Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

2020 Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990 for instructions and the latest information.

<u>A</u>	For th	ne 2020 (calendar year, or tax year beginning $10/01/20$, and ending $~09/1$	30/2	1			
В	Check if a	applicable:	C Name of organization			D Employe	r identification number	
	Address	change	COMMITTEE ON TEMPORARY SHELTER,	, INC				
	Name ch	nange	Doing business as Number and street (or P.O. box if mail is not delivered to street address)		Room/suite	* * _ *	**5606	
	Initial retu	urn	PO BOX 1616	'	Noom/suite		864-7402	
H	Final retu	urn/	City or town, state or province, country, and ZIP or foreign postal code				001 / 101	
	terminate		BURLINGTON VT 05402			G Gross rec	eipts\$ 6,274,395	
Ш	Amended	d return	F Name and address of principal officer:					
	Application	on pending	RITA MARKLEY		H(a) Is this a gr	oup return for	subordinates Yes X No	
			PO BOX 1616		H(b) Are all sul	oordinates inc	luded? Yes No	
			BURLINGTON VT 05402		If "No.	" attach a list.	See instructions	
ı	Tax-exe	empt status:	X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527					
J	Website	e: ▶ W	WW.COTSONLINE.ORG		H(c) Group exe	emption numb	er >	
K	Form of	organization	n: X Corporation Trust Association Other	L Ye	ar of formation: 1	983	M State of legal domicile: VT	
F	art I	Sı	ummary					
	1 1		escribe the organization's mission or most significant activities:					
၁င			PROVIDES EMERGENCY SHELTER, SERVICES, AND HO					
nai			LESS OR MARGINALLY HOUSED IN VERMONT. COTS AD	OVOCA	TES FOR	LONG-1	TERM	
Governance			TIONS TO END HOMELESSNESS.					
			is box I if the organization discontinued its operations or disposed of mor	re than 2	25% of its net	1 1	4 =	
త			of voting members of the governing body (Part VI, line 1a)				15	
ţį	4 1	Number	of independent voting members of the governing body (Part VI, line 1b)			4	15	
Activities			mber of individuals employed in calendar year 2020 (Part V, line 2a)				92	
Ą			mber of volunteers (estimate if necessary)			6	565	
	7a	Total uni	related business revenue from Part VIII, column (C), line 12			7a	<u> </u>	
	b	Net unre	lated business taxable income from Form 990-T, Part I, line 11	<u> </u>	Prior Ye		Current Year	
•	8 (Contribu	tions and grants (Part VIII, line 1h)			8,567	4,323,210	
Revenue			service revenue (Part VIII, line 11)			5,736	400,774	
š		_	ent income (Part VIII, column (A), lines 3, 4, and 7d)			2,471	89,768	
æ			venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			9,003	7,783	
			renue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)			1,835	4,821,535	
			nd similar amounts paid (Part IX, column (A), lines 1–3)			2,621	88,936	
	14	Benefits	paid to or for members (Part IX, column (A), line 4)				0	
es	15	Salaries	other compensation, employee benefits (Part IX, column (A), lines 5–10)	s (Part IX, column (A), lines 5–10) 2				
Expenses	16a	Profession	onal fundraising fees (Part IX, column (A), line 11e)				0	
ğ	b		draising expenses (Part IX, column (D), line 25) 387,753					
Ш	17 (Other ex	penses (Part IX, column (A), lines 11a–11d, 11f–24e)			3,756	1,146,934	
	18	Total exp	penses. Add lines 13–17 (must equal Part IX, column (A), line 25)			4,812	3,936,484	
	19	Revenue	e less expenses. Subtract line 18 from line 12		1,26		885,051	
Net Assets or	30 -	Total ac	pots (Part V. line 16)		Beginning of Cu 10 , 27		End of Year 11,814,120	
Asse	20		sets (Part X, line 16)		70,27	. '	11,814,120 982,847	
et l	21		oilities (Part X, line 26) ets or fund balances. Subtract line 21 from line 20		9,57		10,831,273	
	art II	5555553	gnature Block		9,31.	I, UI 9	10,031,273	
*****		000000	perjury, I declare that I have examined this return, including accompanying schedules	and stat	ements and to	the best of	my knowledge and helief it is	
			complete. Declaration of preparer (other than officer) is based on all information of whic				my knowledge and belief, it is	
Sig	an	<u> </u>	Signature of officer			Date		
He			RITA MARKLEY EX	ECUT	TIVE DI	RECTO	R	
•	-	Ī	Type or print name and title					
		Print/Typ	pe preparer's name Preparer's signature		Date	Check	if PTIN	
Pai	d	RANDA	LL L. SARGENT, CPA				nployed *******	
Pre	parer	Firm's na	TABLE AGGOCTATION DO		·	Firm's EIN	**-***0081	
Us	e Only		336 WATER TOWER CIR STE 801					
_		Firm's ac	, GOT GUIDGED TWO OF AAC		F	Phone no.	802-655-5665	
Ма	y the IF		ss this return with the preparer shown above? See instructions			<u></u>	37 M. N.	
For	Paperv	work Rec	luction Act Notice, see the separate instructions.				Form 990 (2020)	

Statement of Program Service Accomplishments Check Schedule O contains a response or note to any line in this Part III X	Form 990 (2020) COMMITTEE ON TEMPORARY SHELTER, INC**-***5606	Page 2
1 Bielly describe the organization's mission: COTS PROVIDES EMERGENCY SHELTER, SERVICES, AND HOUSING FOR PEOPLE WHO ARE HOMBLESS OR MARGINALLY HOUSED IN VERMONT, COTS ADVOCATES FOR LONG-TERM SOLUTIONS TO END HOMELESSNESS. 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E27 Did the organization cease conducting, or make significant changes in how it conducts, any program services? If Yes, describe these changes on Schedule O. 10 Tes, describe these changes on Schedule O. 11 Describes the organization's program services accomplishments for each of its three largest program services, as measured by expenses, Section 50(c)(3) and 90(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and evenue, if any, for each program service reported. 40 (Code:)(Expenses \$ 827,065 including grants of\$), Revenue \$) IN THE 2021 FISCAL YEAR, 22 FAMILLES, INCLUDING 40 CHILDREN, STAYED IN COTS: EMERGENCY SHELTERS, EMERGENCY SHELTER FOR FAMILLES: THE FIREHOUSE FAMILY SKELTER (OPENED IN 1988, FULLY RENOVATED IN 2021) AND MAIN STREET FAMILY SKELTER (OPENED IN 1988, FULLY RENOVATED IN 2021) AND MAIN STREET FAMILY SKELTER (OPENED IN 1988, FULLY RENOVATED IN 2021) AND MAIN STREET FAMILY SKELTER (OPENED IN 2002) PROVIDE SAFE AND DECENT SHELTER FOR FAMILE THEY WORK WITH COTS STAFF TO FIND AFFORDABLE HOUSING, EMPLOYMENT, CHILD CARE AND PROGRAM ELEMENTS DURING THEIR STAY. THE COTS CHILDREN'S EDUCATION ADVOCATE WORKS WITH CHILDREN'S BENEFIT FROM TRAUMA INFORMED SPACE DESIGN AND PROGRAM ELEMENTS DURING THEIR STAY. THE COTS CHILDREN'S EDUCATION ADVOCATE WORKS WITH CHILDREN'S HEALTHY SOCIAL, EMOTIONAL AND PHYSICAL DEVELOPMENT, AND STERNGTHEN FAMILY RELATIONSHIPS. 40 (Code:)(Expenses \$ 617,590 including grants of\$), Revenue \$) THE DAYSTATION (OPENED IN 1982) IS A 36-BED OVERNIGHT SHELTER FOR MEN AND WOMEN, AGE 18 AND OLDER. THE BAYSTATION OF DEVELOY IN 1982) IS A 36-BED OVERNIGHT SHELTER FOR		
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		4 \
		<u>±)</u>

P	art 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	Χ	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
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		Χ
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			ľ
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			ľ
	"Yes," complete Schedule D, Part I	6		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes,"			
Ū	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	_		
3	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			ľ
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	-		
10		40		v
44	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		3.7	ľ
_	complete Schedule D, Part VI	11a	X	-
b	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	11b		Х
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more			1
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	X	<u> </u>
d	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	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	<u> </u>
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Χ	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			l
	Schedule D, Parts XI and XII	12a	Χ	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			l
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
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 See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			21
10		18	v	
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	10	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	40		v
20-	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			37
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	000	(2020)
$D \wedge A$				

Page 4

	Checkist of Nequired Schedules (Continued)				Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individual	iduals	s on		100	110
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III			22	Х	
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 comper	sate	d			
	employees? If "Yes," complete Schedule J			23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more t					
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer	r line	s 24b			
_	through 24d and complete Schedule K. If "No," go to line 25a			24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception			24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during	the y	year	0.4		
A	to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year.			24c 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an e		 s henefit	240		
2 5a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	AUCS	5 Deficit	25a		Х
b		n in a	nrior			
-	year, and that the transaction has not been reported on any of the organization's prior Forms 990 (-			
	If "Yes," complete Schedule L, Part I		·	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to	any o	current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 350	-				
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II			26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, tr	ustee	e, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection comm	ittee				
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of	these	Э			
	persons? 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 Sche	dule l	L, Part			
	IV instructions, for applicable filing thresholds, conditions, and exceptions):					
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contr	ıbutoı	r? If	00-		37
h	"Yes," complete Schedule L, Part IV			28a		X
b C	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 2	 8h2		28b		Λ
C	"Yes," complete Schedule L, Part IV	.00!	11	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Sch</i>	 edule	 э. М	29	Х	- 21
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qua			<u></u>		
	conservation contributions? If "Yes," complete Schedule M		-	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Sci</i>	 hedul	le 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 F	Regul	lations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I			33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, I	Part I	II, III,			
	or IV, and Part V, line 1			34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?			35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction w					
00	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V,			35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-char	itabie	9	26		v
27	related organization? If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related or					X
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule	-		37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, line					- 21
•	19? Note: All Form 990 filers are required to complete Schedule O.		D dilid	38	Х	
Pa	art V Statements Regarding Other IRS Filings and Tax Compliance			1 30		
	Check if Schedule O contains a response or note to any line in this Pal	rt V	<u> </u>	<u></u>	<u></u>	
				100000000000000000000000000000000000000	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	17			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	i		_		
	reportable gaming (gambling) winnings to prize winners?			1 1c	1	1

Form 990 (2020) COMMITTEE ON TEMPORARY SHELTER, INC**-***5606

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Statements Regarding Other IRS Filings and Tax Compliance (continued) Yes No 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 Χ If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note:** If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Χ If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 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)? Χ If "Yes." enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Χ 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 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 as charitable contributions? Χ b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods Χ and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 8 sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. 9 Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? b Section 501(c)(7) organizations. Enter: 10 Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities b Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 13a Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand Χ **14a** Did the organization receive any payments for indoor tanning services during the tax year? 14b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or 15 excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.

Form 990 (2020) COMMITTEE ON TEMPORARY SHELTER, INC**-***5606

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	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,	and fo		No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule C			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 15			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 15			
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, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X X X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			ł
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the follow	ving:		
а	The governing body?	8a	Χ	
b	Each committee with authority to act on behalf of the governing body?	8b	Χ	
9	Is there any officer, director, 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 on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co	ode.,	
			Yes	
I0a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
l1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
l2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes,"</i>	40.	3.7	
	describe in Schedule 0 how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Λ_	
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?			
_		15a	Х	
a b	Other officers or key employees of the organization	15a	Λ	Х
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	130		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
·oa	with a tayable entity during the year?	16a	Χ	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	104	25	
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b	X	
Sec	tion C. Disclosure	100		
17	List the states with which a copy of this Form 900 is required to be filed NONE.			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)			
-	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website $ X $ Another's website $ X $ Upon request $ X $ Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	i		
-	financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	ICHELLE SANDUL PO BOX 1616			
В		-86	4-7	402

Form 990 (2020) COMMITTEE ON TEMPORARY SHELTER, INC**-***5606

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 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.
- 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, if any. 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. See instructions for the order in which to list the persons above.

Check this box if neither the or	ganization nor a	any r	elate	ed o	gan	izatio	n c	ompensated any current o	officer, director, or trustee	
(A) Name and title	(B) Average hours per week (list any hours for	box	c, unle	Pos check ess pe nd a d	rson i	than o is both or/truste	an ee)	(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 below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(, ,	related organizations
(1)RITA MARKLEY										
EXECUTIVE DIRECTOR	40.00			Х				105,839	0	26,000
(2) BETH ANDERSON										
CHAIR	2.00	X		Х				0	0	0
(3) TOM STRETTON	0.00	Λ		Λ				U	<u> </u>	<u> </u>
(-, 1011 211211011	2.00									
VICE CHAIR	0.00	X		Х				0	0	0
(4) ANDREW HANSON	0.00									
TREASURER	2.00	X		Х				0	0	0
(5) PAUL LEKSTUTIS										
SECRETARY	2.00	X		Х				0	0	0
(6) ANDREW BOHLIN										
DIRECTOR	2.00	X						0	0	0
(7) CATHERINE DINGL										
DIRECTOR	2.00	X						0	0	0
(8) MAREE GAETANI	0.00									
DIRECTOR	2.00	X						0	0	0
(9) MICHAEL LIPSON	0.00	Λ						U	<u> </u>	<u> </u>
(*,111 0111111111111111111111111111111111	2.00									
DIRECTOR	0.00	X						0	0	0
(10)JEFFREY MARTIN	0.00									
DIRECTOR	2.00	X						0	0	0
(11)KURT REICHELT	0.00							Ŭ		
	2.00									
DIRECTOR	0.00	Х						0	0	0

Form **990** (2020)

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Part VII Section A. Officer	s, Directors, T	rust	ees,	Key	Em	ploy	/ees	s, and Highest Compens	ated Employees (continu	ued)
(A) Name and title	(B) Average hours per week (list any	bo	o not o x, unle	Pos check ess pe	rson	is both	n an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
(12) SHELLEY RICH	2.00	v						0	0	0
(13) BRIGITTE RIT	2.00	X						0	0	0
DIRECTOR (14) DEB ROYCE	2.00	X						0	0	0
DIRECTOR (15) BOB STEIS	0.00	Х						0	0	0
DIRECTOR (16) TOM TORTI	0.00	Х						0	0	0
DIRECTOR	2.00	Х						0	0	0
c Total from continuation she		, Se					>	105,839		26,000
d Total (add lines 1b and 1c) Total number of individuals (in reportable compensation from	including but no	t lim	ited		ose	liste	▶ d ab	205,839 pove) who received more to	than \$100,000 of	26,000
 3 Did the organization list any flemployee on line 1a? If "Yes 4 For any individual listed on line organization and related organization and related organization." 	<i>," complete Sch</i> ne 1a, is the su	<i>nedu</i> m of	le J repo	<i>for s</i> ortab	<i>uch</i> le c	<i>indiv</i> omp	<i>idua</i> ensa	alation and other compensa	tion from the	3 X 4 X
Did any person listed on line for services rendered to the c Section B. Independent Contract	organization? <i>If</i>								on or individual	5 X
Complete this table for your f compensation from the organ	five highest com nization. Report							endar year ending with or	within the organization's	
Name and	(A) I business address							Descrip	(B) tion of services	(C) Compensation
2 Total number of independent									0	

Form 990 (2020) COMMITTEE ON TEMPORARY SHELTER, INC**-**5606

Part VIII Statement of Revenue

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ГС	irt v			nedule O cor	tains	a response or no	te to any line in	this Part VIII		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ints nts	1a	Federated cam	paigns	s	1a	41,754				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership du		۳	1b					
ts, An	С	Fundraising eve			1c	729,255				
ਛੁੜ	d	Related organiz	zations	s	1d					
in,	е	Government grants (c			1e	2,028,010				
ᅙᇎ	f	All other contributions	, gifts, g	rants,						
혈		and similar amounts r	not includ	ded above	1f	1,524,191				
ᅙ	g	Noncash contributions			1g \$					
<u> </u>	h	Total. Add lines	s 1a–1	<u>1f</u>			4,323,210			
						Business Code				
<u>ice</u>	2a		GRAM	I INCOME		531110	400,774	400,774		
Program Service Revenue	b									
We a	C									
ğ	a									
<u>L</u>	f	All other progra		vice revenue						
		Total. Add lines					400,774			
		Investment inco								
		other similar an		`		▶	86,877			86,877
	4	Income from inv	vestm	ent of tax-exem	pt bond	l proceeds ►				
	5	Royalties	<u></u>		<u> </u>					
				(i) Real		(ii) Personal				
	6a	Gross rents	6a							
	b	Less: rental expenses	6b							
	С	Rental inc. or (loss)	6c							
	d 7a	Net rental incor Gross amount from	ne or							
		sales of assets	70	(i) Securities		(ii) Other				
<u>o</u>	h	other than inventory Less: cost or other	7a	1,433,	731					
en		basis and sales exps.	7b	1,438,	985	13,875				
Şe^	С	Gain or (loss)	7c		766	-13,875				
er		Net gain or (los					2,891	2,891		
Other Revenue		Gross income from					·	·		
		(not including \$		729,255						
		of contributions re								
		See Part IV, line 1	8		8a					
		Less: direct exp			8b					
		Net income or (events	s >				
	9a	Gross income from	-	ng activities.						
		See Part IV, line 1			9a					
		Less: direct exp			9b					
		Net income or (tivities					
	Tua	Gross sales of i returns and allo		=	100					
	h	Less: cost of go		old	10a 10b					
		Net income or (
<u>s</u>			/			Business Code				
Miscellaneous Revenue	11a	OTHER INCO	ME			900099	7,783	7,783		
er er	b									
See S	С									
Ĭ		All other revenu								
		Total. Add lines					7,783		-	0.5 0.==
	12	Total revenue.	See i	instructions		>	4,821,535	411,448	0	86,877

Form 990 (2020) COMMITTEE ON TEMPORARY SHELTER, INC**-***5606

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Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations mus			complete column (A).	
	Check if Schedule O contains a res				
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	88,936	88,936		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	132,862	89,018	19,929	23,915
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	2,121,112	1,742,333	194,093	184,686
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	12,649	12,649		
9	Other employee benefits	268,615	227,354	20,403	20,858
10	Payroll taxes	165,376	134,333	15,758	15,285
11	Fees for services (nonemployees):				
а	Management				
b	Legal	11,795	11,606	87	102
С	Accounting	40,358		40,358	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 1				
f	Investment management fees	23,236		23,236	
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	36,721	15,417		21,304
12	Advertising and promotion	59,226	3,520	3,261	52,445
13	Office expenses	35,449	15,723	2,103	17,623
14	Information technology	119,080	82,766	8,421	27,893
15	Royalties				
16	Occupancy	411,973	386,877	10,341	14,755
17	Travel	1,120	878		242
18	Payments of travel or entertainment expense	S			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	6,416	5,000		1,416
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	160,746	154,412	3,071	3,263
23	Insurance	46,063	41,599	2,000	2,464
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	MISCELLANEOUS	157,492	155,852	138	1,502
b	CLIENT ACTIVITIES	37,259	37,259		
С					
d					
е	All other expenses	0.05.7.13.1	0.00======	0.45 - 5.5	
25	Total functional expenses. Add lines 1 through 24e	3,936,484	3,205,532	343,199	387,753
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here				
DAA	following SOP 98-2 (ASC 958-720)				Form QQ(2020)

