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Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)	OMB No 1545-0047 2012 Open to Public Inspection
	The organization may have to use a copy of this return to satisfy state reporting requirements	

A For the 2012 calendar year, or tax year beginning 01-01-2012 , 2012, and ending 12-31-2012

B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C Name of organization DORCHESTER BAY ECON DEVELOPMENT CORP		D Employer identification number 04-2681632
	Doing Business As		
	Number and street (or P O box if mail is not delivered to street address) 594 COLUMBIA ROAD	Room/suite	E Telephone number (617) 825-4200
	City or town, state or country, and ZIP + 4 DORCHESTER, MA 02125		G Gross receipts \$ 4,876,735
	F Name and address of principal officer JEANNE DUBOIS 594 COLUMBIA ROAD DORCHESTER, MA 02125		H(a) Is this a group return for affiliates? ☐ Yes ☒ No H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) H(c) Group exemption number ▶
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527			
J Website: ▶ WWW.DBEDC.ORG			

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities DORCHESTER BAY ECONOMIC DEVELOPMENT CORPORATION ACTS TO BUILD A STRONG, THRIVING, AND DIVERSE COMMUNITY IN BOSTON'S DORCHESTER NEIGHBORHOODS. WORKING CLOSELY WITH NEIGHBORHOODS, RESIDENTS, BUSINESSES AND PARTNERS, WE ACCESS RESOURCES TO -DEVELOP AND PRESERVE HOME OWNERSHIP AND RENTAL HOUSING ACROSS INCOME LEVELS-CREATE AND SUSTAIN ECONOMIC DEVELOPMENT OPPORTUNITIES FOR BUSINESSES AND INDIVIDUALS-BUILD COMMUNITY THROUGH ORGANIZING, CIVIC ENGAGEMENTS, AND LEADERSHIP DEVELOPMENT		
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	15
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	15
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	25
	6 Total number of volunteers (estimate if necessary)	6	0
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	-76,610
	b Net unrelated business taxable income from Form 990-T, line 34	7b	-76,610
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	765,351	1,458,965
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	811,559	2,181,461
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	-52,520
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	154,436	-34,092
		1,731,346	3,553,814
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	465,227	264,954
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	766,590	1,569,043
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) <u>187,289</u>		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,026,990	1,143,388
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	2,258,807	2,977,385
	19 Revenue less expenses Subtract line 18 from line 12	-527,461	576,429
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	18,825,262	20,480,935
	21 Total liabilities (Part X, line 26)	15,376,645	19,719,711
	22 Net assets or fund balances Subtract line 21 from line 20	3,448,617	761,224

Part II Signature Block

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

Sign Here	*****			2013-11-14	
	Signature of officer			Date	
Paid Preparer Use Only	JEANNE DUBOIS EXECUTIVE DIRECTOR				
	Type or print name and title				
	Print/Type preparer's name DAVID J KELLEHER CPA		Preparer's signature		Date 2013-11-14
	Firm's name ▶ ALEXANDER ARONSON FINNING & CO PC		Firm's EIN ▶ 04-2571780		
	Firm's address ▶ 21 EAST MAIN STREET WESTBORO, MA 01581			Phone no (508) 366-9100	

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

☐

☒

1

Briefly describe the organization’s mission

DORCHESTER BAY ECONOMIC DEVELOPMENT CORPORATION ACTS TO BUILD A STRONG, THRIVING, AND DIVERSE COMMUNITY IN BOSTON'S NORTH DORCHESTER NEIGHBORHOODS WORKING CLOSELY WITH NEIGHBORHOOD RESIDENTS AND PARTNERS, WE ACCESS RESOURCES TO -DEVELOP AND PRESERVE AFFORDABLE HOME OWNERSHIP AND RENTAL HOUSING,-CREATE AND SUSTAIN COMMERCIAL AND ECONOMIC DEVELOPMENT OPPORTUNITIES, AND-BUILD COMMUNITY POWER THROUGH ORGANIZING AND LEADERSHIP DEVELOPMENT

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If “Yes,” describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If “Yes,” describe these changes on Schedule O

4

Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a	(Code) (Expenses \$ 1,210,386 including grants of \$ 264,954) (Revenue \$ 370,103)
	COMMUNITY SERVICES
4b	(Code) (Expenses \$ 693,409 including grants of \$) (Revenue \$ 1,367,663)
	PROJECT DEVELOPMENT
4c	(Code) (Expenses \$ 0 including grants of \$) (Revenue \$)
	LOAN PROGRAMS
	(Code) (Expenses \$ 70,624 including grants of \$) (Revenue \$ 452,171)
	ASSET MANAGEMENT

4d

Other program services (Describe in Schedule O)

(Expenses \$ 70,624 including grants of \$) (Revenue \$ 452,171)

4e

Total program service expenses

1,974,419

Part IV

Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9 Yes	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c Yes	
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d Yes	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	18 Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).		No
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	Yes	
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		No
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		No
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8829?		No
7d	If "Yes," indicate the number of Forms 8829 filed during the year.		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12.		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter		
11a	Gross income from members or shareholders.		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		
13c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	15	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent	15	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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

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

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	MA
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☐ Own website ☒ Another's website ☒ Upon request ☐ Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	DORCHESTER BAY EDC 594 COLUMBIA ROAD DORCHESTER, MA (617) 825-4200

