement require the Corporation to repurchase or substitute loans which become 90 days delinquent The balance of loans sold to NHSA as of August 31, 2010, was $14,921

Note 5 - Property Held for Resale

The Corporation acquires various properties for the purpose of rehabilitating the property and selling it. Acquisition of the property is recorded at cost, except for donated property which is recorded at estimated fair market value at date of receipt. Major rehabilitation costs are also capitalized. As of August 31, 2010, the properties at 364 Connecticut, 807 Prospect, and 333 Connecticut were recorded as fixed assets Property held for resale at August 31, 2010 and 2009 is summarized as follows.

	2010	2009
Ferguson Street	$ -	$ 90,931
Total	$ -	$ 90,931

Note 6 - Property and Equipment

The organization capitalizes assets with an estimated useful life greater than one year, and cost greater than $500. Property and equipment are stated at cost, except for donated equipment which is recorded at estimated fair market value at date of receipt Depreciation of property (27½ years) and equipment (3 to 8 years) is computed using the straight-line method over the estimated useful lives of the assets Property and equipment at August 31, 2010 and 2009 is summarized as follows:

	2010	2009
Rental Properties.		
333 Connecticut Street	$ 43,743	$ 43,743
372 Connecticut Street	159,017	159,017
484 Connecticut Street	212,191	212,191
Building and Improvements:		
359 Connecticut Street	68.539	68,539
364 Connecticut Street	296	296
807 Prospect Street	98,575	92,708
Equipment	109,680	109,680
	692,041	686,174
Less Accumulated depreciation	402,611	381,367
Total	$289,430	$304,807

Note 7- Refundable Advances

Refundable advances, which represent funds received for contract period that extend beyond the current fiscal year, at August 31, 2010 and 2009 is summarized as follows:

	2010	2009
NYS Division of Housing and Community Renewal	$27,470	$ 4,923

Note 8 - Restrictions on Net Assets

Temporarily restricted net assets are available primarily for various loan programs and for the acquisition and rehabilitation of properties.

Note 9 - Concentration of Credit Risk

Cash - The Corporation's cash is maintained in bank deposit accounts at several high credit quality financial institutions The balances, at times, may exceed federally insured limits.

Loans Receivables - The Corporation issues loans primarily to low to moderate income individuals residing in Buffalo's west side neighborhood. The net loans receivable amounting to $2,325,662 and $2,049,976 at August 31, 2010 and 2009 respectively, is a concentration of credit risk.

Grant Income – A significant portion of the Corporation's revenue and support comes in the form of government grants Accordingly, future funding is subject to continued appropriation by the various funding agencies The terms and conditions of the grants and loan agreements subject the corporation to specific government rules and regulations. Future funding is dependent on continued compliance with these rules and regulations.

Note 10 – Tax Uncertainties

The Company does business only in New York State, and is in compliance with federal and state regulations related to payroll, sales, use and withholding taxes As of August 31, 2010, there were no outstanding inquiries from taxing authorities, and there are no liabilities for uncertainties related to taxes

Note 11 – Notes Receivable

The organization sold several lots to Habitat for Humanity and received a $50,000. note payable at $2,500. a year for twenty years, payable on November 1st of each year beginning in 2008.

Note payable - current	$ 2,500
Note payable - Long Term	$ 45,000.

Note 12 Grant Income

Grant income for the years ended August 31, 2010 and 2009 is summarized as follows.

	2010	2009
NeighborWorks® America		
Capital Grant	$ 150,000	$ -
Foreclosure Prevention	-	3,037
HUD Housing Counseling	-	10,044
Countrywide Neighborhood® America	18,400	18,400
Expendable Grants	227,000	69,951
Pass thru to Affiliate	31,023	-
STATE OF NEW YORK		
Division of Housing and Community Renewal	55,571	87,433
Housing Trust Fund		
Home Program	20,377	131,407
Affordable Housing Partners	54,142	190,811
Affordable Housing Corporation	-	196,000
Restore Program	60,000	69,000
Foreclosure Prevention Program	108,000	54,030
Urban Home Ownership Assistance	15,271	50,662
CITY OF BUFFALO		
Community Development Block Grants	48,400	-
Other	33,872	-
COUNTY OF ERIE		
CHDO-Admin	-	6,686
OTHER		
HSBC Bank	40,000	35,000
Freddie Mac	-	25,000
Citizens Bank	-	10,000
WNY Foundation	-	10,000
United Way	20,167	3,254
	$ 882,223	$ 970,715

Included in the above items are capital grants which are administrated by other housing service Organization through the NeighborWorks® America collaborative. However, the Corporation as lead agency is ultimately responsible for all the terms and conditions of the grant agreement.

