

Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2006

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

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

A For the 2006 calendar year, or tax year beginning **JUL 1, 2006** and ending **JUN 30, 2007**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization DUDLEY STREET NEIGHBORHOOD INITIATIVE, INC.	D Employer identification number 04-2859066
	Please use IRS label or print or type See Specific Instructions Number and street (or P O box if mail is not delivered to street address) Room/suite 504 DUDLEY ST.	E Telephone number 617-442-9670
	City or town, state or country, and ZIP + 4 ROXBURY, MA 02119	F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations

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

H(b) If "Yes," enter number of affiliates ▶ N/A

H(c) Are all affiliates included? N/A Yes No (if "No," attach a list)

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

G Website: ▶ WWW.DSNI.ORG

J Organization type (check only one) ▶ 501(c)(3) ◀ (insert no) 4947(a)(1) or 527

K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return

I Group Exemption Number ▶ N/A

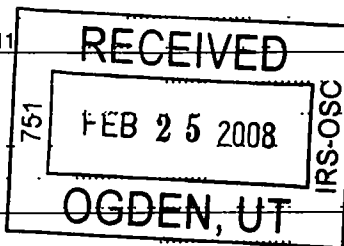
L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **519,774.**

M Check if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

SCANNED MAR 17 2008

Revenue	1 Contributions, gifts, grants, and similar amounts received				
	a Contributions to donor advised funds	1a			
	b Direct public support (not included on line 1a)	1b		454,217.	
	c Indirect public support (not included on line 1a)	1c			
	d Government contributions (grants) (not included on line 1a)	1d			
	e Total (add lines 1a through 1d) (cash \$ 454,217. noncash \$)	1e			454,217.
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2			32,812.
	3 Membership dues and assessments	3			
	4 Interest on savings and temporary cash investments	4			3,864.
	5 Dividends and interest from securities	5			
	6 a Gross rents	6a			
	b Less rental expenses	6b			
c Net rental income or (loss) Subtract line 6b from line 6a	6c				
7 Other investment income (describe)	7				
8 a Gross amount from sales of assets other than inventory	(A) Securities	8a			
	(B) Other	8b			
		8c			
	d Net gain or (loss) Combine line 8c, columns (A) and (B)	8d			
9 Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>	a Gross revenue (not including \$ 0. of contributions reported on line 1b)	9a		22,356.	
	b Less direct expenses other than fundraising expenses	9b		6,813.	
	c Net income or (loss) from special events Subtract line 9b from line 9a	9c		SEE STATEMENT 1	15,543.
10 a Gross sales of inventory, less returns and allowances		10a			
	b Less cost of goods sold	10b			
	c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	10c			
11 Other revenue (from Part VII, line 103)	11			6,525.	
12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12			512,961.	
Expenses	13 Program services (from line 44, column (B))	13		434,839.	
	14 Management and general (from line 44, column (C))	14		104,744.	
	15 Fundraising (from line 44, column (D))	15		14,171.	
	16 Payments to affiliates (attach schedule)	16			
	17 Total expenses. Add lines 16 and 44, column (A)	17			553,754.
18 Excess or (deficit) for the year. Subtract line 17 from line 12	18			<40,793.>	
Net Assets	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		339,028.	
	20 Other changes in net assets or fund balances (attach explanation)	20		0.	
	21 Net assets or fund balances at end of year Combine lines 18, 19, and 20	21			298,235.



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INC.

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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

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
22a Grants paid from donor advised funds (attach schedule) (cash \$ <u>0</u> . noncash \$ <u>0</u> .) If this amount includes foreign grants, check here <input type="checkbox"/>				
22b Other grants and allocations (attach schedule) (cash \$ <u>0</u> . noncash \$ <u>0</u> .) If this amount includes foreign grants, check here <input type="checkbox"/>				
23 Specific assistance to individuals (attach schedule)				
24 Benefits paid to or for members (attach schedule)				
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A STMT 3	43,680.	37,128.	6,552.	0.
b Compensation of former officers, directors, key employees, etc. listed in Part V-B	0.	0.	0.	0.
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
26 Salaries and wages of employees not included on lines 25a, b, and c	238,654.	209,434.	29,220.	
27 Pension plan contributions not included on lines 25a, b, and c				
28 Employee benefits not included on lines 25a - 27	35,498.	30,528.	2,130.	2,840.
29 Payroll taxes	31,094.	26,741.	1,866.	2,487.
30 Professional fundraising fees				
31 Accounting fees	18,953.		18,953.	
32 Legal fees				
33 Supplies	3,779.	2,624.	926.	229.
34 Telephone	8,548.	7,351.	513.	684.
35 Postage and shipping	10,248.	8,813.	615.	820.
36 Occupancy	24,000.	20,640.	1,440.	1,920.
37 Equipment rental and maintenance	10,313.	9,435.		878.
38 Printing and publications	8,870.	8,009.	369.	492.
39 Travel	4,672.	2,552.	2,120.	
40 Conferences, conventions, and meetings	883.	45.	838.	
41 Interest	1,865.		1,865.	
42 Depreciation, depletion, etc. (attach schedule)	17,652.	8,380.	8,492.	780.
43 Other expenses not covered above (itemize):				
a				
b				
c				
d				
e				
f				
g SEE STATEMENT 2	95,045.	63,159.	28,845.	3,041.
44 Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	553,754.	434,839.	104,744.	14,171.