Form 990 (2020) COMMITTEE ON TEMPORARY SHELTER, INC**-***5606

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Part X	Balance Sheet	
	Check if Schedule O contains a response or note to any line in this Part Y	

	ait 2	Check if Schedule O contains a response or no	te to any	line in this Part X			
					(A)		(B)
					Beginning of year		End of year
	1	Cash—non-interest-bearing			154,289	1	183,883
	2	Savings and temporary cash investments			798,631	2	364,030
	3	Pledges and grants receivable, net			367,310	3	317,824
	4	Accounts receivable, net			4		
	5	Loans and other receivables from any current or form	er officer,	director,			
		trustee, key employee, creator or founder, substantial	l contribut	tor, or 35%			
		controlled entity or family member of any of these per	sons			5	
	6	Loans and other receivables from other disqualified p					
ts		under section 4958(f)(1)), and persons described in s	ection 49	58(c)(3)(B)		6	
Assets	7	Notes and loans receivable, net			931,000	7	906,000
⋖	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges	.,		4,755	9	7,527
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		4,831,444 2,846,920			
	b	Less: accumulated depreciation	10b	2,846,920	1,932,210	10c	1,984,524
	11	Investments—publicly traded securities			3,741,476	11	5,707,206
	12	Investments—other securities. See Part IV, line 11				12	
	13	Investments—program-related. See Part IV, line 11			2,343,126	13	2,343,126
	14	Intangible assets			14		
	15					15	
	16	Total assets. Add lines 1 through 15 (must equal line			10,272,797	16	11,814,120
	17	Accounts payable and accrued expenses		191,603	17	404,910	
	18	Grants payable			18		
	19	Deferred revenue			30,429	19	84,726
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV	of Sche	dule D		21	
es	22	Loans and other payables to any current or former of	ficer, dired	ctor,			
Liabilities		trustee, key employee, creator or founder, substantial	l contribut	tor, or 35%			
iab		controlled entity or family member of any of these per				22	
_	23	Secured mortgages and notes payable to unrelated the	nird partie	s		23	
	24	Unsecured notes and loans payable to unrelated third			470,000	24	479,550
	25	Other liabilities (including federal income tax, payable					
		parties, and other liabilities not included on lines 17-2	Comp	lete Part X			
		of Schedule D			9,746	25	13,661
	26	Total liabilities. Add lines 17 through 25			701,778	26	982,847
S		Organizations that follow FASB ASC 958, check h	ere X				
ű		and complete lines 27, 28, 32, and 33.					
ala	27				8,156,452	27	9,645,535
B B	28	Net assets with donor restrictions			1,414,567	28	1,185,738
Ę		Organizations that do not follow FASB ASC 958, or	check her	re 🕨			
УF		and complete lines 29 through 33.					
ts c	29	Capital stock or trust principal, or current funds				29	
Se	30	Paid-in or capital surplus, or land, building, or equipm	ent fund			30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income			0 551 010	31	10 001 000
Net	32				9,571,019	32	10,831,273
	33	Total liabilities and net assets/fund balances			10,272,797	33	11,814,120

Form **990** (2020)

orm	1990 (2020) COMMITTEE ON TEMPORARY SHELTER, INC**-***5606				Pag	ge 12
	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4	,82	21,	<u>535</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	3			<u>484</u>
3	Revenue less expenses. Subtract line 2 from line 1	3		88	35,0	<u>051</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	9	,57	71,	<u>019</u>
5	Net unrealized gains (losses) on investments	5		37	75,3	203
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10	10	,83	31,3	273
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>				
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X 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
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Χ	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	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	Χ	
	If the organization changed either its oversight process or selection process during the tax year, explain on					
	Schedule O.					
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 on Schedule O and describe any steps taken to undergo such audits			3b		

Form **990** (2020)

SCHEDULE A (Form 990 or 990-EZ)

(FUIII 990 01 990-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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

2020

Open to Public Inspection

Name of the organization Employer identification number **-**5606 COMMITTEE ON TEMPORARY SHELTER 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 12, 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 (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 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.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 9 or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 331/3% 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.) 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 12 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of listed in your governing (described on lines 1-10 organization support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B)

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2020

(C)

(D)

(E)

Total

Schedule A (Form 990 or 990-EZ) 2020

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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,787,940	2,818,220	2,949,460	4,378,567	4,323,210	17,257,397
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	2,787,940	2,818,220	2,949,460	4,378,567	4,323,210	17,257,397
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)						908,794
6	Public support. Subtract line 5 from line 4						16,348,603
	tion B. Total Support ndar year (or fiscal year beginning in)	(a) 2016	(h) 2017	(a) 2010	(4) 2010	(=) 2020	/f) T-4-1
		(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2,787,940	2,818,220 75,721	2,949,460 64,573	4,378,567 55,052	4,323,210 86,877	17,257,397 352,757
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 VI.)						
11	Total support. Add lines 7 through 10						17,610,154
12	Gross receipts from related activities, etc	c. (see instructions)			12	2,526,706
13	First 5 years. If the Form 990 is for the	organization's first,	second, third, fo	urth, or fifth tax ye	ear as a section 50	O1(c)(3)	
	organization, check this box and stop he						_
Sec	tion C. Computation of Public S						
14	Public support percentage for 2020 (line	6, column (f) divid	ed by line 11, col	umn (f))		14	92.84%
15	Public support percentage from 2019 Sc	hedule A, Part II, I	ine 14			15	90.07%
16a	33 1/3% support test—2020. If the organization	anization did not ch	neck the box on li	ne 13, and line 14	is 33 1/3% or mo	ore, check this	
	box and stop here . The organization qu	alifies as a publicly	supported orgar	nization			> X
b	33 1/3% support test—2019. If the orga				ne 15 is 33 1/3% o	or more, check	
	this box and stop here. The organization						▶ ∐
17a	10%-facts-and-circumstances test—2	_					
	10% or more, and if the organization me				-	•	
							> [
b	10%-facts-and-circumstances test—2	-					
	15 is 10% or more, and if the organization				-	•	
	in Part VI how the organization meets the organization						> 🗌
18	Private foundation. If the organization of instructions	did not check a bo	c on line 13, 16a,	16b, 17a, or 17b,	check this box ar	nd see	

Schedule A (Form 990 or 990-EZ) 2020 COMMITTEE ON TEMPORARY SHELTER, INC* * - * * * 5606

Page 3

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support			•			
Caler	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(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 fax-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						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from	I					
202	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6	(4) 2010	(6) 2011	(6) 2010	(u) 2013	(6) 2020	(i) rotar
10a							
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	i					
С	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 VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the corganization, check this box and stop he		t, second, third, fo			()()	▶ □
Sec	tion C. Computation of Public S						········ F
15	Public support percentage for 2020 (line			olumn (f))		15	%
16	Public support percentage from 2019 Sc	hedule A, Part III	, line 15			16	%
Sec	tion D. Computation of Investm	nent Income F	Percentage				
17	Investment income percentage for 2020	(line 10c, column	(f), divided by lin	e 13, column (f))		17	%
	vestment income percentage from 2019						%
19a	33 1/3% support tests—2020. If the org	-					. \square
	17 is not more than 33 1/3%, check this	-	-			-	▶ ⊔
b	33 1/3% support tests—2019. If the org	-					
20	line 18 is not more than 33 1/3%, check Private foundation . If the organization of	-	_			_	
20	i ilvate iouliuation. Il the organization (and thou chieck a bu	, on me 14, 19a	, 0, 130, 01601 [11	S DON ALIU SEE IIIS	น น น น น น น น น น น น น น น น น น น	

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer 3a lines 3b and 3c below.
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and b satisfied the public support tests under section 509(a)(2)? If "Yes." describe in Part VI when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign b supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control? С
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more 9a disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disgualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		
_		
4c		
5a		
5b		
5c		
6		
7		
1		
8		
9a		
9b		
9с		
30		
10a		
10b A (Form 990	or 990-l	EZ) 2020
		-

Page 5

Pai	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported	d		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	ion C. Type II Supporting Organizations			
_			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
C = =4	the supported organization(s).	1		
Sect	ion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
•	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
•	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
		3		
Sect	supported organizations played in this regard. ion E. Type III Functionally-Integrated Supporting Organizations	3	ļ	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ione)		
a	The organization satisfied the Activities Test. Complete line 2 below.	J.10).		
b	The organization statistical trie victivities rest. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instruc	tions).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		. 00	
-	the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify</i>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement,			
-	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>	_~		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
-	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
_	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

	ule A (Form 990 or 990-EZ) 2020 COMMITTEE ON TEMPORARY SHE			5606 Page 6
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgan	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on	Nov. 2	20, 1970 (<i>explain in Part</i>	t VI). See
	instructions. All other Type III non-functionally integrated supporting organizations r	nust c	complete Sections A thro	ugh E.
Sect	ion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of			
	gross income or for management, conservation, or maintenance of property			
	held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally integrate	ed Typ	oe III supporting organiza	ation

Schedule A (Form 990 or 990-EZ) 2020

(see instructions).

PUBLIC COPY COMMITTEE ON TEMPORARY SHELTER, INC**-***5606 Schedule A (Form 990 or 990-EZ) 2020 Page 7 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 3 Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required—provide details in Part VI) 5 Other distributions (describe in Part VI). See instructions. 6 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. Distributable amount for 2020 from Section C, line 6 9 10 Line 8 amount divided by line 9 amount (ii) (iii) (i) **Excess Distributions** Underdistributions Section E – Distribution Allocations (see instructions) Distributable Pre-2020 Amount for 2020 Distributable amount for 2020 from Section C, line 6 2 Underdistributions, if any, for years prior to 2020 (reasonable cause required-explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2020 **a** From 2015 **b** From 2016 **c** From 2017 **d** From 2018 e From 2019 f Total of lines 3a through 3e **g** Applied to underdistributions of prior years **h** Applied to 2020 distributable amount i Carryover from 2015 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2020 from Section D, line 7: a Applied to underdistributions of prior years **b** Applied to 2020 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2020, if

Schedule A (Form 990 or 990-EZ) 2020

any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2020 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in

Excess distributions carryover to 2021. Add lines 3j

Part VI. See instructions.

Breakdown of line 7: a Excess from 2016 **b** Excess from 2017. c Excess from 2018 **d** Excess from 2019 e Excess from 2020

and 4c.

Schedule A (Fo	orm 990 or 990-EZ) 202	O COMMITTE	E ON TEMPOR	ARY SHELTER,	INC**-***5606	Page 8
Part VI	Supplemental III, line 12; Part B, lines 1 and 2 3a, and 3b; Par	Information. Prov t IV, Section A, line 2; Part IV, Section Ort V, line 1; Part V,	ide the explanatio s 1, 2, 3b, 3c, 4b, C, line 1; Part IV, 3 Section B, line 1e	ns required by Part 4c, 5a, 6, 9a, 9b, 9d Section D, lines 2 ar	II, line 10; Part II, line 17 c, 11a, 11b, and 11c; Pa nd 3; Part IV, Section E, lines 5, 6, and 8; and Pa	7a or 17b; Part art IV, Section lines 1c, 2a, 2b
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Name	of the orga	nization	Employer identification number					
C	ОММТТ	TEE ON TEMPORARY SHELTER, INC	**_*	**5606				
	art I	Organizations Maintaining Donor Advised F Complete if the organization answered "Yes" o	unds or	Other Similar Fund 90, Part IV, line 6.				
1 2 3 4	Aggrega Aggrega	mber at end of year te value of contributions to (during year) te value of grants from (during year) te value at end of year	,	a) Donor advised funds) Funds and other accounts		
5 6	Did the of funds are Did the of	organization inform all donors and donor advisors in writing e the organization's property, subject to the organization's eorganization inform all grantees, donors, and donor advisors charitable purposes and not for the benefit of the donor or d	sed	Yes No				
		ng impermissible private benefit?		<u></u>		Yes No		
Pa	art II	Conservation Easements. Complete if the organization answered "Yes" o	n Form 9	90, Part IV, line 7.				
1	Purpose	(s) of conservation easements held by the organization (che						
	=	ervation of land for public use (for example, recreation or ed	ducation	Preservation of a histori				
	\vdash	ection of natural habitat		Preservation of a certific	ed historic str	ucture		
_		ervation of open space						
2		e lines 2a through 2d if the organization held a qualified cor	iservation c	ontribution in the form of				
_		nt on the last day of the tax year.				Held at the End of the Tax Year		
a		mber of conservation easements						
D	Number	reage restricted by conservation easements of conservation easements on a certified historic structure i	ncluded in	· · · · · · · · · · · · · · · · · · ·	20 2c			
d		of conservation easements included in (c) acquired after 7/2						
u		structure listed in the National Register	20/00, and	not on a	2d			
3		of conservation easements modified, transferred, released,	extinguishe	ed or terminated by the		during the		
Ŭ	tax year		Oxungulon	ou, or terminated by the v	organization	during the		
4	•	of states where property subject to conservation easement	is located	•				
5		e organization have a written policy regarding the periodic m						
		s, and enforcement of the conservation easements it holds?				☐ Yes ☐ No		
6		d volunteer hours devoted to monitoring, inspecting, handlin						
	•	5, T 5,		,		o ,		
7	Φ. Φ.	of expenses incurred in monitoring, inspecting, handling of	violations, a	and enforcing conservation	on easements	s during the year		
8		ch conservation easement reported on line 2(d) above satis	fy the requi	rements of section 170(h	n)(4)(B)(i)			
		ion 170(h)(4)(B)(ii)?				Yes No		
9		(III, describe how the organization reports conservation ease		•				
		sheet, and include, if applicable, the text of the footnote to t tion's accounting for conservation easements.	ne organiza	ition's financial statemen	its that descri	bes the		
Pa	art III	Organizations Maintaining Collections of Air Complete if the organization answered "Yes" o	rt, Histor	ical Treasures, or 0	Other Sim	ilar Assets.		
1a	If the ord	ganization elected, as permitted under FASB ASC 958, not t			nd balance sh	eet works		
	_	storical treasures, or other similar assets held for public exh						
		provide in Part XIII the text of the footnote to its financial sta			-			
b		ganization elected, as permitted under FASB ASC 958, to re				works of		
	_	orical treasures, or other similar assets held for public exhibit	-					
		the following amounts relating to these items:			·			
		enue included on Form 990, Part VIII, line 1				\$		
						\$		
2		ganization received or held works of art, historical treasures,	or other si	milar assets for financial	gain, provide	the		
	_	g amounts required to be reported under FASB ASC 958 rel						
а	_		=			\$		
b	Assets included in Form 990, Part X							

Sche	edule D (Form 990) 2020 COMMITTI	EE ON TEMPO	DRARY SHELT	CER, INC	C**-***56	506		Pa	ge 2
Pa	rt III Organizations Maintain	ing Collections	of Art, Historica	al Treasure	s, or Other S	Similar As	sets (c	ontin	ued)
3	Using the organization's acquisition, according collection items (check all that apply):	ession, and other rec	ords, check any of th	ne following that	at make significa	int use of its			
а	Public exhibition	d 🗌	Loan or exchange p	rogram					
b	Scholarly research	е	Other	-					
С	Preservation for future generations								
4	Provide a description of the organization	s collections and exp	lain how they further	the organizat	ion's exempt pu	rpose in Part			
	XIII.	'	,	3		•			
5	During the year, did the organization soli	cit or receive donatio	ns of art, historical tr	easures, or oth	ner similar				
	assets to be sold to raise funds rather that						Ye	s	No
Pa	art IV Escrow and Custodial		e part or the organiz				<u> </u>		
	Complete if the organization		es" on Form 990). Part IV. lir	ne 9. or repoi	rted an am	ount on	For	m
	990, Part X, line 21.			, ,	,,				
1a	Is the organization an agent, trustee, cus	todian or other intern	nediary for contribution	ons or other as	ssets not				
	in aluded on Ferma 000 Deat VO		•				Ye	s	No
b	If "Yes," explain the arrangement in Part	XIII and complete the					. Ш		
-		, aa cop.o.c	o reneming table.				Amoun	t	
c	Beginning balance					1c			_
	Additions during the year								—
u 0	Distributions during the year					1e			—
f	Ending balance					1f			—
2a	Did the organization include an amount of	on Form 990 Part X	line 21 for escrow o	r custodial acc	ount liability?		Ye		No
	If "Yes," explain the arrangement in Part						. L ·	·•	
	ert V Endowment Funds.	Zin. Oncok nore ii ur	o explanation has be	on provided o	irr urt XIII				
	Complete if the organization	tion answered "Y	es" on Form 990) Part IV lir	ne 10				
	Complete ii the organiza	(a) Current year	(b) Prior year	(c) Two year		ree years back	(e) Fou	vears b	
1a	Beginning of year balance	(4, 5 2) 2 2	(2) : ::::) ::::	(2, 1112, 1211	(4)	, , , , , , , , , , , , , , , , , , , ,	(-)	,	
h	Contributions								
C	Net investment earnings, gains, and								
·	loopee								
ч	Grants or scholarships								
	Other expenditures for facilities and								
·									
f	programs								
,	End of year balance								
	Provide the estimated percentage of the	current year end half	nce (line 1g. column	(a)) held as:					
	Board designated or quasi-endowment	•	ance (line 19, column	i (a)) field as.					
	·								
	Tame and assessment •	,							
·	The percentages on lines 2a, 2b, and 2c	should equal 100%							
32	Are there endowment funds not in the po	•	nization that are held	and administr	ared for the				
ou	organization by:	33C33ION OF THE Organ	inzation that are ner	and daminist	crea for the		ſ	Yes	No
	= -						3a(i)	.00	-110
	(i) Unrelated organizations						3a(ii)		
h	(ii) Related organizations	nizations listed as re	auired on Schedule	 R2			3b		
4	Describe in Part XIII the intended uses of							<u> </u>	
Pa	art VI Land, Buildings, and Ed		ndownient lands.						
	Complete if the organization		es" on Form 990) Part IV lir	ne 11a See I	Form 990	Part X	line	10
	Description of property	(a) Cost or other		other basis	(c) Accumulate		(d) Book		10.
	Decempation of property	(investment	', '	her)	depreciation		(4) 2001.	· a.a.o	
12	Land	,	,	39,750	•		1 3	9.5	750
h	Land			19,550	2,309	145	1,51		105
D	Buildings		3,0	, + , , , , , , ,	4,309	, 1 1 1	<u> </u>	, -	.03
			7	67,631	527	,775	2.0	19,8	356
	Equipment			.04,513	J 3 1	, 113			513
	Other							/ -	<u>524</u>
ı Uld	i. Add illes Ta tillough Te. (Columin (a) Ill	usi Equal I-01111 990,	i ait A, Colullii (B), I	100.)		····· 🗾	1. D (Fam		2020

