

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. Page 2

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule)				
cash \$ _____ noncash \$ _____	22			
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc.	25	61,680.	41,120.	10,280.
26 Other salaries and wages	26	360,829.	254,635.	78,448.
27 Pension plan contributions	27			
28 Other employee benefits	28	64,439.	45,105.	13,532.
29 Payroll taxes	29	35,991.	25,196.	7,558.
30 Professional fundraising fees	30			
31 Accounting fees	31			
32 Legal fees	32			
33 Supplies	33	9,257.	6,480.	1,944.
34 Telephone	34	8,439.	7,173.	844.
35 Postage and shipping	35	8,156.	6,524.	1,020.
36 Occupancy	36	26,004.	18,203.	5,461.
37 Equipment rental and maintenance	37	7,386.	5,170.	1,551.
38 Printing and publications	38	14,261.	11,408.	1,783.
39 Travel	39	5,160.	4,902.	103.
40 Conferences, conventions, and meetings	40	6,377.	6,377.	
41 Interest	41	1,443.	1,010.	303.
42 Depreciation, depletion, etc (attach schedule)	42	7,236.	5,065.	1,520.
43 Other expenses not covered above (itemize):				
a _____	43a			
b _____	43b			
c _____	43c			
d _____	43d			
e SEE STATEMENT 4	43e	155,282.	91,141.	54,752.
44 Total functional expenses (add lines 22 through 43)	44	771,940.	529,509.	179,099.
Organizations completing columns (B)-(D), carry these totals to lines 13-15				63,332.

Joint Costs. Check if you are following SOP 98-2
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____; (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? SEE STATEMENT 5	Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
a COMMUNITY DEVELOPMENT - FOCUSES ON DEVELOPING A THRIVING LOCAL ECONOMY. (Grants and allocations \$ _____)	155,738.
b COMMUNITY ORGANIZING - FOCUSES ON SUPPORTING AND STRENGTHENING RESIDENT LEADERSHIP AND COMMUNITY PLANNING AND DEVELOPMENT (Grants and allocations \$ _____)	210,246.
c HUMAN DEVELOPMENT - FOCUSES ON ASSISTING RESIDENTS TO ORGANIZE AND ACCESSING SERVICES AND RESOURCES (Grants and allocations \$ _____)	163,525.
d _____ (Grants and allocations \$ _____)	
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	529,509.

Part IV Balance Sheets

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year	
Assets	45 Cash - non-interest-bearing	373,012.	45	254,245.	
	46 Savings and temporary cash investments		46		
	47 a Accounts receivable				
	b Less: allowance for doubtful accounts	26,981.	47c		
	48 a Pledges receivable	67,625.			
	b Less: allowance for doubtful accounts				
	49 Grants receivable		49		
	50 Receivables from officers, directors, trustees, and key employees		50		
	51 a Other notes and loans receivable	14,205.			
	b Less: allowance for doubtful accounts				
	52 Inventories for sale or use		52		
	53 Prepaid expenses and deferred charges	4,873.	53	5,424.	
	54 Investments - securities STMT 6 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	11,370.	54	323.	
	55 a Investments - land, buildings, and equipment: basis				
b Less: accumulated depreciation		55c			
56 Investments - other	SEE STATEMENT 7	50,000.	56	50,000.	
57 a Land, buildings, and equipment: basis	136,438.				
b Less: accumulated depreciation	120,275.				
58 Other assets (describe SEE STATEMENT 8)		46,984.	58	1,674.	
59 Total assets (add lines 45 through 58) (must equal line 74)		659,878.	59	409,659.	
Liabilities	60 Accounts payable and accrued expenses	115,956.	60	41,560.	
	61 Grants payable	17,259.	61	14,009.	
	62 Deferred revenue		62		
	63 Loans from officers, directors, trustees, and key employees		63		
	64 a Tax-exempt bond liabilities		64a		
	b Mortgages and other notes payable	50,000.	64b	50,000.	
65 Other liabilities (describe SEE STATEMENT 9)		52,927.	65	89,202.	
66 Total liabilities (add lines 60 through 65)		236,142.	66	194,771.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
	67 Unrestricted	206,313.	67	<57,599.>	
	68 Temporarily restricted	217,423.	68	272,487.	
	69 Permanently restricted		69		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74				
	70 Capital stock, trust principal, or current funds		70		
	71 Paid-in or capital surplus, or land, building, and equipment fund		71		
	72 Retained earnings, endowment, accumulated income, or other funds		72		
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)		423,736.	73	214,888.
	74 Total liabilities and net assets / fund balances (add lines 66 and 73)		659,878.	74	409,659.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

DUDLEY STREET NEIGHBORHOOD INITIATIVE, INC.