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 \$ N/A ; (ii) the amount allocated to Program services \$ N/A ,

(iii) the amount allocated to Management and general \$ N/A , and (iv) the amount allocated to Fundraising \$ N/A

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Part III Statement of Program Service Accomplishments (See the instructions.)

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.

What is the organization's primary exempt purpose? ► <u>SEE STATEMENT 4</u>	Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	
a ECONOMIC POWER – INCLUDES ALL ASPECTS OF LAND USE, PHYSICAL DEVELOPMENT AND COMMERCIAL AND ECONOMIC DEVELOPMENT (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	88,895.
b RESIDENT LEADERSHIP – INCLUDES THE RESIDENT DEVELOPMENT INSTITUTE, THE COMMUNITY PROCESS AND COMPREHENSIVE PLANNING (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	114,441.
c YOUTH OPPORTUNITIES & DEVELOPMENT– ENGAGES YOUNG PEOPLE IN THE COMPREHENSIVE PLANNING PROCESS (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	231,503.
d (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
e Other program services (attach schedule) (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ►	434,839.

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INC.

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Part IV Balance Sheets (See the instructions.)

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	111,187.	45	193,109.
	46 Savings and temporary cash investments		46	
	47 a Accounts receivable	47a 32,640.		
	b Less: allowance for doubtful accounts	47b 7,010.	23,417.	47c 25,630.
	48 a Pledges receivable	48a 49,733.		
	b Less: allowance for doubtful accounts	48b	82,000.	48c 49,733.
	49 Grants receivable			49
	50 a Receivables from current and former officers, directors, trustees, and key employees			50a
	b Receivables from other disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B))			50b
	51 a Other notes and loans receivable	51a 21,634.		
	b Less: allowance for doubtful accounts	51b	21,634.	51c 21,634.
	52 Inventories for sale or use			52
	53 Prepaid expenses and deferred charges		3,343.	53 1,884.
	54 a Investments - publicly-traded securities STMT 8 <input checked="" type="checkbox"/> Cost <input type="checkbox"/> FMV		323.	54a 323.
	b Investments - other securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV			54b
Liabilities	55 a Investments - land, buildings, and equipment: basis	55a		
	b Less: accumulated depreciation	55b		55c
	56 Investments - other	SEE STATEMENT 5	53,209.	56 55,231.
	57 a Land, buildings, and equipment: basis	57a 216,948.		
	b Less: accumulated depreciation	57b 176,335.	14,779.	57c 40,613.
58 Other assets, including program-related investments (describe <input type="checkbox"/> SEE STATEMENT 6)		112,381.	58 101,040.	
59 Total assets (must equal line 74). Add lines 45 through 58		422,273.	59 489,197.	
Liabilities	60 Accounts payable and accrued expenses		33,245.	60 47,066.
	61 Grants payable			61
	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 86,301.
	65 Other liabilities (describe <input type="checkbox"/> SEE STATEMENT 7)			65 57,595.
66 Total liabilities. Add lines 60 through 65		83,245.	66 190,962.	
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		153,074.	67 147,286.
	68 Temporarily restricted		185,954.	68 150,949.
	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 and column (B) must equal line 21)		339,028.	73 298,235.
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73		422,273.	74 489,197.

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Part VI Other Information (continued)		Yes	No
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 N/A		
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?	X	
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? 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.		
	N/A		
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		
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		
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 a	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
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI		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.		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		X
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?		X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
89g			
90 a	List the states with which a copy of this return is filed MA		
b	Number of employees employed in the pay period that includes March 12, 2006	90b	8
91 a	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		
b	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)? If "Yes," enter the name of the foreign country N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	91b	X

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Part VI Other Information (continued) Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c Yes No
 If "Yes," enter the name of the foreign country N/A

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here
 and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A

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

	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					32,812.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	3,864.	
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					
101 Net income or (loss) from special events					15,543.
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a MISCELLANEOUS			01	6,525.	
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		10,389.	48,355.
105 Total (add line 104, columns (B), (D), and (E))					58,744.