Under various grants West Side acquires and rehabs homes and resells the property to area residents Under the program the houses may be sold for less than the organization's total investment, which is the intent of the program During 2010 West Side sold a property for $50,000, for which rehabilitation expenditures over the life of the project totaled $91,824 funds, resulting in a subsidiary to the home buyer of $41,824

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10/4/10 10 44 AM

Westside NHS
Depreciation

Asset	Date Acq.	Cost	Method	Life	Prior Depr	8/31/01 Exp.	8/31/01 A/D	8/31/02 Exp.	8/31/02 A/D	8/31/03 Exp.	8/31/03 A/D	8/31/04 Exp.	8/31/04 A/D
372 Connecticut	3/1/91	147,789	SL	27 5	49,935	5,374	55,309	5,374	60,683	5,374	66,057	5,374	71,432
372 Conn rehab	3/1/93	11,228	SL	27 5	3,045	408	3,453	408	3,862	408	4,270	408	4,678
484 Connecticut	3/1/91	20,000	SL	27 5	5,454	727	6,181	727	6,909	727	7,636	727	8,363
484 Conn rehab	3/1/94	164,958	SL	27 5	36,983	5,998	42,981	5,998	48,980	5,998	54,978	5,998	60,977
484 Conn rehab	8/14/00	2,000	SL	27 5	6	73	79	73	151	73	224	73	297
484 Conn rehab	6/15/03	4,395	SL	27 5	0	0	0	0	0	33	33	160	193
359 Connecticut	11/10/83	52,111	SL	20 0	43,674	2,606	46,280	2,606	48,885	2,606	51,491	620	52,111
Conn Rehab	10/1/89	5,475	SL	27 5	5,475	0	5,475	0	5,475	0	5,475	0	5,475
Conn Rehab	10/1/96	5,121	SL	27 5	773	186	959	186	1,145	186	1,332	186	1,518
Equip '91	1/1/91	22,564	SL	5 0	22,564	0	22,564	0	22,564	0	22,564	0	22,564
Computer '95	9/29/95	2,500	SL	5 0	2,000	500	2,500	0	2,500	0	2,500	0	2,500
Computer '97	9/15/97	6,052	SL	5 0	3,617	1,210	4,827	1,210	6,038	14	6,052	0	6,052
Copier '96	6/30/96	11,987	SL	5 0	11,987	0	11,987	0	11,987	0	11,987	0	11,987
Laptop '97	4/1/97	1,987	SL	5 0	1,590	397	1,987	(0)	1,987	0	1,987	0	1,987
Computer '98	1/1/98	1,987	SL	5 0	1,059	397	1,456	397	1,854	133	1,987	0	1,987
Printer	2/1/98	264	SL	5 0	137	53	190	53	243	21	264	0	264
Printer	10/5/95	363	SL	5 0	363	0	363	0	363	0	363	0	363
Signs chairs	6/30/99	1,396	SL	5 0	419	279	698	279	977	279	1,257	139	1,396
Furnace	12/9/98	1,750	SL	5 0	525	350	875	350	1,225	350	1,575	175	1,750
Telephone sys	11/8/98	5,810	SL	7 0	1,245	830	2,075	830	2,905	830	3,735	830	4,565
computer '00	5/1/00	19,086	SL	5 0	1,876	3,817	5,693	3,817	9,510	3,817	13,328	3,817	17,145
Camera '91	12/1/99	971	SL	5 0	138	194	332	194	526	194	721	194	915
Camera '00	8/16/00	672	SL	5 0	0	134	134	134	269	134	403	134	538
Laptop '01	1/15/01	1,500	SL	5 0	0	300	300	300	600	300	900	300	1,200
Computer '01	8/31/01	2,440	SL	5 0	0	488	488	488	976	488	1,464	488	1,952
Compt Network '02	1/24/02	629	SL	5 0				63	63	126	189	126	315
359 Conn Rehab	1/15/07	1,760	SL	27 5									
359 Conn Rehab	12/31/07	4,082	SL	27 5									
484 Conn Rehab	12/31/07	1,745	SL	27 5									
807 Prospect	12/31/08	92,708	SL	27 5									
333 Connecticut	12/31/08	43,743	SL	27 5									
364 Connecticut	12/31/08	296	SL	27 5									
Connecticut	12/31/08	1,057	SL	27 5									
TOTALS		640,416			192,885	24,324	217,189	23,489	240,677	22,094	262,771	19,751	282,522