Form 990 (2002)

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Part VI Other Information		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	X	
b	If "Yes," enter the name of the organization DUDLEY NEIGHBORS INCORPORATED and check whether it is <input checked="" type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81 a	Enter direct or indirect political expenditures. See line 81 instructions 81a 0.		
b	Did the organization file Form 1120-POL for this year?		X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	X	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III.) 82b		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions? N/A		
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c	Dues, assessments, and similar amounts from members 85c N/A		
d	Section 162(e) lobbying and political expenditures 85d N/A		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A 85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A 85h		
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12 86a N/A		
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A		
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders 87a N/A		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b N/A		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 0. ; section 4912 0. ; section 4955 0.		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0.		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization 0.		
90 a	List the states with which a copy of this return is filed MASSACHUSETTS		
b	Number of employees employed in the pay period that includes March 12, 2002 90b 13		
91	The books are in care of JOHN BARROS - EXECUTIVE DIRECTOR Telephone no 617-442-9670		
Located at 504 DUDLEY ST, ROXBURY MA., ZIP + 4 02119-2719			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A		

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Form 990 (2002)

DUDLEY STREET NEIGHBORHOOD INITIATIVE, INC.

Part VII Analysis of Income-Producing Activities (See page 31 of the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a FEES					17,790.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					3,257.
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	1,342.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	<1,885.>	
101 Net income or (loss) from special events					3,289.
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a MISCELLANEOUS			01	5,540.	
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		4,997.	24,336.
105 Total (add line 104, columns (B), (D), and (E))					29,333.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 32 of the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93	FEES AND CONTRACTS FOR NEIGHBORHOOD DEVELOPMENT INITIATIVES IN FURTHERANCE OF THE ORGANIZATION'S MISSION
101	ANNUAL MULTI-CULTURAL FESTIVAL AIMED AT CELEBRATION CULTURAL DIVERSITY

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 32 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 33 of the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Accompanying schedules and statements, and to the best of my knowledge and belief, it is true, information of which preparer has any knowledge

J. Barros JOHN BARROS, EXECUTIVE DIRECTOR
 Date: / / Type or print name and title

Check if self-preparer Preparer's SSN or PTIN

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information-(See separate instructions.)
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

2002

Name of the organization **DUDLEY STREET NEIGHBORHOOD INITIATIVE, INC.** Employer identification number **04 2859066**

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
MAY LOUIE ----- 504 DUDLEY STREET , ROXBURY MA 02119	PROJ. MGR 40	51,087.		

Total number of other employees paid over \$50,000 ▶	0			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE -----		

Total number of others receiving over \$50,000 for professional services ▶	0	

DUDLEY STREET NEIGHBORHOOD INITIATIVE,

Part III Statements About Activities (See page 2 of the instructions.)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities \blacktriangleright \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.) SEE STATEMENT 12		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?	X	
c Furnishing of goods, services, or facilities?	X	
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	X	
e Transfer of any part of its income or assets?		X
3 Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below.)		X
4 Do you have a section 403(b) annuity plan for your employees?		X
Note: Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments. SEE STATEMENT 13		

Part IV Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions)

The organization is not a private foundation because it is: (Please check only ONE applicable box.)

- 5 A church, convention of churches, or association of churches Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state \blacktriangleright _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the Support Schedule in Part IV-A.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A.)
- 11b A community trust Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)
- 12 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the Support Schedule in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3).)

Provide the following information about the supported organizations (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions.)

DUDLEY STREET NEIGHBORHOOD INITIATIVE,

Schedule A (Form 990 or 990-EZ) 2002 INC.