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

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See 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 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 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)

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13) N/A

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	Yes	No
a	----- ----- -----					
b	----- ----- -----					
c	----- ----- -----					
Totals						

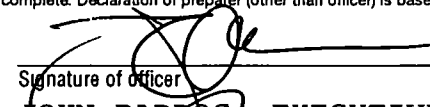
107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	Yes	No
a	----- ----- -----					
b	----- ----- -----					
c	----- ----- -----					
Totals						

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

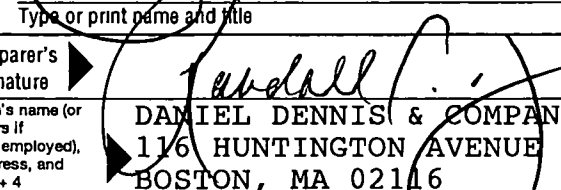
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Please Sign Here

Signature of officer:  Date: 2/4/08

JOHN BARROS, EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer's Use Only

Preparer's signature:  Date: 01/21/08

Check if self-employed:

Preparer's SSN or PTIN (See Gen Inst X): 042-73-4675

Firm's name (or yours if self-employed), address, and ZIP + 4: DANIEL DENNIS & COMPANY LLP, 116 HUNTINGTON AVENUE, BOSTON, MA 02116

EIN: 04-2734675

Phone no: (617) 262-9898

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 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

2006

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 2 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	PROJECT MNGR. 40.00	53,789.	4,534.	

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

Part II-A 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	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms If there are none, enter "None " See page 2 of the instructions)

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

Total number of other contractors receiving over \$50,000 for other services ▶	0	

DUDLEY STREET NEIGHBORHOOD INITIATIVE,

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

- 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 ▶ \$ _____ \$ _____ (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
- 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.)
- a Sale, exchange, or leasing of property?
 - b Lending of money or other extension of credit?
 - c Furnishing of goods, services, or facilities?
 - d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?
 - e Transfer of any part of its income or assets?
- 3 a Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments) **SEE STATEMENT 9**
- b Did the organization have a section 403(b) annuity plan for its employees?
 - c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement
 - d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?
- 4 a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g
- b Did the organization make any taxable distributions under section 4966?
 - c Did the organization make a distribution to a donor, donor advisor, or related person?
 - d Enter the total number of donor advised funds owned at the end of the tax year
 - e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year
 - f Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts
 - g Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year

	Yes	No
1		X
2a		X
2b	X	
2c	X	
2d	X	
2e		X
3a	X	
3b		X
3c		X
3d		X
4a		X
4b		
4c		
		N/A
		N/A
		N/A
		N/A
		0.
		0.

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions)

I certify that 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
- 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 otherwise meets the requirements of section 509(a)(3) Check the box that describes the type of supporting organization
 - Type I
 - Type II
 - Type III-Functionally Integrated
 - Type III-Other

Provide the following information about the supported organizations. (See page 7 of the instructions)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total					▶

- 14 An organization organized and operated to test for public safety Section 509(a)(4) (See page 7 of the instructions)

DUDLEY STREET NEIGHBORHOOD INITIATIVE,

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) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	348,656.	428,370.	432,485.	533,580.	1,743,091.
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	7,151.	55,840.	20,653.	3,257.	86,901.
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	4,196.	6,021.	6,021.	1,342.	17,580.
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	13,073.	14,796.	5,540.	12,264.	45,673.
23 Total of lines 15 through 22	373,076.	505,027.	464,699.	550,443.	1,893,245.
24 Line 23 minus line 17	365,925.	449,187.	444,046.	547,186.	1,806,344.
25 Enter 1% of line 23	3,731.	5,050.	4,647.	5,504.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					36,127.
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 2002 through 2005 exceeded the amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts					0.
c Total support for section 509(a)(1) test Enter line 24, column (e)					1,806,344.
d Add: Amounts from column (e) for lines 18 17,580. 19 _____ 22 45,673. 26b _____					63,253.
e Public support (line 26c minus line 26d total)					1,743,091.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					96.4983%
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					
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 11b, 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					
c Add: Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					N/A
d Add: Line 27a total _____ and line 27b total _____					N/A
e Public support (line 27c total minus line 27d total)					N/A
f Total support for section 509(a)(2) test Enter amount on line 23, column (e)					N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					N/A %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, 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 9 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		