Asset	8/31/05 Exp.	8/31/05 A/D	8/31/06 Exp.	8/31/06 A/D	8/31/07 Exp.	8/31/07 A/D	8/31/08 Exp.	8/31/08 A/D	8/31/09 Exp.	8/31/09 A/D	8/31/10 Exp.	8/31/10 A/D
372 Connecticut	5,374	76,806	5,374	82,180	5,374	87,554	5,374	92,928	5,374	98,302	5,374	103,676
372 Conn rehab	408	5,086	408	5,495	408	5,903	408	6,311	408	6,719	408	7,128
484 Connecticut	727	9,090	727	9,818	727	10,545	727	11,272	727	11,999	727	12,726
484 Conn rehab	5,998	66,975	5,998	72,974	5,998	78,972	5,998	84,970	5,998	90,969	5,998	96,967
484 Conn rehab	73	370	73	442	73	515	73	588	73	661	73	734
484 Conn rehab	160	353	160	513	160	673	160	833	160	992	160	1,152
359 Connecticut	0	52,111	0	52,111	0	52,111	0	52,111	0	52,111	0	52,111
Conn Rehab	0	5,475	0	5,475	0	5 475	0	5,475	0	5,475	0	5,475
Conn Rehab	186	1,704	186	1,890	186	2,076	186	2,263	186	2,449	186	2,635
Equip '91	0	22,564	0	22,564	0	22,564	0	22,564	0	22,564	0	22,564
Computer '95	0	2,500	0	2,500	0	2,500	0	2 500	0	2,500	0	2,500
Computer '97	0	6,052	0	6,052	0	6,052	0	6,052	0	6,052	0	6,052
Copier '96	0	11 987	0	11,987	0	11,987	0	11,987	0	11,987	0	11,987
Laptop '97	0	1,987	0	1,987	0	1,987	0	1,987	0	1,987	0	1,987
Computer '98	0	1,987	0	1,987	0	1,987	0	1,987	0	1,987	0	1,987
Printer	0	264	0	264	0	264	0	264	0	264	0	264
Printer	0	363	0	363	0	363	0	363	0	363	0	363
Signs chairs	0	1,396	0	1,396	0	1,396	0	1,396	0	1,396	0	1,396
Furnace	0	1,750	0	1,750	0	1,750	0	1,750	0	1,750	0	1,750
Telephone sys	830	5,395	415	5,810	0	5,810	0	5,810	0	5,810	0	5,810
computer '00	1,941	19,086	0	19,086	0	19,086	0	19,086	0	19,086	0	19,086
Camera '91	56	971	0	971	0	971	0	971	0	971	0	971
Camera '00	134	672	0	672	0	672	0	672	0	672	0	672
Laptop '01	300	1,500	0	1 500	0	1,500	0	1,500	0	1,500	0	1,500
Computer '01	488	2,440	0	2,440	0	2,440	0	2,440	0	2,440	0	2 440
Compt Network '02	126	440	126	566	63	629	(0)	629	0	629	0	629
359 Conn Rehab					64	64	64	128	64	191	64	255
359 Conn Rehab							148	148	148	296	148	444
484 Conn Rehab							63	63	63	126	63	189
807 Prospect									3,371	3,371	3,371	6,742
333 Connecticut									1,591	1,591	1,591	3,181
364 Connecticut									11	11	11	22
Connecticut									38	38	38	77
TOTALS	16,803	299,325	13,468	312,793	13,053	325,846	13,201	339,047	18,213	357,260	18,213	376,473

National Brand 45-606 Eye-Ease 45-306 2 Pack Made in USA

BUFFALO HOUSING PARTNERSHIP

FIXED ASSETS

	Initials	Date
Prepared By	DL	4/15/05
Approved By	DL	10/05
	DL	10/08
	DL	11/09

DATE		COST	LIFE	METH	2005	2006	2007	2008	2009	2010	2011	2012
3-05	COMPUTERS	25145 66	5 YR	SL (½)	2515 00	5029 00	5029 00	5029 00	5029 00	2514 66	F/D	
8-06	LAPTOP + ASSOR.	926 12	✓	✓		½ 93 00	186 00	186 00	186 00	186 00	89 12 F/D	
		(26071 78)				(5122 00)						
3-1-07	COMPUTER EQUIP.	1650 00	✓	✓ (½)			165 00	330 00	330 00	330 00	330 00	165 00 F/D
		(27721 78)										
	SUMMARY											
	BEGINNING				0	2515 00	7637 00	13017 00	18562 00	24107 00		
	ADDITIONS				2515 00	5122 00	5380 00	5545 00	5545 00	3030 66		
	DELETIONS				0	0	0	0	0	0		
	ENDING				2515 00	7637 00	13017 00	18562 00	24107 00	27137 66		

B 11/08 B 11/09 B 11/07

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