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Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.
 Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	963,614.	432,635.	1,251,874.	448,901.	3,097,024.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	29,741.	217,404.	8,677.	15,937.	271,759.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	4,717.	1,474.	13,835.	13,265.	33,291.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	12,264.		SEE STATEMENT 14 2,097.	6,861.	21,222.
23 Total of lines 15 through 22	1,010,336.	651,513.	1,276,483.	484,964.	3,423,296.
24 Line 23 minus line 17	980,595.	434,109.	1,267,806.	469,027.	3,151,537.
25 Enter 1% of line 23	10,103.	6,515.	12,765.	4,850.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 63,031.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the sum of all these excess amounts					26b 1,742,930.
c Total support for section 509(a)(1) test. Enter line 24, column (e)					26c 3,151,537.
d Add: Amounts from column (e) for lines: 18 33,291. 19 22 21,222. 26b 1,742,930.					26d 1,797,443.
e Public support (line 26c minus line 26d total)					26e 1,354,094.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 42.9661%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A					
(2001) (2000) (1999) (1998)					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year. N/A					
(2001) (2000) (1999) (1998)					
c Add: Amounts from column (e) for lines: 15 16 17 20 21					27c N/A
d Add: Line 27a total and line 27b total					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					27f N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.
 NONE

DUDLEY STREET NEIGHBORHOOD INITIATIVE,

Part V Private School Questionnaire (See page 7 of the instructions)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement.)		
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)		
34 a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement		
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation		

DUDLEY STREET NEIGHBORHOOD INITIATIVE,

Schedule A (Form 990 or 990-EZ) 2002 INC.

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Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)

N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

Check a if the organization belongs to an affiliated group.

Check b if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred.)

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

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

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A (e) Total
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

- a Volunteers
- b Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (Add lines c through h.)

Yes	No	Amount
		0.

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

FORM 990 GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES STATEMENT 1

DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
SECURITIES	17,394.	19,279.	0.	<1,885.>
TO FORM 990, PART I, LINE 8	17,394.	19,279.	0.	<1,885.>

FORM 990 SPECIAL EVENTS AND ACTIVITIES STATEMENT 2

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
MULTICULTURAL FESTIVAL	10,039.		10,039.	6,750.	3,289.
TO FM 990, PART I, LINE 9	10,039.		10,039.	6,750.	3,289.

FORM 990 OTHER CHANGES IN NET ASSETS OR FUND BALANCES STATEMENT 3

DESCRIPTION	AMOUNT
UNREALIZED GAIN ON INVESTMENTS	179.
TOTAL TO FORM 990, PART I, LINE 20	179.

FORM 990 OTHER EXPENSES STATEMENT 4

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
ADVERTISING & PROMOTION	2,068.	1,448.	434.	186.
BUILDING MANAGEMENT	26,920.	18,844.	5,653.	2,423.
CONTRACTED SERVICES	101,301.	55,749.	43,886.	1,666.
REPAIRS AND MAINTENANCE	4,414.	3,090.	927.	397.
INSURANCE	5,980.	4,186.	1,256.	538.
MISCELLANEOUS	14,599.	7,824.	2,596.	4,179.
TOTAL TO FM 990, LN 43	155,282.	91,141.	54,752.	9,389.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 5
PART III

EXPLANATION

EMPOWER DUDLEY RESIDENTS TO ORGANIZE, PLAN FOR, CREATE AND CONTROL A VIBRANT, DIVERSE AND HIGH QUALITY NEIGHBORHOOD IN COLLABORATION W/ COMMUNITY PARTNERS

FORM 990 NON-GOVERNMENT SECURITIES STATEMENT 6

SECURITY DESCRIPTION	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	OTHER SECURITIES	TOTAL NON-GOV'T SECURITIES
COMMON STOCK	323.				323.
TOTAL TO FORM 990, LN 54 COL B	323.				323.

FORM 990 OTHER INVESTMENTS STATEMENT 7

DESCRIPTION	VALUATION METHOD	AMOUNT
CERTIFICATE OF DEPOSIT	MARKET VALUE	50,000.
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		50,000.