Schedule D (Forr	m 990) 2020	COMMITTEE	ON	TEMPORARY	SHELTER,	. INC**-***5606

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Page	-5

Part VII	Investments – Other Securities. Complete if the organization answered "Yes"	on Form 990 Part IV	line 11h See Form 0	IQN Part X line 12
	(a) Description of security or category	(b) Book value	(c) Method o	
	(including name of security)	(b) Book value	Cost or end-of-ye	
(1) Financial	dorivativos			
(2) Other	eld equity interests			
(3) Other				
(^)				
(P)				
(c)				
(È)				
(F)				
(H)				
	nn (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments – Program Related.	E 000 D (IV)	" 44 0 5 0	00 D () / I' 40
	Complete if the organization answered "Yes"			
	(a) Description of investment	(b) Book value	(c) Method o	
			Cost or end-of-ye	ar market value
(1) INVES	STMENT IN COTS HOUSING	2,343,126	COST	
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	nn (b) must equal Form 990, Part X, col. (B) line 13.)	2,343,126		
Part IX	Other Assets.	,		
	Complete if the organization answered "Yes"	on Form 990, Part IV,	line 11d. See Form 9	90, Part X, line 15.
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	nn (b) must equal Form 990, Part X, col. (B) line 15.)			
Part X	Other Liabilities.		······	
FailA	Complete if the organization answered "Yes"	on Form 000 Part IV	line 11e or 11f See l	Form 000 Part V
		on Form 990, Fait IV	, iiile i le oi i ii. See i	Form 990, Part A,
	line 25.			#15 · ·
1.	(a) Description of liability			(b) Book value
	income taxes			12.66
	RITY DEPOSITS PAYABLE			13,66
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	nn (b) must equal Form 990, Part X, col. (B) line 25.)		>	13,66
	uncertain tax positions. In Part XIII, provide the text of the	footnote to the organization	n's financial statements tha	

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

Pa		SHELTER, II			
	art XI Reconciliation of Revenue per Audited Financia			Retu	rn.
	Complete if the organization answered "Yes" on Fo	rm 990, Part IV,	line 12a.		F 152 500
1	Total revenue, gains, and other support per audited financial statements			1	5,173,502
2		ا ءء ا	275 202		
a	Net unrealized gains (losses) on investments	2a 2b	375,203		
D	Donated services and use of facilities	20 2c			
ن	Recoveries of prior year grants				
u	1 Other (Describe in Part XIII.)			2e	375,203
3	Add lines 2a through 2d			3	4,798,299
4	Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	 		J	1,100,200
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	23,236		
	Other (Describe in Part XIII.)				
	Add lines 4a and 4b			4c	23,236
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)		5	4,821,535
	art XII Reconciliation of Expenses per Audited Financi			er Re	
	Complete if the organization answered "Yes" on Fo				
1	Tatal and an and large and the differential statements			1	3,913,248
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				_
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	
3				3	3,913,248
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
	Investment expenses not included on Form 990, Part VIII, line 7b		23,236		
	Other (Describe in Part XIII.)	4b			00.006
	Add lines 4a and 4b			4c	23,236
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lines 4 XIII.	ne 18.)		5	3,936,484
	art XIII Supplemental Information.				
	uide the descriptions required for Dort II, lines 2, F, and 0; Dort III, lines 1e or	ad 4: Dart IV lines 1h	and the Dort V line	4: Dort	V line
Pro۱	vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and			4; Part	X, line
Prov 2; P	Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this par			4; Part	X, line
Prov 2; P				4; Part	X, line
Prov 2; P	Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part PART X $-$ FIN 48 FOOTNOTE	t to provide any addi	tional information.		
Prov 2; P	Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this par	t to provide any addi	tional information.		
Prov 2; P P	Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part PART X - FIN 48 FOOTNOTE THE ORGANIZATION BELIEVES IT HAS APPRO	t to provide any addi	tional information.	NY.	TAX POSITIONS
Prov 2; P P	Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part PART X $-$ FIN 48 FOOTNOTE	t to provide any addi	tional information.	NY.	TAX POSITIONS
Prov 2; P P T	Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part PART X - FIN 48 FOOTNOTE THE ORGANIZATION BELIEVES IT HAS APPROMAKEN, AND, AS SUCH, DOES NOT HAVE ANY	t to provide any addi	tional information. PPORT FOR F	NY	TAX POSITIONS
Prov 2; P P T	Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part PART X - FIN 48 FOOTNOTE THE ORGANIZATION BELIEVES IT HAS APPRO	t to provide any addi	tional information. PPORT FOR F	NY	TAX POSITIONS
Prov 2; P P T T	Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part PART X - FIN 48 FOOTNOTE THE ORGANIZATION BELIEVES IT HAS APPROTAKEN, AND, AS SUCH, DOES NOT HAVE ANY MATERIAL TO THE FINANCIAL STATEMENTS.	t to provide any addi	tional information. PPORT FOR A	ANY	TAX POSITIONS
Prov 2; P P T T	Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part PART X - FIN 48 FOOTNOTE THE ORGANIZATION BELIEVES IT HAS APPROMAKEN, AND, AS SUCH, DOES NOT HAVE ANY	t to provide any addi	tional information. PPORT FOR A	ANY	TAX POSITIONS
Prov 2; P P T	Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part PART X - FIN 48 FOOTNOTE THE ORGANIZATION BELIEVES IT HAS APPROMENTATION, AS SUCH, DOES NOT HAVE ANY MATERIAL TO THE FINANCIAL STATEMENTS.	t to provide any addi	tional information. PPORT FOR F	ANY	TAX POSITIONS
Prov 2; P P T	Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part PART X - FIN 48 FOOTNOTE THE ORGANIZATION BELIEVES IT HAS APPROTAKEN, AND, AS SUCH, DOES NOT HAVE ANY MATERIAL TO THE FINANCIAL STATEMENTS.	t to provide any addi	tional information. PPORT FOR F	ANY	TAX POSITIONS
Prov 2; P P T T	Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part PART X - FIN 48 FOOTNOTE THE ORGANIZATION BELIEVES IT HAS APPROTAKEN, AND, AS SUCH, DOES NOT HAVE ANY MATERIAL TO THE FINANCIAL STATEMENTS.	t to provide any addi	tional information. PPORT FOR F	ANY CION	TAX POSITIONS
Prov 2; P P T T	Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part PART X - FIN 48 FOOTNOTE THE ORGANIZATION BELIEVES IT HAS APPROMENTATION, AS SUCH, DOES NOT HAVE ANY MATERIAL TO THE FINANCIAL STATEMENTS.	t to provide any addi	tional information. PPORT FOR F	ANY CION	TAX POSITIONS
Prov 2; P P T T	Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part PART X - FIN 48 FOOTNOTE THE ORGANIZATION BELIEVES IT HAS APPROTAKEN, AND, AS SUCH, DOES NOT HAVE ANY MATERIAL TO THE FINANCIAL STATEMENTS.	t to provide any addi	tional information. PPORT FOR A	ANY	TAX POSITIONS
Prov 2; P P T T	Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part PART X - FIN 48 FOOTNOTE THE ORGANIZATION BELIEVES IT HAS APPROTAKEN, AND, AS SUCH, DOES NOT HAVE ANY MATERIAL TO THE FINANCIAL STATEMENTS.	t to provide any addi	tional information. PPORT FOR A	ANY	TAX POSITIONS
T. T. M.	Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part PART X - FIN 48 FOOTNOTE THE ORGANIZATION BELIEVES IT HAS APPROTAKEN, AND, AS SUCH, DOES NOT HAVE ANY MATERIAL TO THE FINANCIAL STATEMENTS.	t to provide any addi	tional information. PPORT FOR F	ANY	TAX POSITIONS
T. T. M.	Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part PART X - FIN 48 FOOTNOTE THE ORGANIZATION BELIEVES IT HAS APPROMENTATION, AS SUCH, DOES NOT HAVE ANY MATERIAL TO THE FINANCIAL STATEMENTS.	t to provide any addi	tional information. PPORT FOR F	ANY	TAX POSITIONS
Prov 2; P P T T	Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part PART X - FIN 48 FOOTNOTE THE ORGANIZATION BELIEVES IT HAS APPROMENTATION, AS SUCH, DOES NOT HAVE ANY MATERIAL TO THE FINANCIAL STATEMENTS.	t to provide any addi	tional information. PPORT FOR F	ANY	TAX POSITIONS
Prov 2; P P T T	Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part PART X - FIN 48 FOOTNOTE THE ORGANIZATION BELIEVES IT HAS APPROMENTATION, AS SUCH, DOES NOT HAVE ANY MATERIAL TO THE FINANCIAL STATEMENTS.	t to provide any addi	tional information. PPORT FOR F	ANY	TAX POSITIONS
Prov 2; P P T T	Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part PART X - FIN 48 FOOTNOTE THE ORGANIZATION BELIEVES IT HAS APPROMENTATION, AS SUCH, DOES NOT HAVE ANY MATERIAL TO THE FINANCIAL STATEMENTS.	t to provide any addi	tional information. PPORT FOR F	ANY	TAX POSITIONS
Prov 2; P P T T	Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part PART X - FIN 48 FOOTNOTE THE ORGANIZATION BELIEVES IT HAS APPROMENTATION, AS SUCH, DOES NOT HAVE ANY MATERIAL TO THE FINANCIAL STATEMENTS.	t to provide any addi	tional information. PPORT FOR F	ANY	TAX POSITIONS
Prov 2; P P T T	Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part PART X - FIN 48 FOOTNOTE THE ORGANIZATION BELIEVES IT HAS APPROMENTATION, AS SUCH, DOES NOT HAVE ANY MATERIAL TO THE FINANCIAL STATEMENTS.	t to provide any addi	tional information. PPORT FOR F	ANY	TAX POSITIONS

Schedule D (F	orm 990) 2020	COMMITT	EE ON	TEMPORA	ARY SHE	LTER,	INC**-*	**5606	Page 5
Part XIII	Supplemen	ntal Informat	ti <mark>on</mark> (cont	tinued)					
•									

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" on Form 990, Part IV, line 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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public

Name of the organization Employer identification number **-***5606 COMMITTEE ON TEMPORARY SHELTER, INC Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants Internet and email solicitations Solicitation of government grants b Phone solicitations Special fundraising events C d In-person solicitations 2a 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 b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fund (v) Amount paid to (vi) Amount paid to raiser have (i) Name and address of individual (iv) Gross receipts (or retained by) (or retained by) custody or (ii) Activity or entity (fundraiser) from activity fundraiser listed in organization control of ontributions col. (i) Yes No 1 2 3 10 Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

	edule G (Form 990 or 990-E	Z) 2020 COMMITTEE (ON TEMPORARY SHEI	TER, INC**-**	*5606 Page 2
Pa	than \$15,000	Events. Complete if the org of fundraising event contribe greater than \$5,000.			
	<u> </u>	(a) Event #1 PHONATHON	(b) Event #2 COTS WALK	(c) Other events NONE	(d) Total events (add col. (a) through
<u>o</u>		(event type)	(event type)	(total number)	col. (c))
Revenue	1 Gross receipts	505,923	223,332		729,255
	2 Less: Contributions 3 Gross income (line 1 minus line 2)		223,332		729,255
	4 Cash prizes				
	5 Noncash prizes				
Direct Expenses	6 Rent/facility costs				
ect Ex	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses			_	
	10 Direct expense summary11 Net income summary	ry. Add lines 4 through 9 in columr Subtract line 10 from line 3, columi	າ (d) ກ (d)		
	art III Gaming. Cor	nplete if the organization ar			ported more than
	\$15,000 on F	orm 990-EZ, line 6a.		1	
Kevenue		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
צ	1 Gross revenue				
ses	2 Cash prizes				
Direct Expen	3 Noncash prizes				
Direc	4 Rent/facility costs				
	,,,				
	5 Other direct expenses				
		Yes % No	Yes % No	Yes %	
	5 Other direct expenses6 Volunteer labor		No	No	
	5 Other direct expenses6 Volunteer labor7 Direct expense summa	No	No No	No Þ	
9 a	 5 Other direct expenses 6 Volunteer labor 7 Direct expense summa 8 Net gaming income sur Enter the state(s) in which 	ry. Add lines 2 through 5 in column	No n (d) column (d) activities:	No •	Yes No
а	 5 Other direct expenses 6 Volunteer labor 7 Direct expense summa 8 Net gaming income sur Enter the state(s) in which is the organization licensed If "No," explain: 	ry. Add lines 2 through 5 in column nmary. Subtract line 7 from line 1, the organization conducts gaming	No n (d) column (d) activities: ach of these states?	No •	Yes No
a b	Other direct expenses Volunteer labor Direct expense summa Net gaming income sur Enter the state(s) in which is the organization licensed If "No," explain:	ry. Add lines 2 through 5 in column nmary. Subtract line 7 from line 1, the organization conducts gaming I to conduct gaming activities in ear	No n (d) column (d) activities: ach of these states?	No b	Yes No

Sche	edule G (Form 990 or 990-EZ) 2020 COMMITTEE ON TEMPORARY SHELTER, INC**-**	[*] 560	6	F	Page	3
11	Does the organization conduct gaming activities with nonmembers?			Yes		No
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?			Yes		No
13	Indicate the percentage of gaming activity conducted in:	1	i			,
a	The organization's facility	13a			%	_
b	An outside facility Enter the name and address of the person who prepares the organization's gaming/special events books and	13b			%	0
14	records:					
	records.					
	Name ▶					
	Address ▶					
15a	Does the organization have a contract with a third party from whom the organization receives gaming					
	revenue?			Yes		No
b	If "Yes," enter the amount of gaming revenue received by the organization 🔰 and the					
	amount of gaming revenue retained by the third party ▶\$					
С	If "Yes," enter name and address of the third party:					
	Name ▶					
	Name ▶					
	Address ▶					
16	Gaming manager information:					
	Name ▶					
	Coming manager companeation No.					
	Gaming manager compensation ▶\$					
	Description of services provided ▶					
	Director/officer Employee Independent contractor					
17	Mandatory distributions:					
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to					
	retain the state gaming license?			Yes		No
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 ▶\$					
Pa	urt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns	(iii) a	and i	/v). a	nd	_
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional					
	See instructions.					

Schedule G (Form 990 or 990-EZ) 2020

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

DAA

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.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

COMMITTEE ON TEMPO	<u>RARY SHEI</u>	JTER,	INC			* 7	*-*** <u>5606</u>
Part I General Information on Grants and	d Assistance						
 Does the organization maintain records to substantiate the selection criteria used to award the grants or assista Describe in Part IV the organization's procedures for months. 	ance?onitoring the use	of grant fu	nds in the United Sta	tes.			
Part II Grants and Other Assistance to Do Part IV, line 21, for any recipient that							answered "Yes" on Form 99
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 noncash assistance	(h) Purpose of grant or assistance
)							
2)							
)							
)							
)							
)							
)							
2 Enter total number of section 501(c)(3) and government	-						······•
3 Enter total number of other organizations listed in the lir or Paperwork Reduction Act Notice, see the Instructions							Schedule I (Form 990) (2020)

Schedule I (Form 990) (2020) COMMITTEE OI	N TEMPORARY S	HELTER, INC*	*-***5606		Page 2
Part III Grants and Other Assistance	to Domestic Individ	luals. Complete if th	ne organization ans	wered "Yes" on Form 990	, Part IV, line 22.
Part III can be duplicated if add					
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 PREVENTION SERVICES	55	78,385			
2 PERMANENT HOUSING	5	10,551			
3					
4					
5					
6					
7			0.5.411		
Part IV Supplemental Information. Pr	ovide the information	required in Part I, I	ne 2; Part III, colun	nn (b); and any other addi	tional information.
• • • • • • • • • • • • • • • • • • • •					
• • • • • • • • • • • • • • • • • • • •					

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

COMMITTEE ON TEMPORARY SHELTER, INC

Employer identification number **-***5606

Pa	art I Types of Property							
		(a)	(b)	(c) Noncash contribution	(d)			
		Check if	Number of contributions or	amounts reported on	Method of determining	ng		
		applicable	items contributed	Form 990, Part VIII, line 1g	noncash contribution am	ounts		
1	Art — Works of art							
2	Art — Historical treasures							
3	Art — Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities — Publicly traded	X	18	105,756	FAIR MARKET VAL	UE		
10	Securities — Closely held stock							
11	Securities — Partnership, LLC,							
	or trust interests							
12	Securities — Miscellaneous							
13	Qualified conservation							
	contribution — Historic							
	structures							
14	Qualified conservation							
	contribution — Other							
15	Real estate — Residential							
16	Real estate — Commercial							
17	Real estate — Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ►()							
26	Other ►()							
27	Other ►()							
28	Other ►(
29	Number of Forms 8283 received by	-						
	which the organization completed I	Form 8283	3, Part IV, Donee Ackno	owledgement [29	1	V	NI-
20-	During the year did the arrest-ti-	n rocei:-	hy contribution and	norty reported in Dart I III	age 1 through		Yes	No
30a	During the year, did the organization				_			
	28, that it must hold for at least three	-			·	200		Х
h	to be used for exempt purposes for If "Yes," describe the arrangement		e notating period?			30a		
31	Does the organization have a gift a		a noticy that requires th	e review of any ponetondo	ard			
J 1	a a m t m i h u ti a m a O	•		-		31	Χ	
322	Does the organization hire or use t				ell noncash	31	21	
JZa		•	•	•		32a	Х	
b	If "Yes," describe in Part II.					JZa	25	
33	If the organization didn't report an	amount in	column (c) for a type o	f property for which column	n (a) is checked			
-			* * * * * * * * * * * * * * * * * * * *		(4) 10 011001104,			
	GOOGLEO III I GIT II.		tions for Form 000			- M /Гож		

Page 2 Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
PART I, LINE 32B - THIRD PARTY USED TO PROCESS NONCASH CONTRIBUTIONS
CHARLES SCHWAB HANDLES THE PROCESSING OF STOCK DONATIONS.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

2020

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. Open to Public

Inspection Name of the organization Employer identification number **-**5606 COMMITTEE ON TEMPORARY SHELTER

FORM 990 - ADDITIONAL INFORMATION IN FY20, COTS RECEIVED A \$1M GIFT FOR ITS FUTURE MAIN STREET FAMILY PROJECT, WHICH IS PLANNED TO BE A 16 UNIT BUILDING OF AFFORDABLE APARTMENTS FOR FORMERLY HOMELESS FAMILIES. COTS RESOURCES CONTINUE TO BE COMMITTED TO ITS SIGNIFICANT INVESTMENT IN SEVEN BUILDINGS (FIVE DIRECTLY OWNED), MOST OF WHICH ARE OVER 100 YEARS OLD. IN ADDITION TO REGULAR MAINTENANCE, THESE PROPERTIES REQUIRE EXPENSIVE REPAIRS AND UPDATING, INCLUDING PERIODIC RENOVATIONS. FORM 990, PART III, LINE 4B - SECOND ACCOMPLISHMENT IN THE 2021 FISCAL YEAR, COTS HELPED 163 HOUSEHOLDS EXPERIENCING FINANCIAL CRISIS AVERT HOMELESSNESS AND STAY IN THEIR HOUSING, AND ASSISTED 35 HOUSEHOLDS IN ACHIEVING RAPID RE-HOUSING AFTER HAVING LOST PREVIOUS HOUSING. HOMELESSNESS PREVENTION PROGRAM: THE HOUSING RESOURCE CENTER (HRC), COTS' CENTRALIZED ONE-STOP COMMUNITY CENTER IS DEDICATED TO HOMELESSNESS PREVENTION AND HOUSING RETENTION. THE HRC OFFERS ASSISTANCE TO PREVENT AT-RISK HOUSEHOLDS FROM LOSING THEIR EXISTING HOUSING DUE TO UNFORESEEN CIRCUMSTANCES AND TO ASSIST THOSE WHO ARE WITHOUT PERMANENT SHELTER MOVE INTO STABLE HOUSING. LONGSTANDING RELATIONSHIPS WITH A NETWORK OF LOCAL LANDLORDS HELPS TO FACILITATE SUCCESSFUL CLIENT TRANSITIONS INTO PRIVATE AND PUBLIC HOUSING. THE HRC OFFERS GRANTS, LOANS, AND GUARANTEE ASSISTANCE WITH RENT AND SECURITY DEPOSITS. FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENTS SUPPORT SERVICES: ONE-ON-ONE SUPPORT SERVICES ARE OFFERED TO ALL OF COTS!