FORM 990 OFFICER COMPENSATION ALLOCATION STATEMENT 3
PART II, LINE 25A

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
JOHN BARROS	43,680.	4,485.		48,165.
A. PROGRAM SERVICES	37,128.	3,812.		40,940.
B. MANAGEMENT AND GENERAL	6,552.	673.		7,225.
C. FUNDRAISING				
TOTAL PROGRAM SERVICES				40,940.
TOTAL MANAGEMENT AND GENERAL				7,225.
TOTAL FUNDRAISING				
TOTAL OFFICER, ETC., COMPENSATION INCLUDED ON PART II, LINE 25A				48,165.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 4
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 OTHER INVESTMENTS STATEMENT 5

DESCRIPTION	VALUATION METHOD	AMOUNT
CERTIFICATE OF DEPOSIT	MARKET VALUE	55,231.
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		55,231.

FORM 990	OTHER ASSETS	STATEMENT	6
DESCRIPTION		AMOUNT	
DUE FROM SUBSIDIARY ORGANIZATION INTEREST RECEIVABLE		100,756.	
		284.	
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B		101,040.	

FORM 990	OTHER LIABILITIES	STATEMENT	7
DESCRIPTION		AMOUNT	
DESIGNATED BY DONOR FOR SPECIFIC ORGANIZATIONS		57,595.	
TOTAL TO FORM 990, PART IV, LINE 65, COLUMN B		57,595.	

FORM 990	NON-GOVERNMENT SECURITIES			STATEMENT	8
SECURITY DESCRIPTION	COST/FMV	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	TOTAL NON-GOV'T SECURITIES
COMMON STOCK	COST	323.			323.
TO FORM 990, LINE 54A, COL B		323.			323.

SCHEDULE A EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS STATEMENT 9
PART III, LINE 3A

UNDER ITS ECONOMIC POWER PROGRAM, DSNI MAKES LOANS TO LOCAL INCOME ELIGIBLE RESIDENTS PURCHASING A HOME THAT HAS BEEN BUILT ON LAND OWNED BY DSNI. THE LOANS ARE TO ASSIST WITH THE DOWN PAYMENT OR CLOSING COST ASSOCIATED WITH THE HOME PURCHASE. IF THE PURCHASER FAILS TO OCCUPY THE PROPERTY FOR A MINIMUM 10-YEAR PERIOD, PAYMENT OF PRINCIPAL AND INTEREST IS DUE ON DEMAND.

SCHEDULE A	OTHER INCOME			STATEMENT 10
DESCRIPTION	2005 AMOUNT	2004 AMOUNT	2003 AMOUNT	2002 AMOUNT
OTHER	13,073.	14,796.	5,540.	12,264.
TOTAL TO SCHEDULE A, LINE 22	<u>13,073.</u>	<u>14,796.</u>	<u>5,540.</u>	<u>12,264.</u>

DSNI

Fixed Assets & Depreciation

6/30/2007

PBC

C O S T

Date Acquired	Description	C O S T			D E P R E C I A T I O N			Book Value					
		Opening Balance	Additions	Disposals	Ending Balance	Life	Opening Balance		Additions	Disposals	Ending Balance		
					cf					cf			
FY 1994	VCR	462.00	PY		462.00	7	462.00	-		462.00	-		-
FY 1994	DNI Office	800.00	PY		800.00	7	800.00	-		800.00	-		-
	Office Equipment												
FY 1994		14,325.00	PY		14,325.00	5	14,325.00	-		14,325.00	-		-
FY 1995		23,633.00			23,633.00	5	23,633.00	-		23,633.00	-		-
FY 1997	Computers	40,280.00			40,280.00	5	40,280.00	-		40,280.00	-		-
FY 1998	Computers & software	20,752.00			20,752.00	5	20,752.00	-		20,752.00	-		-
FY 1999	Printer	1,635.00			1,635.00	5	1,635.00	-		1,635.00	-		-
FY 1999	Equipment	3,000.00			3,000.00	5	3,000.00	-		3,000.00	-		-
FY 1999	Software & equipment	3,738.00			3,738.00	5	3,738.00	-		3,738.00	-		-
FY 2000	Computers	8,405.00			8,405.00	5	8,405.00	-		8,405.00	-		-
FY 2002	Computers	19,408.00			19,408.00	5	17,468.20	1,939.80		19,408.00	-		-
FY 2004	Gateway C & C - Plazma TV	2,509.00			2,509.00	5	2,509.00	-		2,509.00	-		-
FY 2004	Epson Pnnter	893.32			893.32	5	372.33	178.66		550.99	-		342.33
8/18/2004	Telephone system	1,724.56			1,724.56	5	689.82	344.91		1,034.73	-		689.83
	Total furniture/fixtures & equipment	141,564.88			141,564.88		138,069.35	2,463.38		140,532.73			1,032.15