FORM 990 OTHER ASSETS STATEMENT 8

DESCRIPTION	AMOUNT
DUE FROM SUBSIDIARY ORGANIZATION	1,674.
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B	1,674.

FORM 990	OTHER LIABILITIES	STATEMENT	9
DESCRIPTION		AMOUNT	
FUNDS DESIGNATED BY DONOR FOR OTHER ORGANIZATIONS			89,202.
TOTAL TO FORM 990, PART IV, LINE 65, COLUMN B			89,202.

FORM 990	OTHER REVENUE NOT INCLUDED ON FORM 990	STATEMENT	10
DESCRIPTION		AMOUNT	
SPECIAL EVENTS			6,750.
TOTAL TO FORM 990, PART IV-A			6,750.

FORM 990	OTHER EXPENSES NOT INCLUDED ON FORM 990	STATEMENT	11
DESCRIPTION		AMOUNT	
SPECIAL EVENTS			6,750.
TOTAL TO FORM 990, PART IV-B			6,750.

SCHEDULE A	STATEMENT REGARDING ACTIVITIES WITH SUBSTANTIAL CONTRIBUTORS, TRUSTEES, DIRECTORS, CREATORS, KEY EMPLOYEES, ETC, .	STATEMENT	12
			PART III, LINE 2

THE EXECUTIVE DIRECTOR IS PAID FOR HIS SERVICES AND THE ORGANIZATION PROVIDES SERVICES AND PAYROLL ADVANCES TO ITS SUBSIDIARY NON PROFIT ORGANIZATION

SCHEDULE A	EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS	STATEMENT	13
			PART III, LINE 3

SEE ATTACHED COMMUNITY GRANTS MEMORANDUM

SCHEDULE A	OTHER INCOME			STATEMENT 14
DESCRIPTION	2001 AMOUNT	2000 AMOUNT	1999 AMOUNT	1998 AMOUNT
OTHER	12,264.	0.	2,097.	6,861.
TOTAL TO SCHEDULE A, LINE 22	12,264.	0.	2,097.	6,861.

06/30/03 - Fixed Assets

	Cost	Acc Depr 06/30/02	FY03 Depr	Acc Depr 06/30/03	Remaining Life
<u>Furniture and Fixtures (7 years)</u>					
94 additions VCR	462	462	0	462	0
94 additions DNI Office	800	800	0	800	0
<u>Office Equipment (5 years)</u>					
94 additions	14,325	14,325	0	14,325	0
95 additions	23,633	23,633	0	23,633	0
97 additions computers	40,280	40,280	0	40,280	0
98 additions comp's and software	20,752	20,752	0	20,752	0
99 additions printer	1,635	1,308	327	1,635	0
99 additions equipment	3,000	2,350	600	2,950	50
99 additions software and equip	3,738	2,992	746	3,738	0
00 additions computers	8,405	4,203	1,681	5,884	2,521
02 additions computers	19,408	1,941	3,882	5,823	13,585
	136,438	113,046	7,236	120,282	2,571

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DSNI BOARD OF DIRECTORS LIST 2001-2003