Schedule O (Form 990 or 990-EZ) 2020 Name of the organization COMMITTEE ON TEMPORARY SHELTER, INC	Page 2 Employer identification number **-**5606
CLIENTS. 53 HOMELESS FAMILIES, INCLUDING THOSE STAYING	G IN EMERGENCY SHELTER
OR IN THE COMMUNITY, RECEIVED SUPPORT FROM COTS STAFF.	. 130 SINGLE, HOMELESS
ADULTS RECEIVED OUTREACH AND SUPPORT FROM COTS STAFF.	
TRANSITIONAL AND PERMANENT HOUSING: THE SMITH HOUSE (C	OPENED IN 2002)
PROVIDES INDIVIDUALS MOVING OUT OF SHELTER WITH TRANSI	ITIONAL HOUSING. THE
SMITH HOUSE HAS SEVEN SINGLE-ROOM OCCUPANCY UNITS, PLU	JS TWO PERMANENT
APARTMENTS, AND A FULL-TIME RESIDENTIAL MANAGER.	
CANAL STREET VETERANS HOUSING (OPENED IN 2011) PROVIDE	ES 28 UNITS OF
PERMANENT, AFFORDABLE HOUSING WITH PRIORITY PLACEMENT	FOR VETERANS AND
THEIR FAMILIES.	
THE WILSON (PURCHASED IN 1984) AND ST. JOHN'S HALL (PU	JRCHASED IN 1991)
TOGETHER PROVIDE 44 SINGLE-ROOM OCCUPANCY (SRO) UNITS	AND FOUR APARTMENTS:
PERMANENT HOUSING FOR FORMERLY HOMELESS INDIVIDUALS, A	AS WELL AS LOW-INCOME
SENIOR CITIZENS AND VETERANS; BOTH FACILITIES ALSO HAV	/E RESIDENTIAL
MANAGERS.	
FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS T	TO REVIEW FORM 990
ALL BOARD MEMBERS RECEIVE A COPY OF THE FORM 990 AND F	HAVE THE OPPORTUNITY
TO REVIEW IT AND ASK QUESTIONS BEFORE FILING.	
FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS	S POLICY
ANNUAL DISCLOSURE STATEMENTS ARE REQUIRED AND REVIEWED	D. THEY ARE DISCUSSED
WITH INDIVIDUAL TRUSTEES IF NECESSARY.	
FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR	R TOP OFFICIAL
THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS DETE	ERMINES THE EXECUTIVE
DIRECTOR'S COMPENSATION ANNUALLY BY BENCHMARKING THE S	SALARY WITH OTHER

Schedule O (Form 990 or 990-EZ) 2020	Page 2
Name of the organization	Employer identification number
COMMITTEE ON TEMPORARY SHELTER, INC	**-***5606
ORGANIZATIONS.	
FORM 990, PART VI, LINE 19 - GOVERNING DOCUM	ENTS DISCLOSURE EXPLANATION
GOVERNING DOCUMENTS ARE MADE AVAILABLE UPON I	REQUEST. FINANCIAL STATEMENTS
ARE ALSO AVAILABLE ON THE COTS WEBSITE.	
ARE ALSO AVAILABLE ON THE COIS WEBSITE.	

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization **-**5606 COMMITTEE ON TEMPORARY SHELTER, INC Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I Legal domicile (state Total income Name, address, and EIN (if applicable) of disregarded entity Primary activity End-of-year assets Direct controlling or foreign country) (1) (2) (3) (4) (5) Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had Part II one or more related tax-exempt organizations during the tax year.

(g) Section 512(b)(13) controlled entity? Name, address, and EIN of related organization Legal domicile (state Public charity status Primary activity **Exempt Code section** Direct controlling or foreign country) (if section 501(c)(3)) Yes No (1) (2) (3) (4) (5)

Schedule R (Form 990) 2020 COMMITTEE ON TEMPORARY SHELTER, INC**-***5606

Part III Identification of Related Organization because it had one or more related	ations Taxab organization	ole as	a Partnersh ated as a part	i p. Complete nership durin	if the organization the tax year.	on answered "Ye	es" o	n F	orm 990, Part I	V, I	ine	34,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Dispriportion alloc	ro- nate :.?	amount in box 20 of Schedule K-1 (Form 1065)	Gene mana parti Yes	ral or aging ner?	(k) Percentage ownership
(1)CANAL STREET HOUSING L.P. CANAL STREET WINOOSKI VT 05404							103	140	N/A		140	
-4071	VET. HSG.	VT	N/A	UNRELATED				Х	11/ 2		Х	0.50
(2)95 NORTH AVENUE LIMITED PARTNERSH 95 NORTH AVENUE BURLINGTON VT 05401 **-**3069	IP HOUSING	VT	N/A	UNRELATED				X	N/A		Х	0.01
(3)												
(4)												

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year. Part IV

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	512(l conti	tion b)(13) rolled tity?
								Yes	No
(1)COTS VETERANS HOUSING, INC PO BOX 1616									
BURLINGTON VT 05402 **-**3923	VET. HSG.	VT	COTS	С	-7	1,214,306	100.000000		Х
(2)COTS HOUSING, INC. PO BOX 1616 BURLINGTON VT 05402				_					
-*9426 (3)	HOUSING	VT	COTS	С	-9	2,372,681	100.000000		X
(4)									
							Schedule B (Form	2 000)	2020

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Mark O Line Art Charles Daniel					Vaa	Nia
Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		:			Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more				4 -		37
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		X
b Gift, grant, or capital contribution to related organization(s)				1b		Х
c Gift, grant, or capital contribution from related organization(s)				1c		X
d Loans or loan guarantees to or for related organization(s)				1d		1
e Loans or loan guarantees by related organization(s)				1e		Х
5 Dividends from related accomination (a)				4.5		v
f Dividends from related organization(s)				1f		X
g Sale of assets to related organization(s)				1g		
h Purchase of assets from related organization(s)				1h		X
i Exchange of assets with related organization(s)				1i		X
j Lease of facilities, equipment, or other assets to related organization(s)				1j		Х
					37	
				1k	Х	37
Performance of services or membership or fundraising solicitations for related organization(s)				11		X
m Performance of services or membership or fundraising solicitations by related organization(s)				1m		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		X
Sharing of paid employees with related organization(s)				10		Х
				_		
p Reimbursement paid to related organization(s) for expenses				1p		X
q Reimbursement paid by related organization(s) for expenses				1q		Х
r Other transfer of cash or property to related organization(s)				1r		X
s Other transfer of cash or property from related organization(s)				1s		Х
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete						
(a) Name of related organization	(b) Transaction	(c) Amount involved	(d) Method of determining amou	unt invol	rod.	
Name of Glated Organization	type (a-s)	Amount involved	Method of determining arriot	JIIL IIIVOI	veu	
(4) OF MODERIA MARKET I D	77	F2 F02	CA CII			
(1) 95 NORTH AVENUE L.P.	K	53,593	CASH			
(1)						
(2)						
(2)						
(3)						
(4)						
(5)						
(6)						

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile	(d) Predominant income (related,		e) partners	(f) Share of total income	(g) Share of end-of-year		h) ortionate itions?	(i) Code V—UBI amount in box 20	Gene	j) eral or aging	(k) Percentage ownership
		(state or foreign	unrelated, excluded from tax under		(c)(3)		assets			of Schedule K-1 (Form 1065)	part	ner?	
		country)	sections 512-514)	Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
••••••													
(7)													
(8)													
••••••													
(9)													
(10)													
(11)													
• • • • • • • • • • • • • • • • • • • •													

Part VII Supplemental Information. Provide additional information for responses to questions on Schedule R. See instructions.
SCHEDULE R - ADDITIONAL INFORMATION
DURING FY16 COTS FORMED A CORPORATE ENTITY CALLED COTS HOUSING INC. FOR TH
PURPOSES OF INVESTING IN A LIMITED PARTNERSHIP TO CREATE AFFORDABLE
HOUSING, RENOVATE PROGRAM SPACE AND BUILD A NEW DAYSTATION AT 95 NORTH
AVENUE IN BURLINGTON, VERMONT. THIS LIMITED PARTNERSHIP, 95 NORTH LP,
ALLOWED COTS TO RECEIVE TAX CREDIT FINANCING USED IN THIS RENOVATION. IN
ADDITION TO THE TAX CREDIT FINANCING AND OTHER PUBLIC FUNDS, COTS INVESTED
PROCEEDS OF A SUCCESSFUL CAPITAL CAMPAIGN IN THIS PROJECT VIA COTS HOUSING
INC.
• • • • • • • • • • • • • • • • • • • •
•
• • • • • • • • • • • • • • • • • • • •

Form **4562**

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Depreciation and Amortization

(Including Information on Listed Property)

► Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

Identifying number

	COMMIT	TEE ON TEM	PORARY SHELT	ER, IN	IC	**_	. * * *	5606
Busir	ness or activity to which this form relat			,				
	NDIRECT DEPRECIAT							
			perty Under Secti	on 179				
			rty, complete Part \		ou comple	ete Part I.		
1	Maximum amount (see instruction						1	1,040,000
2	Total cost of section 179 propert		see instructions)				2	
3	Threshold cost of section 179 pr						3	2,590,000
4	Reduction in limitation. Subtract						4	273307300
5	Dollar limitation for tax year. Subtract		• • • •	I filing senarate	olv see instru	rtions	5	
6	(a) Descriptio			st (business use		(c) Elected cost		
<u> </u>	1.7	1 1 7	(4)		,,	(-)		
7	Listed property. Enter the amou	nt from line 29			7			1
8	Total elected cost of section 179		ınts in column (c) lines (3 and 7			8	
9	Tentative deduction. Enter the s			J unu 1			9	
10	Carryover of disallowed deduction						10	
11	Business income limitation. Ente			an zero) or l	ine 5. See i	netructions	11	
 12	Section 179 expense deduction.		•	,			12	
13	Carryover of disallowed deduction				13		12	
	e: Don't use Part II or Part III below				10			
				iation (Do	n't includ	le listed pr	onert	y. See instructions.)
14	Special depreciation allowance f					ie iistea pr	 	y. 000 mondono. <u>)</u>
	during the tax year. See instruct			• , .			14	
15	Property subject to section 168(f\/d\ alactics					15	
16	Other depreciation (including AC	** *					16	160,747
			ude listed property.				1.0	100,717
	www.corto.boproore	tton (Bon t mon	Section A	000 1110110	ionorio.j			
17	MACRS deductions for assets p	laced in service in ta	x vears beginning before	2020			17	C
18	If you are electing to group any assets place				heck here	▶ □		
			vice During 2020 Tax Y				Svste	em
		(b) Month and year	(c) Basis for depreciation	(d) Recovery				
	(a) Classification of property	placed in service	(business/investment use only–see instructions)	period	(e) Convent	ion (f) Met	thod	(g) Depreciation deduction
19a	3-year property		,					
b	5-year property							
С	7-year property							
d								
е	15-year property							
f	20-year property							
	25-year property			25 yrs.		S/L	_	
h	Residential rental			27.5 yrs.	MM	S/L	_	
	property			27.5 yrs.	MM	S/L		
i	Nonresidential real			39 yrs.	MM	S/L	_	
-	property				MM	S/I		
	Section C—Ass	ets Placed in Servi	ce During 2020 Tax Yea	ar Using the	Alternative	e Depreciation	on Sys	tem
20a	Class life			Τ		S/I		
	12-year			12 yrs.		S/L		
	30-year			30 yrs.	MM	S/I		
	40-year			40 yrs.	MM	S/I		
	art IV Summary (See in	structions.)		, ,	•			ı
21	Listed property. Enter amount from						21	
22	Total. Add amounts from line 12		7, lines 19 and 20 in colu	mn (g), and	line 21. Ent	er		
	here and on the appropriate line						22	160,747
23	For assets shown above and pla	aced in service during	g the current year, enter	the				
	portion of the basis attributable t	n section 263A costs	8		23			

Form 990 Two Year Comparison Report

For calendar year 2020, or tax year beginning 10/01/20 , ending 09/30/21

2019 & 2020

Nar	ne The state of th			Taxpay	rer Identification Number
	OMMITTEE ON TEMPORARY SHELTER, I	NC		**_	***5606
			2019	2020	Differences
	1. Contributions, gifts, grants	1.	3,301,455	2,295,200	-1,006,255
	2. Membership dues and assessments	2.			
_	3. Government contributions and grants	3.	1,077,112	2,028,010	950,898
n	4. Program service revenue	4.	386,736	400,774	14,038
e n	5. Investment income	5.	55,052	86,877	31,825
>	6. Proceeds from tax exempt bonds	6.			
8	7. Net gain or (loss) from sale of assets other than inventory	7.	-67,523	2,891	70,414
	8. Net income or (loss) from fundraising events	8.			
	9. Net income or (loss) from gaming	9.			
	10. Net gain or (loss) on sales of inventory	10.			
	11. Other revenue	11.	19,003	7,783	
	12. Total revenue. Add lines 1 through 11	12.	4,771,835		
	13. Grants and similar amounts paid	13.	102,621	88,936	-13,685
	14. Benefits paid to or for members	14.			
9	15. Compensation of officers, directors, trustees, etc	15.	132,686		
S	16. Salaries, other compensation, and employee benefits	16.	2,215,749	2,567,752	352,003
9	17. Professional fundraising fees	17.			
×	18. Other professional fees	18.	98,590	112,110	,
Ш	19. Occupancy, rent, utilities, and maintenance	19.	501,696	411,973	,
	20. Depreciation and Depletion	20.	155,781	160,746	
	21. Other expenses	21.	297,689	462,105	·
	22. Total expenses. Add lines 13 through 21	22.	3,504,812	3,936,484	
	23. Excess or (Deficit). Subtract line 22 from line 12	23.	1,267,023	885,051	
	24. Total exempt revenue	24.	4,771,835	4,821,535	49,700
_	25. Total unrelated revenue	25.			
Ę	26. Total excludable revenue	26.	393,268	498,325	
Ę	27. Total assets	27.	10,272,797	11,814,120	
ᅙ	28. Total liabilities	28.	701,778	982,847	
Other Information	29. Retained earnings	29.	9,571,019	10,831,273	1,260,254
the	30. Number of voting members of governing body	30.	15	15	
0	31. Number of independent voting members of governing body $_{\dots}$	31.	15	15	
	32. Number of employees	32.	77	92	
	33. Number of volunteers	33.	565	565	

Form 990	Tax Return History	2020
Name	COMMITTEE ON TEMPORARY SHELTER, INC	Employer Identification Number **-**5606

_	2016	2017	2018	2019	2020	2021
Contributions, gifts, grants	3,025,812	2,818,220	2,949,460	4,378,567	4,323,210	
Membership dues						
Program service revenue	357,341	619,922	491,463	386,736	400,774	
Capital gain or loss	-4,945	71,059	37,964	-67,523	2,891	
Investment income	70,534	75,721	64,573	55,052	86,877	
Fundraising revenue (income/loss) _{. _}						
Gaming revenue (income/loss)						
Other revenue	2,373	1,195	2,244	19,003	7,783	
Total revenue	3,451,115	3,586,117	3,545,704	4,771,835	4,821,535	
Grants and similar amounts paid	127,815	192,066	199,953	102,621	88,936	
Benefits paid to or for members \dots _						
Compensation of officers, etc	129,813	130,249	132,260	132,686	132,862	
Other compensation	2,067,023	2,095,478	2,215,435	2,215,749	2,567,752	
Professional fees	128,348	98,005	115,614	98,590	112,110	
Occupancy costs	570,768	536,940	567,753	501,696	411,973	
Depreciation and depletion	135,980	148,908	143,083	155,781	160,746	
Other expenses	406.664	338,794	367,223	297,689	462,105	
Total expenses	3,566,411	3,540,440	3,741,321	3,504,812	3,936,484	
Excess or (Deficit)	-115,296	45,677	-195,617	1,267,023	885,051	
Total exempt revenue	3,451,115	3,586,117	3,545,704	4,771,835	4,821,535	
Total unrelated revenue						
Total excludable revenue	425,303	767,897	596,244	393,268	498,325	
Total Assets	8,281,451	8,351,509	8,216,119	10,272,797	11,814,120	
Total Liabilities	299,773	261,674	261,245	701,778	982,847	
Net Fund Balances	7,981,678	8,089,835	7,954,874	9,571,019	10,831,273	