Computer & Software

Date Acquired	Description	C O S T			D E P R E C I A T I O N			Book Value					
		Opening Balance	Additions	Disposals	Ending Balance	Life	Opening Balance		Additions	Disposals	Ending Balance		
					cf					cf			
FY 2004	Gateway computer - Desktop & server	12,350.00	PY		12,350.00	5	6,792.00	2,470.00		9,262.00	-		3,088.00
FY 2004	Aegis firewall & installation	1,947.61			1,947.61	5	1,071.04	389.52		1,460.57	-		487.04
FY 2004	Quill Corp computer & related	1,282.00			1,282.00	5	599.09	256.40		855.49	-		426.51
7/15/2004	Community hot spots	7,500.00			7,500.00	3	5,000.00	2,500.00		7,500.00	-		-
1/26/2005	Computers (CTC restr grant)	4,995.77			4,995.77	3	3,330.52	1,665.25		4,995.77	-		-
	Total computer & software	28,075.38			28,075.38		16,792.65	7,281.18		24,073.83			4,001.55

Grand total

		169,640.26			169,640.26		154,862.00	9,744.55		164,606.55			5,033.71
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DSNI BOARD OF DIRECTORS LIST 2005-2007 (as of 9/6/05)

NAME	ADDRESS
Keila Barros	54 E Cottage St Dorchester 02125
Titciana Barros	54 E. Cottage St. Dorchester, MA 02125
Maria Bonano St. Patrick's Church	58 Crispus Attucks Place Roxbury, MA 02119
Paul Bothwell	4 Woodville Terrace Roxbury 02119
Brad Cooper	68 Monadnock St. Dorchester, MA 02125
Laura DaCosta	15 North Ave Roxbury, MA 02119
Alino Do Canto	8 Folsom St. Dorchester, MA 02125
Jose Fidalgo Fidalgo Travel	517 Dudley St. Roxbury, MA -2119
Joceline Fidalgo	25 E. Cottage St Dorchester, MA 02125
Catherine Flannery	129 Brook Ave. Dorchester, MA 02125
Tito Fuster	25 Monadnock St Dorchester 02125
Theresa Glynn	65 Clifton St Dorchester 02125
Denise Gonsalves Cape Verdean Community UNIDO	492 Dudley St. Roxbury, 02119
Stephen Hanley W.A.I.T.T House	117 Mt Pleasant Ave Roxbury 02119
Anita Henderson	87 Burrell St Roxbury, MA 02119
Carlos Henriquez	20 Judson St Dorchester, MA 02125
Júlio Henriquez	20 Judson St Dorchester 02125
David Hinton Vine St. Community Center	339 Dudley St. Roxbury, 02119
Andrea Kaiser Bird St. Community Center	500 Columbia Rd Dorchester 02125
Sr Margaret Leonard & Rosa Project Hope	45 Magnolia St Dorchester 02125
Benito Martínez La Alianza Hispana	409 Dudley St Roxbury 02119
Elizabeth Miranda	27 Clifton Street Dorchester, MA 02125
Kevin Monteiro	22 Clarence St. Apt. 3 Roxbury, MA 02119
Mark Norton Dorchester Bay EDC	594 Columbia Rd. Dorchester, 02125
Gino Teixeira Ideal Sub Shop	522 Dudley St Roxbury 02119

2005 DSNI Board of Directors

Sharen Thompson	17 Sayward St. Dorchester 02125
Ron Verna	16 Sayward St. Dorchester, 02125
Kay Williams	80 Blue Hill Ave., #4 Roxbury, MA 02119

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ▶
 - If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

Section 501(c) corporations required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ▶

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for section 501(c) corporations required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Type or print	Name of Exempt Organization DUDLEY STREET NEIGHBORHOOD INITIATIVE, INC.	Employer identification number 04-2859066
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. 504 DUDLEY ST.	
	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):

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- The books are in the care of ▶ **JOHN BARROS - EXECUTIVE DIRECTOR**
 Telephone No. ▶ **617-442-9670** FAX No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box ▶
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ▶ . If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a section 501(c) corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2008**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year _____ or
 ▶ tax year beginning **JUL 1, 2006**, and ending **JUN 30, 2007**.

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

3a 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.	3a	\$	
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	
c Balance Due. Subtract line 3b from line 3a. 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.	3c	\$	N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.