NAME	ADDRESS	HOME	WORK	FAX	EMAIL	COMMENTS
Najwa Abdul-Tawwab	38 Sargent St Dorch 02125	617-445-0267 cell 617-515-1977	617-287-7634	617-287-7664	Najwa_abdultawwab@umb.edu	President
Casimiro Barros, Jr.	40 Clarence St Rox 02119	617-445-0033	617-282-1998		Cazbarros@hotmail.com	
Keila Barros	54 E Cottage St Dorch 02125	617-427-0483 cell 617-365-5770	617-754-6627		Kbarros@caregroup.harvard.edu	Clerk
Frederic Bertley	75 Highland St #1 Rox 02119	617-427-3270	617-355-4371 617-285-3103		Bertley@al.tch.harvard.edu & Frederick.bertley@tch.harvard.edu	
Paul Bothwell	4 Woodville Terr Rox 02119	617-442-4632	617-576-2651		Bothwellmta@msn.com & bothwellmta@junio.com	
Gladys Centeno-Rodrigue Youthbuild Boston	504 Dudley St Rox 02119		617-445-8887 ext 129	617-427-3950	centeno@ybboston.org	
Elizabeth Centeio	71 George St Rox 02119	617-445-5128	617-427-5300 x221	617-638-9872	ecenteio@ymcaboston.org	Vice-President
Stacy Centeio	11 Albion St Rox 02119	617-442-4954			scenteio@newtoncountryday.org	
Teodora Duarte Dorchester Bay EDC	594 Columbia Rd Dorch 02125		617-825-4200- ext 218	617-825-3522	Tduarte@dbedc.com	
Vernessa Fernandes	14 Dubois St Rox 02119	617-541-3813	617-445-8887 ext 132	617-427-0651	Vfernandes@ybboston.org	
Evelyn Friedman Nuestra Comunidad	56 Warren St Suite 20 Rox 02119		617-427-3599	617-989-1216		
Tito Fuster	29 Monadnock St Dorch 02125	617-436-0494	617-427-7175 ext 224	617-442-2259	tfuster@laalianza.org	
Theresa Glynn	65 Clifton St Dorch 02125	617-427-3139				
Lisa Glynn-Wilson	65 Clifton St Dorch 02125	617-442-4232			Lglynwilson@yahoo.com	
Marisel Gonzales Bird St Comm Ctr	500 Columbia Rd Dorch 02125		617-282-6110 ext 11	617-282-2507	Mgonzales@birdstreet.org	
Pat Gray The Food Project	P. O Box 705 Lincoln MA 71773	617-442-1322 ext 10 Dudley	781-259-8621 ext 15			

2002

2001-2003 DSNI Board of Directors

Stephen Hanley W.A.I.T House	117 Mt Pleasant Ave Rox 02119	508-879-4205	617-445-2520	617-445-5989	Sphanley@aol.com	
Julio Henriquez	20 Judson St Dorch 02125	617-427-2269			rickhenriquez@hotmail.com	
Sr Alice Kenneally St Patrick's Church	115 Mt Pleasant Ave Rox 02119	617-442-0555 convent	Ch 617-445-7645	WAITT 617-445-5510		
Kim Langhorn	90 Magnolia St Dorch 02125	617-442-5191	617-732-8836		Kimlanghorn_2000@yahoo.com & langy6@aol.com	
Myrza Lassus	63 Howard Ave Dorch 02125	617-442-0299	617-442-8800 ext 1403	617-445-0091	mlassus@dimock.org lassuspfs@hotmail.com	Assistant Treasurer
Sr Margaret Leonard Project Hope	45 Magnolia St Dorch 02125	617-442-9411	617-442-1880 ext 16	617-442-1356	Mleonard@prohope.org	
Eliezer Lorenzo	63 Howard Ave Dorch 02125	617-442-0299	617-465-4023 pager		Eli98@gte.net	
Al Lovata Be Our Guest	24 Blue Hill Ave Rox 02119		617-427-2700 ext 215	617-442-6350	Alovata@be-our-guest.com	Treasurer
Rigoberto Nuñez Salem Adventist Church	2 Walker Rd #5 N. Andover 01845-19	978-682-3354	(cell don't list 781-504-8045)		rigobertonunez@cs.com	
Nydia Rodriguez La Alianza Hispana	409 Dudley St Rox 02119		617-427-7175 ext 278	617-442-2259	nrodriguez@laalianza.org	
Gino Texeira Ideal Sub Shop	522 Dudley St Rox 02119	617-442-3056	617-442-1560			
Reginald Ware	42 Brook Ave Rox 02119	617-427-4060				

EIN: 04-2859066



Grant Qualifications

DUDLEY STREET NEIGHBORHOOD INITIATIVE

504 Dudley Street ♦ Roxbury, MA 02119

Phone: 617/442-9670 ♦ Fax: 617/427-8047

http://www.dsni.org

Board of Directors

Residents

Najwa Abdul-Tawwab

Casimiro Barros, Jr

Paul Botliwell

Honario Correia

Telma DePina

Carline Dorcena

William Dorcena

Veronica Fletcher

Theresa Glynn

Lisa Glynn-Wilson

Myrza Lassus

Eliezer Lorenzo

Neusa Sequeira

Anthony Veras

MEMORANDUM

TO: All Dudley Neighborhood Groups
 FROM: Dudley Street Neighborhood Initiative (DSNI)
 SUBJECT: Community Grants Available
 DATE: October 15, 1999

DSNI once again is inviting all neighborhood and/or block associations, crime watches, parents councils, gardeners groups, tenants organizations, youth groups and any other group of neighbors working together to improve life in this community to apply for a small grant to help you in your work.