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Asset	Description	Date In Service	Cost	Bus Sec % 179Bonus	Basis for Depr	PerConv Meth	Prior	Current_
Other	Depreciation: Land-Firehouse	10/01/89	1,980		1,980	0 Land	0	0
2	Land-Smith House	7/15/00	35,700		35,700	0 Land	0	0
3	Land-Elmwood Avenue	7/23/90	60,000		60,000	0 Land	0	0
4	Land-Wilson	10/01/84	27,070		27,070	0 Land	0	0
8	Land Trust	10/31/88	887		887	20 MO S/L 20 MO S/L	887	0
10	Windows Kitchen Renovations	9/15/92 6/30/93	755 8,733		755 8,733	20 MO S/L 20 MO S/L	755 8,733	$\begin{array}{c} 0 \\ 0 \end{array}$
10	Sold/Scrapped: 9/30/2		0,733		0,755	20 MO S/L	0,755	O
11	Roof Replace	9/15/93	1,650		1,650	20 MO S/L	1,650	0
12	Improvements	10/31/93	6,535		6,535	20 MO S/L	6,535	0
13	Major Paint Sold/Scrapped: 9/30/2	10/01/94	3,473		3,473	50 MO S/L	3,473	0
14	Weatherization	10/01/94	7,100		7,100	10 MO S/L	7,100	0
15	Improvement	10/01/94	7,669		7,669	20 MO S/L	7,669	0
16	Roof and Chimney	9/05/96	8,355		8,355	20 MO S/L	8,355	0
17 18	Kitchen Renovations	9/03/98 4/01/03	14,590 45,378		14,590 45,378	15 MO S/L 40 MO S/L	14,590 19,853	0 1,134
19	Building Renovations	6/21/04	1,710		1.710		695	42
20	YWCA Furniture and fixtures	10/01/02	28,104		28,104	40 MO S/L	12,647	703
21	YWCA Building and Renovations	10/01/02	338,711		338,711	40 MO S/L	152,420	8,468
22 23	YWCA Building and Renovations Main St. Renovations	10/01/02 11/01/02	86,410 189,201		86,410 189,201	40 MO S/L 40 MO S/L	38,885 84,746	2,160 4,730
23	Sign	5/03/03	2,000		2.000		2,000	4,730
25	Plaques	7/01/03	1,560		1,560		1,560	ŏ
26	Landscaping	5/27/03	5,000		5,000	5 MO S/L	5,000	0
27	Building Improvements	9/23/04	2,385		2,385	40 MO S/L	954	60
28 30	Improvements Building-Smith House	9/13/05 7/15/00	5,625 128,000		5,625 128,000	40 MO S/L 20 MO S/L	2,121 128,000	141 0
31	Renovations	8/01/01	3,129		3,129	10 MO S/L	3,129	0
32	Smith House Renovations	5/31/02	260,448		260,448	40 MO S/L	119,914	6,512
33	Smith House Renovations	10/01/01	27,096		27,096	40 MO S/L	12,871	677
34	Smith House Renovations	10/01/01	31,193		31,193	40 MO S/L	14,837	779 215
35 36	Smith House Renovations Building Renovations	12/31/02 9/23/04	8,566 1,504		8,566 1,504		3,801 602	215 37
37	St. Johns Building	7/23/90	241,442		241,442	40 MO S/L	178,653	6,036
38	Rehabilitation	9/30/90	87,841		87,841	40 MO S/L	64,948	2,196
39	Capitalized int. tax and utility	9/30/90	6,360		6,360	40 MO S/L	4,703	159
40 41	Additions Mailboxes	4/01/91 3/30/92	415,590 570		415,590 570	40 MO S/L 40 MO S/L	306,498 407	10,389 14
42	Hot Water Heater	3/30/92	2,379		2,379	40 MO S/L	1,674	60
43	Wheelchair Lift	8/01/93	529		529	20 MO S/L	529	0
44	Windows	11/19/93	1,557		1,557	40 MO S/L	1,048	39
45	Roof	10/01/94	7,066		7,066	20 MO S/L	7,066	0
46 47	Painting Painting	10/11/95 3/31/97	3,900 2,980		2,980	15 MO S/L 15 MO S/L	3,900 2,980	$\begin{array}{c} 0 \\ 0 \end{array}$
48	Boiler room floor	10/31/98	483		483	20 MO S/L	483	ŏ
49	Exterior Painting	7/22/99	9,100		9,100	15 MO S/L	9,100	0
	Fire Alarm Line	9/07/99	258		258		258	0
51 52	Steps and Stairs and Flooring Railings	4/15/00 5/15/00	1,860 96		1,860 96	10 MO S/L 10 MO S/L	1,860 96	$\begin{array}{c} 0 \\ 0 \end{array}$
54	Capital Improvement	6/30/01	81		81	5 MO S/L	81	ő
55	Repair front porch	9/30/01	739		739	10 MO S/L	739	0
56	Bard Home Decorating	11/21/01	1,104		1,104		522	28
57 58	BHA Kitchen World	12/06/01 12/06/01	2,215 467		2,215 467	40 MO S/L 40 MO S/L	1,043 220	55 12
59	Cocoplum Appliances	12/20/01	678		678		319	17
60	Renovations-St. Johns Hall	4/30/03	15,900		15,900	40 MO S/L	6,923	398
61	Building Renovations	6/21/04	13,371		13,371	40 MO S/L	5,432	334
62	Improvements	6/30/05	8,402 5,300			40 MO S/L	3,203	210
63 64	Plumbing and New Floor Exterior Improvements	2/09/06 7/12/06	5,300 16,505			40 MO S/L 40 MO S/L	1,943 5,880	133 413
65	Carpeting	11/30/06	2,007			20 MO S/L	1,388	101
66	Exterior Improvements	12/31/06	2,500		2,500	40 MO S/L	859	63
68	Exterior Painting & Siding	6/30/07	5,055			40 MO S/L	1,675	126
70 71	Improvements Building Improvement	3/31/94 10/01/94	14,516 5,132			40 MO S/L 20 MO S/L	9,647 5,132	363 0
72	Waystation Renovations	9/15/00	127,516		127,516		127,516	0
73	W-S Renovations	1/02/01	31,387			20 MO S/L	30,995	392

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Asset	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	Per	Conv Meth	Prior	Current
75	Bathroom Renovations	12/09/04	4,850			4.850		MO S/L	1,920	121
76	Carpeting	12/05/06	2,826			2,826		MO S/L	1,955	141
77	Sold/Scrapped: 9/30/21	10/01/04	125 240			125 240	20	MO 6/I	125 240	0
77 78	Building-Wilson Improvements	10/01/84 10/01/84	135,349 13,534			135,349		MO S/L MO S/L	135,349 13,534	$\begin{bmatrix} 0 \\ 0 \end{bmatrix}$
78 79	Fire Escapes	3/01/85	11,522			11,522		MO S/L MO S/L	11,522	0
,,	Sold/Scrapped: 9/30/21	5,01,05	11,522			11,322	20	MO S/L	11,522	Ů
81	Handicapped Access	5/01/86	7,803			7,803		MO S/L	7,803	0
82	Improvements	6/01/86	8,237			,		MO S/L	8,237	0
83 84	Improvements Improvements	3/01/87 6/01/88	4,967 13,315			4,967 13,315		MO S/L MO S/L	4,967 13,315	$\begin{bmatrix} 0 \\ 0 \end{bmatrix}$
85	Sign-The Wilson	9/30/88	1,905			1,905		MO S/L MO S/L	1,905	0
86	Renovations	4/30/89	142,803			142,803		MO S/L	142,803	0
	Architectural	7/15/93	1,924			1,924		MO S/L	1,924	0
88	Renovations	3/31/94	210,028			210,028		MO S/L	139,581	5,251
89 90	Additions Building Improvement	9/30/04 10/01/94	2,772 30,084			2,772 30,084		MO S/L MO S/L	2,772 30,084	$\begin{bmatrix} 0 \\ 0 \end{bmatrix}$
91	Walkway and Driveway	7/29/99	4,518			4,518		MO S/L MO S/L	4,518	0
92	Sprinkler System	11/15/99	30,514			30,514	20	MO S/L	30,514	0
93	Porch	7/15/00	800			800	10	MO S/L	800	0
94	Sold/Scrapped: 9/30/21 Water Pipes	9/15/00	339			339	10	MO S/L	339	0
	HCI Craftsman Door	3/28/02	1,250					MO S/L MO S/L	581	31
96	DC Glass and Constructions	4/11/02	400			400		MO S/L	185	10
	Moulton Constructions	10/12/01	172			172		MO S/L	82	4
98	Fire Escape	1/25/03	5,674			5,674	40	MO S/L	2,506	142
99	Sold/Scrapped: 9/30/21 Building Improvements	9/23/04	18,551			18,551	40	MO S/L	7,420	464
	Bathroom Renovations	1/01/05	32,770			32,770		MO S/L MO S/L	12,903	819
	Heating system/Boiler	1/01/05	63,768			63,768	40	MO S/L	25,109	1,594
102	Carpet	7/27/06	4,070					MO S/L	2,883	203
	Roof & Improvements	8/30/06	10,636			10,636		MO S/L	3,745	266
	Roof Improvements Flooring	7/31/07 8/31/07	1,519 466			1,519		MO S/L MO S/L	500 305	38 23
103	2 Drawer FIRE File Cabinet	7/31/89	299			299		MO S/L MO S/L	299	0
	3 File Cabinet	9/02/94	281			281	8	MO S/L	281	0
	Development Software	5/13/98	4,515			4,515		MO S/L	4,515	0
134	Merchant Credit Card Machine	12/15/99	340			340		MO S/L	340	0
145 165	Software & Memory for Server 2 Storage Cabinet	9/22/05 4/30/89	16,006 80			16,006 80	8	MO S/L MO S/L	16,006 80	$\begin{bmatrix} 0 \\ 0 \end{bmatrix}$
105	Sold/Scrapped: 9/30/21	1/30/07	00			00	0	WO S/L	00	Ů
167	Sign	10/01/94	645			645	10	MO S/L	645	0
	File Cabinet	10/01/94	115			115	8	MO S/L	115	0
171 173	Base Cabinet	9/26/96 3/31/97	230 580			230 580	8	MO S/L MO S/L	230 580	$\begin{bmatrix} 0 \\ 0 \end{bmatrix}$
173	Drywall Shelving	3/31/97	565			565		MO S/L MO S/L	565	0
	Baseboard heaters	3/31/97	749			749	• •	MO S/L	749	ŏ
	Bunk Beds	7/02/01	488			488	10	MO S/L	488	0
187	Fire Alarm	7/11/01	476			476	8	MO S/L	476	0
188	Sold/Scrapped: 9/30/21 Beds	4/08/03	3,320			3,320	7	MO S/L	3,320	0
	Chairs	4/15/03	445			445		MO S/L MO S/L	445	0
	Sold/Scrapped: 9/30/21									
191	Refrigerators	5/07/03	498			498	7	MO S/L	498	0
104	Sold/Scrapped: 9/30/21	2/01/06	702			702	5	MO S/I	702	
194 198	Computer Computer	3/01/06 6/16/04	702 899			702 899		MO S/L MO S/L	702 899	$\begin{bmatrix} 0 \\ 0 \end{bmatrix}$
170	Sold/Scrapped: 9/30/21	0/10/0 1	0//			0,79	5	1110 B/L	0//	·
199	Furniture & Fixtures	11/11/04	267			267	10	MO S/L	267	0
200	Sold/Scrapped: 9/30/21	4/27/05	2.402			2 402	10	MO C/I	2.402	<u> </u>
200 204	Equipment Carbon Detectors	4/27/05 1/02/07	3,403 3,504			,		MO S/L MO S/L	3,403 3,504	$\begin{bmatrix} 0 \\ 0 \end{bmatrix}$
	Wheelchair Lift	6/16/08	12,826					MO S/L MO S/L	12,826	0
227	Refrigerator	1/31/02	245			245		MO S/L	245	ő
	Sold/Scrapped: 9/30/21									
228	Locker \$ -14/\$	2/01/02	289			289	8	MO S/L	289	0
242	Sold/Scrapped: 9/30/21 Heating-3rd Floor	6/13/02	8,757			8,757	Q	MO S/L	8,757	0
242	Cocoplum Appliances	11/09/01	893			893		MO S/L MO S/L	893	0
٥.٠	Sold/Scrapped: 9/30/21									Ŭ
244	Equipment	4/05/05	923			923	10	MO S/L	923	0

COTS COMMITTEE ON TEMPORARY SHELTER, UNCCOPY **-***5606 Federal Asset Report FYE: 9/30/2021 Form 990, Page 1

Λ c c c t	Description	Date In Sorvice	Cost		Basis	Dor C	ony Math	Dries	Current
Asset	Description	In Service	Cost	<u>%</u> <u>179</u> Bonus for	Depr	reru	oriv weth	Prior	Current
245	Sold/Scrapped: 9/30/21 Elevator-Chair Lift	9/30/05	19,873		19,873	10 N	MO S/L	19,873	0
	Equipment	3/30/06	4,377		,		MO S/L	4,377	ŏ
240	Sold/Scrapped: 9/30/21	5/21/07	01.002		01.000	10.	10.07	01.002	0
248 249	Smoke Detector & Alarm System Smoke Detectors & Lighting	5/31/07 8/31/07	81,992 11,645		81,992 11,645		MO S/L MO S/L	81,992 11,645	$0 \\ 0$
	Lighting	9/30/07	237		237		MO S/L	237	0
251	Common Area Upgrades	8/31/08	8,053		8,053	7 N	MO S/L	8,053	0
	Exhaust Fan	1/01/90	3,800				MO S/L	3,800	0
	Renovations-Doors, Windows, Ma Bathroom Renovation	6/30/91 8/31/91	6,652 12,073		12,073		MO S/L	6,652 12,073	$0 \\ 0$
	Architectural	9/15/92	815				MO S/L	815	0
	Hot Water Heater	4/27/93	2,950		2,950	20 N	MO S/L	2,950	0
	Architectural Work	9/24/93	9,840				MO S/L	9,840	0
	18 Sets Bunk Beds with Dressers Building Improvements	9/15/00 9/23/04	19,980 650		19,980 650		MO S/L MO S/L	19,980 260	0 16
	Security System	4/27/05	360				MO S/L	360	0
282	Air Conditioners	8/08/06	560		560		MO S/L	560	0
200	Sold/Scrapped: 9/30/21	10/01/00	1 716		1 717	7 1	40 C/I	1 471	245
299 303	Furniture and Fixtures-Unknown Smoke/Carbon Detectors	10/01/89 4/25/06	1,716 5,436		1,716 5,436		MO S/L MO S/L	1,471 5,436	245 0
305	Carbon Detectors	9/30/07	26,602		26,602			26,602	0
	Sold/Scrapped: 9/30/21							,	
	Main Street Beds	10/17/08	2,694		2,694		MO S/L	2,694	1 106
	Rotted Wood Replacement HRV System & Installation	11/30/08 11/19/08	23,920 9,960		23,920		MO S/L MO S/L	14,153 9,960	1,196 0
	New Blackbaud module	11/19/08	2,750		2,750		MO S/L	2,750	0
	Bathroom Renovation	3/31/09	7,819		7,819	10 N	MO S/L	7,819	0
313	Repoint of interior foundation	7/31/09	6,050		,		MO S/L	6,050	0
315 316	New Flooring at Smith House Mgr apt flooring	11/15/09 11/30/09	8,650 2,299		8,650 2,299		MO S/L MO S/L	4,721 1,245	433 115
310	Sold/Scrapped: 9/30/21	11/30/09	2,299		2,299	20 F	VIO 3/L	1,243	113
317	Boiler System Improvements	12/23/09	3,506				MO S/L	942	88
	Apt 2 new floor - St. John	6/30/10	3,250				MO S/L	1,666	162
	Beds & Dressers - SJH Furniture - Vets Housing	9/30/10 1/21/11	2,045 6,473		2,045 6,473		MO S/L MO S/L	2,045 6,473	$0 \\ 0$
327	Furniture - Vets Housing Furniture - Vets Housing	2/13/11	11,663		11,663		MO S/L	11,663	0
	Laminate Flooring - St. John's	3/31/11	2,090				MO S/L	1,986	104
221	Sold/Scrapped: 9/30/21	4/20/11	1.500		1.500	15.	10.07	0.42	100
	Backflow Preventer - Wilson Furniture - Vets Housing	4/30/11 8/31/11	1,500 6,186		6,186		MO S/L MO S/L	942 6,186	100
	Water Heater - Smith House	9/30/11	3,025				MO S/L	2,723	302
336	Beds & Dressers - Wilson	9/30/10	2,045		2,045		MO S/L	2,045	0
	Furniture - Wilson	8/31/11	2,210		2,210		MO S/L	2,210	0
338 351	Flooring - Wilson Brick Laying	8/31/11 10/03/11	800 9,470				MO S/L MO S/L	727 8,523	73 947
	Backflow Preventer	1/31/12	2,900		2,900	5 N	MO S/L	2,900	0
354	Thermostat	9/30/12	4,220		4,220	5 N	MO S/L	4,220	0
356	Roof	11/22/11	19,150		19,150			16,916	1,915
	Flooring Front door	3/31/12 7/25/12	4,890 3,761				MO S/L MO S/L	4,157 3,071	489 377
	Website	1/28/13	4,308		4,308		MO S/L	4,308	0
360	Gas boiler	11/15/12	12,598		12,598	10 N	MO S/L	9,973	1,260
	Garage rebuild	12/12/12	22,370		22,370			4,381	559 2.652
	Firehouse - rebuild waaa Firehouse - closing costs	7/23/13 4/15/13	106,060 16,371		106,060 16,371			19,002 3,070	2,652 409
	Refinish floor	5/31/13	4,350				MO S/L	1,595	218
	Sold/Scrapped: 9/30/21								
	Backflow preventer	6/30/13	2,900		2,900		MO S/L	2,900	0
	Land - Firehouse Main St Toshiba IP4100 Phone	4/15/13 6/19/14	15,000 1,491		15,000 1,491		- Land MO S/L	0 1,491	$0 \\ 0$
	189 Church St Chimney Tops	6/15/14	22,000		22,000			3,550	564
378	Main St Rot Repair	9/30/14	5,000				MO S/L	774	128
370	St Johns Pot Papair	0/20/14	8 000		8 000	20 N	MO S/I	1 240	205
379 382	St Johns Rot Repair Lenovo ThinkCentre M73 10B6-SF	9/30/14 8/31/14	8,000 14,200		14,200		MO S/L MO S/L	1,240 14,200	205
383	Lenovo ThinkPad Edge E540 20C6	8/31/14	3,134		3,134	5 N	MO S/L	3,134	ő
	Dell Optiplex 745 SFF (5)	4/15/14	2,375		2,375	5 N	MO S/L	2,375	0
	Lenovo ThinkCentre M72e 0967-S	12/30/13 10/01/13	5,761 17,409		5,761 17,409		MO S/L MO S/L	5,761 17,409	$0 \\ 0$
	F14 Server Equipment FY14 Software	10/01/13	2,401		2,401		MO S/L MO S/L	2,401	0
		-	,		,			,	*

COTS COMMITTEE ON TEMPORARY SHELTER, UNCCOPY **-***5606 Federal Asset Report FYE: 9/30/2021 Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus Sec Basis % 179Bonus for Depr PerConv Meth Prior Current
388	Waystation Couches	11/15/13	1,168	1,168 7 MO S/L 1,168 0
	Sold/Scrapped: 9/30/21			
391	Mattresses w/cover - Main St	11/21/13	2,748	2,748 7 MO S/L 2,748 0 2.748 7 MO S/L 2.748 0
392	Mattresses w/cover - Fire House Sold/Scrapped: 9/30/21	11/21/13	2,748	2,748 7 MO S/L 2,748 0
393	Wendell's Furniture Dressers - St J	9/30/14	1,749	1,749 7 MO S/L 1,749 0
	Wendell's Furniture Dressers - Wils IT - Tech Soup	9/30/14 10/07/14	1,749 1,420	1,749 7 MO S/L 1,749 0 1,420 5 MO S/L 1,420 0
	Improvements - SJH	3/31/15	5,866	1,420 5 MO S/L 1,420 0 5,866 10 MO S/L 3,226 587
399	Main Street Shelter Repair	7/29/15	10,443	10,443 20 MO S/L 2,698 522
400 402	Storn Windows - Main Street	8/05/15	4,860	4,860 20 MO S/L 1,256 243 4,520 3 MO S/L 4,520 0
	5 Lenovo ThinkCentre Laptops Washer & Dryer - Main St	10/15/15 11/03/15	4,520 1,442	4,520 3 MO S/L 4,520 0 1,442 5 MO S/L 1,418 24
404	Roof - Smith House	12/16/15	10,675	10,675 15 MO S/L 3,380 712
	Double Washer & Dryer - Waystation	1/11/16	10,765	10,765 10 MO S/L 5,113 1,077
	Fire Alarm System Deck Rebuild - Wilson	4/15/16 8/04/16	8,271 15,000	8,271 10 MO S/L 3,722 827 15,000 15 MO S/L 4,167 1,000
	Shower Replacement - WS	9/01/16	1,835	1,835 10 MO S/L 749 184
411	Walkway - Smith House	9/01/16	2,440	2,440 10 MO S/L 996 244
412 413	Window Replacement - Wilson Porch - Wilson	9/06/16 9/22/16	5,611 29,781	5,611 15 MO S/L 1,527 375 29,781 15 MO S/L 7,941 1,986
	Porch - Smith House	12/16/15	8,514	8,514 15 MO S/L 2,696 568
415	Exterus Furnishings	9/27/17	103,629	103,629 7 MO S/L 44,413 14,804
	Uline floor mats Aruba Wireless system	4/01/17 4/20/17	1,954 6,110	1,954 7 MO S/L 977 279 6,110 5 MO S/L 4,175 1,222
	Mattresses	4/30/17	4,608	4,608 7 MO S/L 2,249 658
	Electrical upgrades	5/31/17	3,055	3,055 10 MO S/L 1,018 306
420 422	Business Comm. Services Porch	4/19/17 10/31/16	2,292 4,000	2,292 10 MO S/L 783 229 4,000 10 MO S/L 1,567 400
423	Windows	8/21/17	8,720	8,720 15 MO S/L 1,307 400 8,720 15 MO S/L 1,792 582
424	Slate roof replacement	4/18/17	38,875	38,875 40 MO S/L 3,321 971
425	Boiler	1/23/17	36,500	36,500 10 MO S/L 13,383 3,650
426 427	Foundation rebuild Window treatments	9/13/17 7/20/17	6,800 2,802	6,800 10 MO S/L 2,097 680 2,802 10 MO S/L 887 281
428	Picnic tables	4/27/17	2,026	2,026 5 MO S/L 1,385 405
	Fencing	9/11/17	3,640	3,640 10 MO S/L 1,122 364
430 431	Fire alarm panel Conf. Room monitors	9/14/17 6/14/17	19,209 7,078	19,209 15 MO S/L 3,948 1,281 7,078 5 MO S/L 4,719 1,416
131	Sold/Scrapped: 9/30/21	0/11/1/	7,070	1,110
432	Waste stream stations	4/12/17	1,130	1,130 5 MO S/L 791 226
433 434	Redstone Furnishings Refrigerator	2/28/17 9/30/17	758 487	758 7 MO S/L 388 108 487 7 MO S/L 209 69
435	Security cameras	9/01/17	950	950 10 MO S/L 293 95
436	Cooktop & Wall Oven	3/31/18	1,828	1,828 7 MO S/L 653 261
437	Sold/Scrapped: 9/30/21 Mattresses	4/30/18	562	562 7 MO S/L 194 80
	Electrical Repairs	7/30/18	2,426	2,426 10 MO S/L 526 242
439	Clothes Dryer	9/30/18	1,929	1,929 5 MO S/L 772 386
	Electric Range Mattresses	12/31/17 4/30/18	549 547	549 7 MO S/L 216 78 547 7 MO S/L 189 78
	Front Load Washer	7/31/18	1,461	1,461 5 MO S/L 633 292
443	Refrigerators	4/30/18	1,164	1,164 7 MO S/L 402 166
	Fence Installation	9/17/18 12/31/17	2,580	2,580 10 MO S/L 516 258
	GE Range Chimney Repair	8/09/18	560 2,640	560 7 MO S/L 220 80 2,640 10 MO S/L 572 264
448	Deck Renovation	11/05/17	8,951	8,951 10 MO S/L 2,611 895
	Mattresses	4/30/18	1,028	1,028 7 MO S/L 355 147 679 7 MO S/L 218 97
	Refrigerator Roofing Project	6/30/18 8/31/18	679 2,070	679 7 MO S/L 218 97 2,070 10 MO S/L 431 207
452	Electrical/Alarm Panel	1/02/18	4,853	4,853 10 MO S/L 1,335 485
453	Electrical Upgrade	5/17/18	8,837	8,837 10 MO S/L 2,062 884
454 455	Alarm Panel Waystation Renovations	1/02/18 6/22/18	12,841 33,510	12,841 10 MO S/L 3,531 1,284 33,510 10 MO S/L 7,540 3,351
456	Surveylance System	6/25/18	8,102	8,102 10 MO S/L 1,823 810
457	Computers & Install	2/15/18	4,198	4,198 5 MO S/L 2,239 840
458	Sold/Scrapped: 9/30/21 Masonry re-pointing	10/01/18	8,200	8,200 10 MO S/L 1,640 820
459	Firewall hardware	10/01/18	1,125	1,125 3 MO S/L 750 375
460	Furniture	10/17/18	5,074	5,074 10 MO S/L 973 507
461 462	Fencing Slate repair	11/06/18 11/08/18	2,580 3,300	2,580 10 MO S/L 494 258 3,300 15 MO S/L 422 220
.52	r		2,200	2,200 10 110 0.2 120

COTS COMMITTEE ON TEMPORARY SHELTER, UNCCOPY **-***5606 Federal Asset Report FYE: 9/30/2021 Form 990, Page 1

		Data		Puo Soo	Pasia			
Asset	Description	Date I <u>n Service</u>	Cost	Bus Sec <u>%</u> 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
463	Heat vent replacement	11/30/18	4,044		4,044	10 MO S/L	741	405
464	Computers and monitors	12/01/18	5,563		5,563	5 MO S/L	2,040	1,112
465 466	Mattresses - Main St	12/31/18	1,035 1,445		1,035	7 MO S/L	259 506	148 289
	Labor and materials Flooring - Main St	1/02/19 1/28/19	10,477		1,445 10,477	5 MO S/L 20 MO S/L	873	524
468	Wall Repair	2/04/19	1,500		1,500		250	150
469	Furniture	2/05/19	2,331		2,331		389	233
470	Renovations	2/28/19	6,075		6,075	20 MO S/L	481	304
472	Sliding Door	2/28/19	1,530		1,530		242	153
473 474	Flooring Windows	2/28/19 3/31/19	1,223 5,912		1,223	20 MO S/L 15 MO S/L	97 591	61 394
474	Security Cameras	4/25/19	14,522		14,522	5 MO S/L	4,115	2,904
476	Cabinets	5/09/19	7,864		7,864		1,114	787
477	Appliances	5/09/19	5,424		5,424	7 MO S/L	1,098	775
478	Windows	5/31/19	2,955		2,955	15 MO S/L	263	197
479	Furniture	6/07/19	3,293		3,293	10 MO S/L	439	329
480	Furniture	6/12/19 6/25/19	9,983 1,682		9,983 1,682	10 MO S/L	1,331 210	998
481 482	Furniture Windows	7/02/19	3,778		3,778	10 MO S/L 15 MO S/L	315	168 252
484	Renovations	7/31/19	3,675		3,675	20 MO S/L	214	184
485	Renovations	8/06/19	21,040		21,040		1,227	1,052
486	Roofing	8/22/19	4,700		4,700		255	235
487	Porch roofing	9/05/19	4,200		4,200		228	210
488	Furniture	9/11/19	2,422		2,422	10 MO S/L	262	243
489 490	Roofing Renovations	9/25/19 9/30/19	40,000 2,005		40,000 2,005	20 MO S/L 20 MO S/L	2,000 100	2,000 101
491	Renovations-Wilson	12/31/18	2,886		2,886		253	144
493	Furniture	2/28/19	3,647		3,647	10 MO S/L	577	365
494	Main St Roof Replacement	10/02/19	21,200		21,200	20 MO S/L	1,060	1,060
495	Apartment Renovation	10/24/19	2,836		2,836		130	142
496	Matresses	10/31/19	375		375	5 MO S/L	69	75
497 498	Windows Desktops Room Renovations	12/01/19 1/02/20	14,530 4,441		14,530 4,441	5 MO S/L 20 MO S/L	2,422 167	2,906 222
499	Laundry Improvements	1/02/20	897		897	5 MO S/L	135	179
500	Monitor	3/19/20	300		300	5 MO S/L	30	60
501	Unit Renovations	3/26/20	4,865		4,865	20 MO S/L	122	243
502	Security Cameras	3/31/20	16,037		16,037	10 MO S/L	802	1,604
503	Renovations	3/31/20	2,664		2,664		67	133
504 505	Renovations	4/23/20 4/30/20	62,262 16,438		16,438	20 MO S/L 5 MO S/L	1,297 1,370	3,113 3,287
506	Laptops Storefront Door	5/28/20	4,817		4,817	5 MO S/L 5 MO S/L	321	3,287 964
507	Climate Systems	5/31/20	4,650		4,650		155	465
508	COVID Barriers	6/01/20	5,039		5,039	5 MO S/L	336	1,008
509	Laptops	6/11/20	1,988		1,988	5 MO S/L	133	397
510	Roof Repairs	7/09/20	6,275		6,275	20 MO S/L	78	314
511	IT Laptops and Two-Step ID	12/18/20 2/03/21	48,070		48,070	5 MO S/L 3 MO S/L	0	7,211
	IT Firewall Main Street Family Housing Project	9/30/21	2,595 37,659		2,595 37,659	0 Memo	$0 \\ 0$	577 0
	Main Street Shelter Playroom Renovation	1/21/21	1,810		1,810	5 MO S/L	ő	241
	Firehouse Remodel	9/30/21	56,855		56,855	0 Memo	0	0
	Firehouse Fire Alarm Repair	5/01/21	2,996		2,996	7 MO S/L	0	178
517	St. John's Hall Security Camera System	2/11/21	18,981		18,981	10 MO S/L	0	1,265
	St. John's Alarm System	2/01/21	2,837		2,837		0	189
	St. John's HVAC/Ducting St. John's Hall Turnover Upgrads	8/01/21 2/01/21	2,440 18,273		2,440 18,273	7 MO S/L 20 MO S/L	$0 \\ 0$	58 609
521	95 North HC Entry Door Operator	11/30/20	5,904		5,904	7 MO S/L	0	703
522	Smith House Room Renovations 1,2,4,7	4/30/21	8,695			20 MO S/L	ő	181
	Wilson Room Renovations	7/31/21	5,540		5,540	20 MO S/L	0	46
524	Wilson Security Camera System	9/22/21	4,714			10 MO S/L	0	0
525	Wilson Renovations	9/30/21	10,000		10,000	0 Memo	0	0
	Total Other Depreciation	4,931,790	_	4,931,790		2,772,219	160,747	
		·-						
	Total ACRS and Other Depre	4,931,790		4,931,790		2,772,219	160,747	
	Total ACRO and Other Depte		1,731,770	:	1,731,770		2,112,217	100,/7/

COTS COMMITTEE ON TEMPORARY SHELTER LINCCOPY

-*5606

Federal Asset Report

FYE: 9/30/2021

Form 990, Page 1

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Asset	Description I	Date n Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
	Grand Totals Less: Dispositions and Transfers Less: Start-up/Org Expense	s	4,931,790 100,341 0			4,931,790 100,341 0		2,772,219 82,670 0	160,747 3,365 0
	Net Grand Totals	_	4,831,449		_	4,831,449		2,689,549	157,382

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d <u>Asset</u> t		Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period
1	Land-Firehouse	10/01/89	1,980.00	0.00	0.00	0.00	0.00	0.00	1,980.00	Land	0.00
2	Land-Smith House	7/15/00	35,700.00	0.00	0.00	0.00	0.00	0.00	35,700.00		0.00
3	Land-Elmwood Avenue	7/23/90	60,000.00	0.00	0.00	0.00	0.00	0.00	60,000.00	Land	0.00
4	Land-Wilson	10/01/84	27,070.00	0.00	0.00	0.00	0.00	0.00	27,070.00	Land	0.00
8	Land Trust	10/31/88	886.52	0.00	0.00	886.52	0.00	886.52		S/L	20.00
9	Windows	9/15/92	754.63	0.00	0.00	754.63	0.00	754.63	0.00	S/L	20.00
10 d	Kitchen Renovations	6/30/93	8,733.00	0.00	0.00	8,733.00	0.00	8,733.00	0.00	S/L	20.00
11	Roof Replace	9/15/93	1,650.00	0.00	0.00	1,650.00	0.00	1,650.00	0.00	S/L	20.00
12	Improvements	10/31/93	6,535.00	0.00	0.00	6,535.00	0.00	6,535.00		S/L	20.00
13 d	Major Paint	10/01/94	3,473.00	0.00	0.00	3,473.00	0.00	3,473.00		S/L	50.00
14	Weatherization	10/01/94	7,100.00	0.00	0.00	7,100.00	0.00	7,100.00	0.00		10.00
15	Improvement	10/01/94	7,669.23	0.00	0.00	7,669.23	0.00	7,669.23		S/L	20.00
16	Roof and Chimney	9/05/96	8,355.00	0.00	0.00	8,355.00	0.00	8,355.00		S/L	20.00
17	Kitchen	9/03/98	14,590.00	0.00	0.00	14,590.00	0.00	14,590.00		S/L	15.00
18 19	Renovations	4/01/03 6/21/04	45,378.00 1,710.00	$0.00 \\ 0.00$	$0.00 \\ 0.00$	19,852.88 694.69	1,134.45 42.75	20,987.33 737.44		S/L S/L	40.00 40.00
20	Building Renovations YWCA Furniture and fixtures	10/01/02	28.104.45	0.00	0.00	12,646.98	702.61	13,349.59	14.754.86		40.00
20	YWCA Building and Renovations	10/01/02	338,711.00	0.00	0.00	152,420.04	8,467.78	160,887.82		S/L S/L	40.00
22	YWCA Building and Renovations	10/01/02	86,410.03	0.00	0.00	38,884.50	2,160.25	41,044.75	45,365.28	S/L S/L	40.00
23	Main St. Renovations	11/01/02	189,200.60	0.00	0.00	84,746.19	4,730.02	89,476.21		S/L S/L	40.00
24	Sign	5/03/03	2,000.00	0.00	0.00	2,000.00	0.00	2,000.00		S/L S/L	10.00
25	Plaques	7/01/03	1,560.00	0.00	0.00	1,560.00	0.00	1,560.00		S/L	10.00
26	Landscaping	5/27/03	5,000.00	0.00	0.00	5,000.00	0.00	5,000.00	0.00	S/L	5.00
27	Building Improvements	9/23/04	2,384.85	0.00	0.00	953.92	59.62	1,013.54	1,371.31	S/L	40.00
28	Improvements	9/13/05	5,625.25	0.00	0.00	2,121.17	140.63	2,261.80	3,363.45	S/L	40.00
30	Building-Smith House	7/15/00	128,000.00	0.00	0.00	128,000.00	0.00	128,000.00	0.00	S/L	20.00
31	Renovations	8/01/01	3,129.00	0.00	0.00	3,129.00	0.00	3,129.00	0.00		10.00
32	Smith House Renovations	5/31/02	260,447.68	0.00	0.00	119,914.42	6,511.19	126,425.61	134,022.07	S/L	40.00
33	Smith House Renovations	10/01/01	27,096.32	0.00	0.00	12,870.77	677.41	13,548.18	13,548.14		40.00
34	Smith House Renovations	10/01/01	31,192.68	0.00	0.00	14,836.60	779.82	15,616.42	15,576.26		40.00
35	Smith House Renovations	12/31/02	8,566.26	0.00	0.00	3,801.34	214.16	4,015.50	4,550.76		40.00
36	Building Renovations	9/23/04	1,504.00	0.00	0.00	601.60	37.60	639.20		S/L	40.00
37 38	St. Johns Building Rehabilitation	7/23/90 9/30/90	241,442.32 87,840.52	$0.00 \\ 0.00$	$0.00 \\ 0.00$	178,652.63 64,948.02	6,036.06 2,196.01	184,688.69 67,144.03	56,753.63 20,696.49	S/L S/L	40.00 40.00
39	Capitalized int. tax and utility	9/30/90	6.360.41	0.00	0.00	4,703.22	159.01	4,862.23		S/L S/L	40.00
40	Additions	4/01/91	415,589.84	0.00	0.00	306,497.62	10,389.75	316,887.37	98,702.47		40.00
41	Mailboxes	3/30/92	569.66	0.00	0.00	407.03	14.24	421.27		S/L S/L	40.00
42	Hot Water Heater	3/30/92	2,379.00	0.00	0.00	1,674.07	59.48	1,733.55	645.45		40.00
43	Wheelchair Lift	8/01/93	529.00	0.00	0.00	529.00	0.00	529.00	0.00		20.00
44	Windows	11/19/93	1,557.00	0.00	0.00	1,047.86	38.93	1,086.79	470.21	S/L	40.00
45	Roof	10/01/94	7,066.35	0.00	0.00	7,066.35	0.00	7,066.35	0.00	S/L	20.00
46	Painting	10/11/95	3,900.00	0.00	0.00	3,900.00	0.00	3,900.00	0.00	S/L	15.00
47	Painting	3/31/97	2,980.00	0.00	0.00	2,980.00	0.00	2,980.00		S/L	15.00
48	Boiler room floor	10/31/98	482.80	0.00	0.00	482.80	0.00	482.80		S/L	20.00
49	Exterior Painting	7/22/99	9,100.00	0.00	0.00	9,100.00	0.00	9,100.00	0.00		15.00
50	Fire Alarm Line	9/07/99	258.00	0.00	0.00	258.00	0.00	258.00	0.00	S/L	15.00
51	Steps and Stairs and Flooring	4/15/00	1,859.76	0.00	0.00	1,859.76	0.00	1,859.76		S/L	10.00
52	Railings	5/15/00	95.52	0.00	0.00	95.52	0.00	95.52	0.00		10.00
54	Capital Improvement	6/30/01	80.80	0.00	0.00	80.80	0.00	80.80	0.00	S/L	5.00
55 56	Repair front porch	9/30/01 11/21/01	738.56 1.104.31	$0.00 \\ 0.00$	0.00 0.00	738.56 522.29	0.00 27.61	738.56 549.90	0.00 554.41	S/L	10.00 40.00
30	Bard Home Decorating	11/21/01	1,104.31	0.00	0.00	344.29	∠/.01	349.90	33 4 .41	S/L	40.00