This is the second round that DSNI, through the Annie E. Casey Foundation's Rebuilding Communities Initiative (RCI), will be awarding to the community. \$25,000 is available to assist neighborhood groups to realize the community's dreams.

We are now in the demonstration phase of the Rebuilding Communities Initiative (RCI) program and our "engine of change" is:

Organizing for resident leadership/control/influence over all aspects of the revitalization of the Dudley Neighborhood

The components of the engine are:

1. Resident power
2. Resident Leadership Development
3. Community Building Infrastructure (strengthening neighborhood efforts and associations, increasing activism, developing information and communications toots, increase multicultural understanding)

If you have a project that you think fits in with the engine of change, we hope that you will consider applying for this assistance. We will hold an open house so you can come talk about this grant process, the plan and vision that the community has developed, and to get help with the application. With the total amount of \$25,000, we expect to make between 10 and 15 grants, with an average grant size of \$1000 to \$2000. If you do not have your own non-profit tax status, you will need to have a non-profit organization or agency act as your conduit.

Here is the process and schedule:

Agencies

La Alianza Hispana

Bird Street Community Center

Dorchester Bay EDC

Nuestra Comunidad CDC

Orchard Gardens Tenants Association

Project HOPE

Roxbury Multi-Service Center

WATT House

YouthBuild Boston

Businesses

Be Our Guest

Ideal Sub Shop

Religious Institutions

St. Patrick's Church

Executive Director

Gregory C. Watson

EIN: 04-2859066

E. Timetable for activity

Return this application by **November 22, 1999** to Gertrudes at Dudley Street Neighborhood Initiative 504
Dudley St. Roxbury 02119 (617) 442-9670 fax 427-8047

Statement 12d

- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only Part II and check this box **X**
- Note: Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.**
- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

Part II Additional (not automatic) 3-Month Extension of Time - Must file Original and One Copy.		
Type or print. File by the extended due date for filing the return. See instructions.	Name of Exempt Organization DUDLEY STREET NEIGHBORHOOD INITIATIVE, INC.	Employer identification number 04-2859066
	Number, street, and room or suite no. If a P.O. box, see instructions. 504 DUDLEY ST.	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ROXBURY, MA 02119	

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

Form 990
 Form 990-EZ
 Form 990-T (sec. 401(a) or 408(a) trust)
 Form 1041-A
 Form 5227
 Form 8870
 Form 990-BL
 Form 990-PF
 Form 990-T (trust other than above)
 Form 4720
 Form 6069

STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- If the organization does **not** have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the **whole** group, check this box . If it is for **part** of the group, check this box and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until MAY 17, 2004

5 For calendar year _____, or other tax year beginning JUL 1, 2002 and ending JUN 30, 2003

6 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

7 State in detail why you need the extension
INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN IS NOT YET AVAILABLE


8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ _____

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 \$ _____

c **Balance Due.** Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ **N/A**

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature  Title **EXECUTIVE DIRECTOR** Date 0790

Notice to Applicant - To Be Completed by the IRS

- We have approved this application. Please attach this form to the organization's return.
- We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return.
- We have not approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting the 10-day grace period.
- We cannot consider this application because it was filed after the due date of the return for which an extension was requested.
- Other _____

By _____ Date _____

Alternate Mailing Address - Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.

Type or print	Name DANIEL DENNIS AND COMPANY LLP
	Number and street (include suite, room, or apt. no.) Or a P.O. box number 116 HUNTINGTON AVENUE
	City or town, province or state, and country (including postal or ZIP code) BOSTON MA 02116

223832 05-22-02