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d <u>Asset</u> t	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period
57	BHA	12/06/01	2,215.10	0.00	0.00	1,042.99	55.38	1,098.37	1,116.73	S/L	40.00
58	Kitchen World	12/06/01	467.35	0.00	0.00	219.98	11.68	231.66	235.69		40.00
59	Cocoplum Appliances	12/20/01	678.00	0.00	0.00	319.23	16.95	336.18	341.82	S/L	40.00
60	Renovations-St. Johns Hall	4/30/03	15,900.20	0.00	0.00	6,923.30	397.51	7,320.81	8,579.39		40.00
61	Building Renovations	6/21/04	13,370.51	0.00	0.00	5,431.73	334.26	5,765.99	7,604.52		40.00
62	Improvements	6/30/05	8,401.88	0.00	0.00	3,203.26	210.05	3,413.31	4,988.57		40.00
63	Plumbing and New Floor	2/09/06	5,300.07	0.00	0.00	1,943.33	132.50	2,075.83	3,224.24		40.00
64	Exterior Improvements	7/12/06	16,505.00	0.00	0.00	5,879.98	412.63	6,292.61	10,212.39	S/L	40.00
65	Carpeting	11/30/06	2,007.00	0.00	0.00	1,388.18	100.35	1,488.53	518.47		20.00
66	Exterior Improvements	12/31/06	2,500.00	0.00	0.00	859.38	62.50	921.88	1,578.12	S/L	40.00
68	Exterior Painting & Siding	6/30/07	5,055.00	0.00	0.00	1,674.53	126.38	1,800.91	3,254.09		40.00
70	Improvements	3/31/94	14,516.00	0.00	0.00	9,647.09	362.90	10,009.99	4,506.01		40.00
71	Building Improvement	10/01/94	5,131.72	0.00	0.00	5,131.72	0.00	5,131.72	0.00		20.00
72	Waystation Renovations	9/15/00	127,515.66	0.00	0.00	127,515.66	0.00	127,515.66	0.00		20.00
73	W-S Renovations	1/02/01	31,387.45	0.00	0.00	30,995.06	392.39	31,387.45	0.00		20.00
75	Bathroom Renovations	12/09/04	4,850.00	0.00	0.00	1,919.79	121.25	2,041.04	2,808.96		40.00
76 d	Carpeting	12/05/06	2,826.00	0.00	0.00	1,954.65	141.30	2,095.95	730.05		20.00
77	Building-Wilson	10/01/84	135,349.00	0.00	0.00	135,349.00	0.00	135,349.00	0.00		20.00
78 79 d	Improvements	10/01/84	13,534.00	0.00	0.00	13,534.00	0.00	13,534.00	$0.00 \\ 0.00$		10.00 20.00
79 d 81	Fire Escapes	3/01/85	11,522.36	0.00	0.00	11,522.36	0.00	11,522.36			
	Handicapped Access	5/01/86	7,803.00	0.00	0.00	7,803.00	0.00	7,803.00	0.00		10.00 10.00
82	Improvements	6/01/86	8,236.95	0.00	0.00	8,236.95	0.00	8,236.95	0.00		
83	Improvements	3/01/87	4,967.25	0.00	0.00	4,967.25	0.00	4,967.25	0.00		20.00
84 85	Improvements Sign-The Wilson	6/01/88 9/30/88	13,314.53 1,905.00	$0.00 \\ 0.00$	$0.00 \\ 0.00$	13,314.53 1,905.00	$0.00 \\ 0.00$	13,314.53 1,905.00	$0.00 \\ 0.00$		20.00 20.00
85 86	Renovations	4/30/89	1,903.00	0.00	0.00	1,903.00	0.00	1,903.00	0.00		20.00
87	Architectural	7/15/93	1,923.55	0.00	0.00	1,923.55	0.00	1,923.55	0.00		20.00
88	Renovations	3/31/94	210,028.06	0.00	0.00	139,581.11	5,250.70	1,923.33	65,196.25		40.00
89	Additions	9/30/04	2,772.00	0.00	0.00	2,772.00	0.00	2,772.00	0.00	S/L S/L	20.00
90	Building Improvement	10/01/94	30,083.58	0.00	0.00	30.083.58	0.00	30.083.58	0.00		20.00
91	Walkway and Driveway	7/29/99	4,518.45	0.00	0.00	4,518.45	0.00	4,518.45	0.00		15.00
92	Sprinkler System	11/15/99	30,513.96	0.00	0.00	30,513.96	0.00	30,513.96	0.00		20.00
93 d	Porch	7/15/00	800.00	0.00	0.00	800.00	0.00	800.00	0.00		10.00
94	Water Pipes	9/15/00	338.95	0.00	0.00	338.95	0.00	338.95	0.00		10.00
95	HCI Craftsman Door	3/28/02	1,250.00	0.00	0.00	580.73	31.25	611.98	638.02		40.00
96	DC Glass and Constructions	4/11/02	400.00	0.00	0.00	185.00	10.00	195.00	205.00		40.00
97	Moulton Constructions	10/12/01	172.00	0.00	0.00	81.70	4.30	86.00	86.00		40.00
98 d	Fire Escape	1/25/03	5,673.58	0.00	0.00	2.505.84	141.84	2.647.68	3.025.90		40.00
99	Building Improvements	9/23/04	18,550.96	0.00	0.00	7,420.32	463.77	7,884.09	10,666.87		40.00
100	Bathroom Renovations	1/01/05	32,769.90	0.00	0.00	12,903.19	819.25	13,722.44	19,047.46		40.00
101	Heating system/Boiler	1/01/05	63,767.85	0.00	0.00	25,108.65	1,594.20	26,702.85	37,065.00		40.00
102	Carpet	7/27/06	4,070.00	0.00	0.00	2,882.92	203.50	3,086.42	983.58		20.00
103	Roof & Improvements	8/30/06	10,636.38	0.00	0.00	3,744.90	265.91	4,010.81	6,625.57		40.00
104	Roof Improvements	7/31/07	1,519.00	0.00	0.00	500.07	37.98	538.05	980.95		40.00
105	Flooring	8/31/07	465.74	0.00	0.00	304.71	23.29	328.00	137.74	S/L	20.00
108	2 Drawer FIRE File Cabinet	7/31/89	299.00	0.00	0.00	299.00	0.00	299.00	0.00		8.00
116	3 File Cabinet	9/02/94	280.80	0.00	0.00	280.80	0.00	280.80	0.00	S/L	8.00
127	Development Software	5/13/98	4,515.00	0.00	0.00	4,515.00	0.00	4,515.00	0.00	S/L	15.00
134	Merchant Credit Card Machine	12/15/99	339.90	0.00	0.00	339.90	0.00	339.90	0.00	S/L	7.00
145	Software & Memory for Server	9/22/05	16,005.96	0.00	0.00	16,005.96	0.00	16,005.96	0.00		5.00
165 d	2 Storage Cabinet	4/30/89	80.00	0.00	0.00	80.00	0.00	80.00	0.00	S/L	8.00

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Asset t Property Description Date In Service Tax Current Cost Sec 179 Exp Current = c Tax Bonus Amt Depreciation Tax Prior Depreciation Depreciation Tax Depreciation Depreciation Tax Depreciation Depreciation End Depreciation Book Value 167 Sign 10/01/94 645.00 0.00 0.00 645.00 0.00 645.00 0.00 645.00 114.98 0.00 114.98 0.00 114.98 0.00 114.98 0.00 114.98 0.00 <	ue Method Period 0.00 S/L 10.00 0.00 S/L 8.00 0.00 S/L 8.00 0.00 S/L 20.00 0.00 S/L 20.00	.00 .00
168 File Cabinet 10/01/94 114.98 0.00 0.00 114.98 0.00 114.98	0.00 S/L 8.00 0.00 S/L 8.00 0.00 S/L 20.00 0.00 S/L 20.00	.00
168 File Cabinet 10/01/94 114.98 0.00 0.00 114.98 0.00 114.98	0.00 S/L 8.00 0.00 S/L 20.00 0.00 S/L 20.00	
	0.00 S/L 20.00 0.00 S/L 20.00	00
171 Base Cabinet 9/26/96 229.96 0.00 0.00 229.96 0.00 229.96	0.00 S/L 20.00	.00
173 Drywall 3/31/97 580.00 0.00 0.00 580.00 0.00 580.00		
174 Shelving 3/31/97 565.17 0.00 0.00 565.17 0.00 565.17		
176 Baseboard heaters 3/31/97 749.00 0.00 0.00 749.00 0.00 749.00	0.00 S/L 20.00	
186 Bunk Beds 7/02/01 488.00 0.00 488.00 0.00 488.00	0.00 S/L 10.00	
187 d Fire Alarm 7/11/01 476.25 0.00 0.00 476.25 0.00 476.25	0.00 S/L 8.00 0.00 S/L 7.00	
188 Beds 4/08/03 3,319.80 0.00 0.00 3,319.80 0.00 3,319.80 189 d Chairs 4/15/03 445.00 0.00 0.00 445.00 0.00 445.00	0.00 S/L 7.00 0.00 S/L 7.00	
189 d Chairs 4/15/05 445.00 0.00 0.00 445.00 0.00 445.00 191 d Refrigerators 5/07/03 498.00 0.00 0.00 498.00 0.00 498.00	0.00 S/L 7.00 0.00 S/L 7.00	
194 Computer 3/01/06 702.00 0.00 0.00 702.00 0.00 702.00	0.00 S/L 7.00 0.00 S/L 5.00	
198 d Computer 6/16/04 899.00 0.00 899.00 0.00 899.00	0.00 S/L 5.00	
199 d Furniture & Fixtures 11/11/04 267.44 0.00 0.00 267.44 0.00 267.44	0.00 S/L 10.00	
200 Equipment 4/27/05 3,402.99 0.00 0.00 3,402.99 0.00 3,402.99	0.00 S/L 10.00	
204 Carbon Detectors 1/02/07 3,504.00 0.00 0.00 3,504.00 0.00 3,504.00	0.00 S/L 10.00	.00
206 Wheelchair Lift 6/16/08 12,825.86 0.00 0.00 12,825.86 0.00 12,825.86	0.00 S/L 10.00	
227 d Refrigerator 1/31/02 245.00 0.00 0.00 245.00 0.00 245.00	0.00 S/L 8.00	
228 d Locker 2/01/02 289.00 0.00 0.00 289.00 0.00 289.00	0.00 S/L 8.00	
242 Heating-3rd Floor 6/13/02 8,757.00 0.00 0.00 8,757.00 0.00 8,757.00	0.00 S/L 8.00	
243 d Cocoplum Appliances 11/09/01 893.00 0.00 0.00 893.00 0.00 893.00	0.00 S/L 8.00	
244 d Equipment 1 4/05/05 922.75 0.00 0.00 922.75 0.00 922.75	0.00 S/L 10.00	
245 Elevator-Chair Lift 9/30/05 19,872.68 0.00 0.00 19,872.68 0.00 19,872.68 246 d Equipment 3/30/06 4,377.13 0.00 0.00 4,377.13 0.00 4,377.13	0.00 S/L 10.00 0.00 S/L 10.00	
246 d Equipment 3/30/06 4,377.13 0.00 0.00 4,377.13 0.00 4,377.13 248 Smoke Detector & Alarm System 5/31/07 81,992.08 0.00 0.00 81,992.08 0.00 81,992.08	0.00 S/L 10.00 0.00 S/L 10.00	
248 Smoke Detector & Alahn System 3/31/07 81,592.08 0.00 0.00 81,592.08 0.00 81,592.08 249 Smoke Detectors & Lighting 8/31/07 11,645.44 0.00 0.00 11,645.44 0.00 11,645.44	0.00 S/L 10.00 0.00 S/L 10.00	
250 Lighting 9/30/07 236.50 0.00 0.00 11,043.44 0.00 11,043.44 250 Lighting 9/30/07 236.50 0.00 0.00 236.50	0.00 S/L 10.00 0.00 S/L 10.00	
250 Eighting 7/50/07 250/30 0.00 0.00 250/30 0.00 250/30 2	0.00 S/L 7.00	
264 Exhaust Fan 1/01/90 3.800.00 0.00 3.800.00 0.00 3.800.00 0.00	0.00 S/L 20.00	
265 Renovations-Doors, Windows, Ma 6/30/91 6,651.94 0.00 0.00 6,651.94 0.00 6,651.94	0.00 S/L 20.00	
267 Bathroom Renovation 8/31/91 12,073.00 0.00 0.00 12,073.00 0.00 12,073.00	0.00 S/L 20.00	.00
268 Architectural 9/15/92 815.00 0.00 0.00 815.00 0.00 815.00	0.00 S/L 20.00	
269 Hot Water Heater 4/27/93 2,950.00 0.00 0.00 2,950.00 0.00 2,950.00	0.00 S/L 20.00	
270 Architectural Work 9/24/93 9,840.00 0.00 0.00 9,840.00 0.00 9,840.00	0.00 S/L 20.00	
276 18 Sets Bunk Beds with Dressers 9/15/00 19,980.00 0.00 19,980.00 0.00 19,980.00 19,980.00	0.00 S/L 7.00	
	3.75 S/L 40.00	
281 Security System 4/27/05 360.00 0.00 0.00 360.00 0.00 360.00 282 d Air Conditioners 8/08/06 559.92 0.00 0.00 559.92 0.00 559.92	0.00 S/L 10.00 0.00 S/L 10.00	
282 d Air Conditioners 8/08/06 339.92 0.00 0.00 339.92 0.00 339.92 0.00 339.92 0.00 339.92 0.00 339.92	0.00 S/L 10.00 0.00 S/L 7.00	
303 Smoke/Carbon Detectors 4/25/06 5,436.00 0.00 0.00 1,471.20 243.18 1,710.38	0.00 S/L 7.00 0.00 S/L 10.00	
305 d Carbon Detectors 9/30/07 26,602.33 0.00 0.00 3,430.00 0.00 26,602.33	0.00 S/L 10.00 0.00 S/L 10.00	
307 Main Street Beds 10/17/08 2,694.00 0.00 0.00 2,694.00 0.00 2,694.00	0.00 S/L 5.00	
	1.27 S/L 20.00	
310 HRV System & Installation 11/19/08 9,960.00 0.00 9,960.00 0.00 9,960.00 0.00 9,960.00	0.00 S/L 10.00	.00
311 New Blackbaud module 11/20/08 2,750.00 0.00 0.00 2,750.00 0.00 2,750.00	0.00 S/L 3.00	.00
312 Bathroom Renovation 3/31/09 7,818.80 0.00 0.00 7,818.80 0.00 7,818.80	0.00 S/L 10.00	
313 Repoint of interior foundation 7/31/09 6,050.00 0.00 0.00 6,050.00 0.00 6,050.00	0.00 S/L 10.00	
	5.04 S/L 20.00	
	3.76 S/L 20.00	
	5.73 S/L 40.00 1.87 S/L 20.00	
517 Apr 2 new 11001 - 5t. 30mm 0/50/10 5,250.00 0.00 0.00 1,005.05 102.30 1,828.15 1,4.	.07 S/L 20.00	.00

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d		Date In	Tax	Sec 179 Exp	Tax	Tax Prior	Tax Current	Tax	Tax Net	Tax	Tax
Asset t	Property Description	Service	Cost	Current = c	Bonus Amt	<u>Depreciation</u>	<u>Depreciation</u>	End Depr	Book Value	Method	Period Period
321	Beds & Dressers - SJH	9/30/10	2,045.00	0.00	0.00	2,045.00	0.00	2,045.00	0.00	S/L	7.00
326	Furniture - Vets Housing	1/21/11	6,473.00	0.00	0.00	6,473.00	0.00	6,473.00	0.00	S/L	7.00
327	Furniture - Vets Housing	2/13/11	11,663.00	0.00	0.00	11,663.00	0.00	11,663.00	0.00		7.00
330 d	Laminate Flooring - St. John's	3/31/11	2,090.00	0.00	0.00	1,985.50	104.50	2,090.00	0.00		10.00
331	Backflow Preventer - Wilson	4/30/11	1,500.00	0.00	0.00	941.67	100.00	1,041.67	458.33		15.00
332	Furniture - Vets Housing	8/31/11	6,185.95	0.00	0.00	6,185.95	0.00	6,185.95	0.00		7.00
333	Water Heater - Smith House	9/30/11	3,025.00	0.00	0.00	2,722.50	302.50	3,025.00	0.00		10.00
336 337	Beds & Dressers - Wilson	9/30/10	2,045.00	0.00	0.00	2,045.00	0.00	2,045.00	$0.00 \\ 0.00$		7.00 7.00
337	Furniture - Wilson	8/31/11 8/31/11	2,210.00 800.00	$0.00 \\ 0.00$	0.00	2,210.00 726.67	0.00 73.33	2,210.00 800.00	0.00		10.00
350	Flooring - Wilson Brick Laying	10/03/11	9,470.00	0.00	0.00	8,523.00	947.00	9,470.00	0.00		10.00
353	Backflow Preventer	1/31/12	2,900.00	0.00	0.00	2,900.00	0.00	2,900.00	0.00		5.00
354	Thermostat	9/30/12	4,220.06	0.00	0.00	4,220.06	0.00	4,220.06	0.00		5.00
356	Roof	11/22/11	19,150.00	0.00	0.00	16,915.83	1,915.00	18,830.83	319.17		10.00
357	Flooring	3/31/12	4,890.00	0.00	0.00	4,156.50	489.00	4,645.50	244.50		10.00
358	Front door	7/25/12	3,761.00	0.00	0.00	3,071.48	376.10	3,447.58	313.42		10.00
359	Website	1/28/13	4,307.86	0.00	0.00	4,307.86	0.00	4,307.86	0.00	S/L	5.00
360	Gas boiler	11/15/12	12,598.00	0.00	0.00	9,973.42	1,259.80	11,233.22	1,364.78		10.00
361	Garage rebuild	12/12/12	22,370.00	0.00	0.00	4,380.79	559.25	4,940.04	17,429.96		40.00
363	Firehouse - rebuild waaa	7/23/13	106,060.00	0.00	0.00	19,002.42	2,651.50	21,653.92	84,406.08		40.00
367	Firehouse - closing costs	4/15/13	16,371.00	0.00	0.00	3,069.60	409.28	3,478.88	12,892.12		40.00
369 d	Refinish floor	5/31/13	4,350.00	0.00	0.00	1,595.00	217.50	1,812.50	2,537.50		20.00
370	Backflow preventer	6/30/13	2,900.00	0.00	0.00	2,900.00	0.00	2,900.00	0.00		5.00
373	Land - Firehouse	4/15/13	15,000.00	0.00	0.00	0.00	0.00	0.00	15,000.00		0.00
374 377	Main St Toshiba IP4100 Phone	6/19/14 6/15/14	1,491.00	$0.00 \\ 0.00$	$0.00 \\ 0.00$	1,491.00 3,549.60	0.00	1,491.00 4,113.70	0.00 17,886.30		5.00 39.00
377 378 d	189 Church St Chimney Tops Main St Rot Repair	9/30/14	22,000.00 5,000.00	0.00	0.00	774.26	564.10 128.21	902.47	4,097.53	S/L S/L	39.00
378 d 379	St Johns Rot Repair	9/30/14	8,000.00	0.00	0.00	1,239.78	205.13	1,444.91	6,555.09		39.00
382	Lenovo ThinkCentre M73 10B6-SF	8/31/14	14,200.00	0.00	0.00	14,200.00	0.00	14,200.00	0,555.09		5.00
383	Lenovo ThinkPad Edge E540 20C6	8/31/14	3,134.00	0.00	0.00	3,134.00	0.00	3,134.00	0.00		5.00
384	Dell Optiplex 745 SFF (5)	4/15/14	2,375.00	0.00	0.00	2,375.00	0.00	2,375.00	0.00		5.00
385	Lenovo ThinkCentre M72e 0967-S	12/30/13	5,761.00	0.00	0.00	5,761.00	0.00	5,761.00	0.00	S/L	5.00
386	F14 Server Equipment	10/01/13	17,409.00	0.00	0.00	17,409.00	0.00	17,409.00	0.00	S/L	5.00
387	FY14 Software	10/24/13	2,401.00	0.00	0.00	2,401.00	0.00	2,401.00	0.00		3.00
388 d	Waystation Couches	11/15/13	1,168.00	0.00	0.00	1,168.00	0.00	1,168.00	0.00		7.00
391	Mattresses w/cover - Main St	11/21/13	2,748.00	0.00	0.00	2,748.00	0.00	2,748.00	0.00		7.00
392 d	Mattresses w/cover - Fire House	11/21/13	2,748.00	0.00	0.00	2,748.00	0.00	2,748.00	0.00		7.00
393	Wendell's Furniture Dressers - St J	9/30/14	1,749.00	0.00	0.00	1,749.00	0.00	1,749.00	0.00		7.00
394 395	Wendell's Furniture Dressers - Wils	9/30/14	1,749.00	$0.00 \\ 0.00$	$0.00 \\ 0.00$	1,749.00	0.00	1,749.00	$0.00 \\ 0.00$		7.00 5.00
393 397	IT - Tech Soup Improvements - SJH	10/07/14 3/31/15	1,420.00 5,865.94	0.00	0.00	1,420.00 3,226.25	0.00 586.59	1,420.00 3,812.84	2,053.10		10.00
397	Main Street Shelter Repair	7/29/15	10,443.00	0.00	0.00	2,697.78	522.15	3,219.93	7,223.07		20.00
400	Storn Windows - Main Street	8/05/15	4.860.00	0.00	0.00	1.255.50	243.00	1,498.50	3,361.50		20.00
402	5 Lenovo ThinkCentre Laptops	10/15/15	4,520.00	0.00	0.00	4,520.00	0.00	4,520.00	0.00	S/L	3.00
403	Washer & Dryer - Main St	11/03/15	1,442.00	0.00	0.00	1,417.97	24.03	1,442.00	0.00		5.00
404	Roof - Smith House	12/16/15	10,675.00	0.00	0.00	3,380.43	711.67	4,092.10	6,582.90		15.00
405	Double Washer & Dryer - Waystation	1/11/16	10,765.00	0.00	0.00	5,113.38	1,076.50	6,189.88	4,575.12	S/L	10.00
408	Fire Alarm System	4/15/16	8,271.00	0.00	0.00	3,721.95	827.10	4,549.05	3,721.95		10.00
409	Deck Rebuild - Wilson	8/04/16	15,000.00	0.00	0.00	4,166.67	1,000.00	5,166.67	9,833.33		15.00
410	Shower Replacement - WS	9/01/16	1,835.00	0.00	0.00	749.29	183.50	932.79	902.21		10.00
411	Walkway - Smith House	9/01/16	2,440.00	0.00	0.00	996.33	244.00	1,240.33	1,199.67	S/L	10.00

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d <u>Asset</u> t	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period
412	Window Replacement - Wilson	9/06/16	5,611.00	0.00	0.00	1,527.45	374.07	1,901.52	3,709.48	S/L	15.00
413	Porch - Wilson	9/22/16	29,780.50	0.00	0.00	7,941.48	1,985.37	9,926.85	19,853.65	S/L	15.00
414	Porch - Smith House	12/16/15	8,514.00	0.00	0.00	2,696.10	567.60	3,263.70	5,250.30	S/L	15.00
415	Exterus Furnishings	9/27/17	103,629.21	0.00	0.00	44,412.51	14,804.17	59,216.68	44,412.53		7.00
416	Uline floor mats	4/01/17	1,953.51	0.00	0.00	976.75	279.07	1,255.82	697.69		7.00
417	Aruba Wireless system	4/20/17	6,110.00	0.00	0.00	4,175.17	1,222.00	5,397.17	712.83	S/L	5.00
418	Mattresses	4/30/17	4,608.00	0.00	0.00	2,249.16	658.29	2,907.45	1,700.55	S/L	7.00
419	Electrical upgrades	5/31/17	3,055.15	0.00	0.00	1,018.40	305.52	1,323.92	1,731.23	S/L	10.00
420	Business Comm. Services	4/19/17	2,291.90	0.00	0.00	783.07	229.19	1,012.26	1,279.64	S/L	10.00
422	Porch	10/31/16	4,000.00	0.00	0.00	1,566.67	400.00	1,966.67	2,033.33	S/L	10.00
423	Windows	8/21/17	8,720.00	0.00	0.00	1,792.43	581.33	2,373.76	6,346.24	S/L	15.00
424	Slate roof replacement	4/18/17	38,875.00	0.00	0.00	3,320.59	971.88	4,292.47	34,582.53	S/L	40.00
425	Boiler	1/23/17	36,500.00	0.00	0.00	13,383.33	3,650.00	17,033.33	19,466.67		10.00
426	Foundation rebuild	9/13/17	6,800.00	0.00	0.00	2,096.67	680.00	2,776.67	4,023.33	S/L	10.00
427	Window treatments	7/20/17	2,802.00	0.00	0.00	887.30	280.20	1,167.50	1,634.50	S/L	10.00
428	Picnic tables	4/27/17	2,026.16	0.00	0.00	1,384.54	405.23	1,789.77	236.39	S/L	5.00
429	Fencing	9/11/17	3,640.00	0.00	0.00	1,122.33	364.00	1,486.33	2,153.67	S/L	10.00
430	Fire alarm panel	9/14/17	19,208.80	0.00	0.00	3,948.49	1,280.59	5,229.08	13,979.72		15.00
431 d	Conf. Room monitors	6/14/17	7,078.32	0.00	0.00	4,718.87	1,415.66	6,134.53	943.79	S/L	5.00
432	Waste stream stations	4/12/17	1,130.22	0.00	0.00	791.14	226.04	1,017.18	113.04	S/L	5.00
433	Redstone Furnishings	2/28/17	758.00	0.00	0.00	388.04	108.29	496.33	261.67		7.00
434	Refrigerator	9/30/17	486.85	0.00	0.00	208.65	69.55	278.20	208.65	S/L	7.00
435	Security cameras	9/01/17	949.99	0.00	0.00	292.92	95.00	387.92	562.07	S/L	10.00
436 d	Cooktop & Wall Oven	3/31/18	1,827.56	0.00	0.00	652.70	261.08	913.78	913.78	S/L	7.00
437	Mattresses	4/30/18	561.75	0.00	0.00	193.94	80.25	274.19	287.56	S/L	7.00
438	Electrical Repairs	7/30/18	2,425.75	0.00	0.00	525.59	242.58	768.17	1,657.58	S/L	10.00
439	Clothes Dryer	9/30/18	1,929.37	0.00	0.00	771.74	385.87	1,157.61	771.76	S/L	5.00
440	Electric Range	12/31/17	549.00	0.00	0.00	215.68	78.43	294.11	254.89	S/L	7.00
441	Mattresses	4/30/18	547.00	0.00	0.00	188.84	78.14	266.98	280.02	S/L	7.00
442	Front Load Washer	7/31/18	1,460.55	0.00	0.00	632.91	292.11	925.02	535.53		5.00
443	Refrigerators	4/30/18	1,164.00	0.00	0.00	401.87	166.29	568.16	595.84	S/L	7.00
444	Fence Installation	9/17/18	2,579.75	0.00	0.00	515.96	257.98	773.94	1,805.81		10.00
445	GE Range	12/31/17	559.61	0.00	0.00	219.84	79.94	299.78	259.83		7.00
446	Chimney Repair	8/09/18	2,640.00	0.00	0.00	572.00	264.00	836.00	1,804.00		10.00
448	Deck Renovation	11/05/17	8,950.75	0.00	0.00	2,610.65	895.08	3,505.73	5,445.02		10.00
449	Mattresses	4/30/18	1,027.76	0.00	0.00	354.82	146.82	501.64	526.12	S/L	7.00
450	Refrigerator	6/30/18	679.45	0.00	0.00	218.39	97.06	315.45	364.00		7.00
451	Roofing Project	8/31/18	2,070.00	0.00	0.00	431.25	207.00	638.25	1,431.75		10.00
452	Electrical/Alarm Panel	1/02/18	4,852.86	0.00	0.00	1,334.54	485.29	1,819.83	3,033.03	S/L	10.00
453	Electrical Upgrade	5/17/18	8,837.21	0.00	0.00	2,062.01	883.72	2,945.73	5,891.48		10.00
454	Alarm Panel	1/02/18	12,841.14	0.00	0.00	3,531.31	1,284.11	4,815.42	8,025.72	S/L	10.00
455	Waystation Renovations	6/22/18	33,510.19	0.00	0.00	7,539.79	3,351.02	10,890.81	22,619.38		10.00
456	Surveylance System	6/25/18	8,101.54	0.00	0.00	1,822.84	810.15	2,632.99	5,468.55		10.00
457 d	Computers & Install	2/15/18	4,198.33	0.00	0.00	2,239.12	839.67	3,078.79	1,119.54		5.00
458	Masonry re-pointing	10/01/18	8,200.00	0.00	0.00	1,640.00	820.00	2,460.00	5,740.00		10.00
459	Firewall hardware	10/01/18	1,125.00	0.00	0.00	750.00	375.00	1,125.00	0.00		3.00
460	Furniture	10/17/18	5,074.00	0.00	0.00	972.52	507.40	1,479.92	3,594.08		10.00
461	Fencing	11/06/18	2,579.75	0.00	0.00	494.46	257.98	752.44	1,827.31		10.00
462	Slate repair	11/08/18	3,300.00	0.00	0.00	421.67	220.00	641.67	2,658.33		15.00
463	Heat vent replacement	11/30/18	4,043.56	0.00	0.00	741.32	404.36	1,145.68	2,897.88	S/L	10.00
464	Computers and monitors	12/01/18	5,563.00	0.00	0.00	2,039.77	1,112.60	3,152.37	2,410.63	S/L	5.00

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d Asset t	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period
	Mattresses - Main St	12/31/18		0.00	0.00						7.00
465 466	Labor and materials	1/02/19	1,035.00 1,445.00	0.00	0.00	258.75 505.75	147.86 289.00	406.61 794.75	628.39 650.25		5.00
467	Flooring - Main St	1/28/19	10,476.85	0.00	0.00	873.07	523.84	1,396.91	9,079.94		20.00
468	Wall Repair	2/04/19	1,500.00	0.00	0.00	250.00	150.00	400.00	1,100.00		10.00
469	Furniture	2/05/19	2,331.45	0.00	0.00	388.58	233.15	621.73	1,709.72		10.00
470	Renovations	2/28/19	6,075.00	0.00	0.00	480.94	303.75	784.69	5,290.31		20.00
472	Sliding Door	2/28/19	1,530.00	0.00	0.00	242.25	153.00	395.25	1,134.75		10.00
473	Flooring	2/28/19	1,223.46	0.00	0.00	96.85	61.17	158.02	1,065.44		20.00
474	Windows	3/31/19	5,911.80	0.00	0.00	591.18	394.12	985.30	4,926.50	S/L	15.00
475	Security Cameras	4/25/19	14,522.29	0.00	0.00	4,114.65	2,904.46	7,019.11	7,503.18	S/L	5.00
476	Cabinets	5/09/19	7,864.43	0.00	0.00	1,114.12	786.44	1,900.56	5,963.87		10.00
477	Appliances	5/09/19	5,424.00	0.00	0.00	1,097.72	774.86	1,872.58	3,551.42		7.00
478	Windows	5/31/19	2,955.00	0.00	0.00	262.67	197.00	459.67	2,495.33		15.00
479	Furniture	6/07/19	3,293.42	0.00	0.00	439.12	329.34	768.46	2,524.96		10.00
480	Furniture	6/12/19	9,983.43	0.00	0.00	1,331.12	998.34	2,329.46	7,653.97		10.00
481	Furniture	6/25/19	1,682.00	0.00	0.00	210.25	168.20	378.45	1,303.55		10.00
482 484	Windows Renovations	7/02/19 7/31/19	3,777.52 3,675.00	$0.00 \\ 0.00$	$0.00 \\ 0.00$	314.79 214.38	251.83 183.75	566.62 398.13	3,210.90 3,276.87		15.00 20.00
484 485	Renovations Renovations	8/06/19	21.040.00	0.00	0.00	1,227.33	1,052.00	2,279.33	18,760.67		20.00
486	Roofing	8/22/19	4,700.00	0.00	0.00	254.58	235.00	489.58	4,210.42		20.00
487	Porch roofing	9/05/19	4,200.00	0.00	0.00	227.50	210.00	437.50	3,762.50	S/I	20.00
488	Furniture	9/11/19	2,422.00	0.00	0.00	262.38	242.20	504.58	1,917.42		10.00
489	Roofing	9/25/19	40,000.00	0.00	0.00	2,000.00	2,000.00	4,000.00		S/L	20.00
490	Renovations	9/30/19	2,005.00	0.00	0.00	100.25	100.25	200.50	1,804.50		20.00
491	Renovations-Wilson	12/31/18	2,885.96	0.00	0.00	252.52	144.30	396.82	2,489.14		20.00
493	Furniture	2/28/19	3,647.00	0.00	0.00	577.44	364.70	942.14	2,704.86		10.00
494	Main St Roof Replacement	10/02/19	21,200.00	0.00	0.00	1,060.00	1,060.00	2,120.00	19,080.00	S/L	20.00
495	Apartment Renovation	10/24/19	2,836.00	0.00	0.00	129.98	141.80	271.78	2,564.22		20.00
496	Matresses	10/31/19	375.00	0.00	0.00	68.75	75.00	143.75	231.25		5.00
497	Windows Desktops	12/01/19	14,530.00	0.00	0.00	2,421.67	2,906.00	5,327.67	9,202.33		5.00
498	Room Renovations	1/02/20	4,441.00	0.00	0.00	166.54	222.05	388.59	4,052.41		20.00
499	Laundry Improvements	1/07/20	897.00	0.00	0.00	134.55	179.40	313.95	583.05		5.00
500	Monitor	3/19/20	300.00	0.00	0.00	30.00	60.00	90.00	210.00		5.00
501	Unit Renovations	3/26/20	4,865.00	0.00	0.00	121.63	243.25	364.88	4,500.12		20.00
502 503	Security Cameras	3/31/20 3/31/20	16,037.00	$0.00 \\ 0.00$	$0.00 \\ 0.00$	801.85	1,603.70	2,405.55	13,631.45		10.00 20.00
503 504	Renovations Renovations	4/23/20	2,664.00 62,262.00	0.00	0.00	66.60 1,297.13	133.20 3,113.10	199.80 4,410.23	2,464.20 57,851.77	S/L S/L	20.00
504 505	Laptops	4/23/20	16,438.00	0.00	0.00	1,369.83	3,287.60	4,657.43	11,780.57		5.00
506	Storefront Door	5/28/20	4,817.00	0.00	0.00	321.13	963.40	1,284.53	3,532.47		5.00
507	Climate Systems	5/31/20	4,650.00	0.00	0.00	155.00	465.00	620.00	4,030.00		10.00
508	COVID Barriers	6/01/20	5,039.00	0.00	0.00	335.93	1,007.80	1,343.73	3,695.27		5.00
509	Laptops	6/11/20	1,988.00	0.00	0.00	132.53	397.60	530.13	1,457.87		5.00
510	Roof Repairs	7/09/20	6,275.00	0.00	0.00	78.44	313.75	392.19	5,882.81		20.00
511	IT Laptops and Two-Step ID	12/18/20	48,070.00	0.00c	0.00	0.00	7,210.50	7,210.50	40,859.50		5.00
512	IT Firewall	2/03/21	2,595.00	0.00c	0.00	0.00	576.67	576.67	2,018.33	S/L	3.00
513	Main Street Family Housing Project	9/30/21	37,658.70	0.00c	0.00	0.00	0.00	0.00	37,658.70	Memo	0.00
514	Main Street Shelter Playroom Reno	1/21/21	1,810.00	0.00c	0.00	0.00	241.33	241.33		S/L	5.00
515	Firehouse Remodel	9/30/21	56,854.50	0.00c	0.00	0.00	0.00	0.00	56,854.50		0.00
516	Firehouse Fire Alarm Repair	5/01/21	2,996.45	0.00c	0.00	0.00	178.36	178.36		S/L	7.00
517	St. John's Hall Security Camera Sys	2/11/21	18,981.05	0.00c	0.00	0.00	1,265.40	1,265.40		S/L	10.00
518	St. John's Alarm System	2/01/21	2,837.12	0.00c	0.00	0.00	189.14	189.14	2,647.98	S/L	10.00

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Asset t	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax <u>Period</u>
519 520 521 522 523 524 525	St. John's HVAC/Ducting St. John's Hall Turnover Upgrads 95 North HC Entry Door Operator Smith House Room Renovations 1,2 Wilson Room Renovations Wilson Security Camera System Wilson Renovations	8/01/21 2/01/21 11/30/20 4/30/21 7/31/21 9/22/21 9/30/21	2,440.00 18,273.34 5,904.00 8,695.00 5,540.00 4,714.00 10,000.00	0.00c 0.00c 0.00c 0.00c 0.00c 0.00c 0.00c	0.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00	58.10 609.11 702.86 181.15 46.17 0.00 0.00	58.10 609.11 702.86 181.15 46.17 0.00 0.00	2,381.90 17,664.23 5,201.14 8,513.85 5,493.83 4,714.00 10,000.00	S/L S/L S/L S/L S/L	7.00 20.00 7.00 20.00 20.00 10.00 0.00
Grand Total Less: Dispositions and Transfers Net Grand Total		4,931,786.09 100,341.97 4,831,444.12	0.00c 0.00 0.00c	0.00 0.00 0.00	2,772,208.62 82,670.41 2,689,538.21	160,746.13 0.00 160,746.13	2,932,954.75 86,035.12 2,846,919.63	1,998,831.34 14,306.85 1,984,524.49			

COTS COMMITTEE ON TEMPORARY SHELTERLINGCOPY

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Federal Statements

6/16/2022 2:59 PM

FYE: 9/30/2021

Taxable Dividends from Securities

Description							
		Δ 4				Acquired after	US
		Amount	Business	Code	Code	6/30/75	Obs (\$ or %)
INTEREST AND DIVIDEND	S						
	\$	86,877		14			
TOTAL	\$	86,877					

COTS COMMITTEE ON TEMPORARY SHELTER, INC PUBLIC COPY **-***5606 Federal Statements

6/16/2022 2:59 PM

FYE: 9/30/2021

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses		Program Service		Management & General		Fund <u>Raising</u>		
CONTRACT LABOR	\$	36,721	\$	15,417	\$		\$	21,304	
TOTAL	\$	36,721	\$	15,417	\$	0	\$	21,304	