Part VII

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

List all of the organization's **current** key employees, if any See instructions for definition of "key employee "

List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MARIA ANDRADE BOARD MEMBER	30	X						0	0	0
(2) BETSY DRINAN BOARD MEMBER	30	X						0	0	0
(3) EILEEN KENNER BOARD MEMBER	30	X						0	0	0
(4) RICHARD OLSON JR BOARD MEMBER	30	X						0	0	0
(5) WARREN BACON VICE PRESIDENT	30	X		X				0	0	0
(6) AN DUONG BOARD MEMBER	30	X						0	0	0
(7) CHRISTINE GREEN BOARD MEMBER	30	X						0	0	0
(8) ROSALYN JOHNSON BOARD MEMBER	30	X						0	0	0
(9) PHILIP HILLMAN CLERK	30	X		X				0	0	0
(10) ELRETTE MARION VICE PRESIDENT	30	X		X				0	0	0
(11) DON WALSH TREASURER	30	X		X				0	0	0
(12) PAUL BLACK BOARD MEMBER	30	X						0	0	0
(13) BRIAN BIGLER VICE PRESIDENT	30	X		X				0	0	0
(14) DARYL WRIGHT PRESIDENT	30	X		X				0	0	0
(15) SHERINA HENDRIX VICE PRESIDENT	30	X		X				0	0	0
(16) CHARLES MCVEA DIRECTOR OF FINANCE	12 60			X				90,951	0	4,548
(17) JEANNE A DUBOIS EXECUTIVE DIR	12 60			X				120,000	0	16,698

Part VII

1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	210,951	0	21,246

2 Total number of individuals (including but not limited to those l
\$100,000 of reportable compensation from the organization▶1

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
LOCAL INITIATIVES SUPPORT CORP 95 BERKELEY ST BOSTON MA 02116	REAL ESTATE DEVELOPMENT FINANCING	381,269
MASS HOUSING INVESTMENT CORPOR 70 FEDERAL ST 6TH FLOOR BOSTON MA 02110	REAL ESTATE DEVELOPMENT FINANCING	203,889

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

Part VIII

Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514			
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a	139,781						
	b	Membership dues	1b							
	c	Fundraising events	1c	126,243						
	d	Related organizations	1d							
	e	Government grants (contributions)	1e	114,621						
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	1,078,320						
	g	Noncash contributions included in lines 1a-1f \$								
	h	Total. Add lines 1a-1f						1,458,965		
Program Service Revenue			Business Code							
			2a RESIDENT SERVICE FEES					531390	991,903	991,903
			b PROJECT FEES					531390	802,644	802,644
			c RECOVERY OF NOTES RECEIVABLE					531390	316,863	316,863
			d RENTAL INCOME					531390	39,389	39,389
			e INTEREST INCOME ON NOTES RECEIVAB					531390	30,662	30,662
			f All other program service revenue							
			g	Total. Add lines 2a-2f				2,181,461		
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		588			588			
	4	Income from investment of tax-exempt bond proceeds								
	5	Royalties								
	6a	(i) Real								
		1,144,589								
		(ii) Personal								
		1,188,633								
	b	Less rental expenses		-44,044	41,676	-85,720				
	c	Rental income or (loss)								
	-44,044									
	d	Net rental income or (loss)		-44,044	41,676	-85,720				
	7a	(i) Securities								
		(ii) Other								
		62,114								
		115,222								
	b	Less cost or other basis and sales expenses		-53,108	-53,108					
	c	Gain or (loss)								
	-53,108									
	d	Net gain or (loss)		-53,108	-53,108					
	8a	Gross income from fundraising events (not including \$ 126,243 of contributions reported on line 1c) See Part IV, line 18								
	a	0								
	b	Less direct expenses								
	c	Net income or (loss) from fundraising events		-19,066			-19,066			
	9a	Gross income from gaming activities See Part IV, line 19								
	a									
	b	Less direct expenses								
c	Net income or (loss) from gaming activities									
10a	Gross sales of inventory, less returns and allowances									
a										
b	Less cost of goods sold									
c	Net income or (loss) from sales of inventory									
Miscellaneous Revenue			Business Code							
11a	GAIN ON ASSUMPTION OF NOTES PAYAB		900099	19,908	19,908					
b	SHARE OF GAIN OF PIERCE INCOME		900099	9,110		9,110				
c										
d	All other revenue									
e	Total. Add lines 11a-11d			29,018						
12	Total revenue. See Instructions			3,553,814	2,189,937	-76,610	-18,478			

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response to any question in this Part IX

☒

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.	264,954	264,954		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	232,197	79,285	140,609	12,303
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7	Other salaries and wages.	1,029,621	633,977	266,018	129,626
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	61,152	38,823	15,699	6,630
9	Other employee benefits.	121,944	67,684	39,135	15,125
10	Payroll taxes.	124,129	69,714	40,428	13,987
11	Fees for services (non-employees):				
a	Management.				
b	Legal.	6,085		6,085	
c	Accounting.	71,499		71,499	
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	625,620	412,216	211,789	1,615
12	Advertising and promotion.	3,500	3,500		
13	Office expenses.	145,295	16,285	128,865	145
14	Information technology.				
15	Royalties.				
16	Occupancy.	68,995	38,570	23,678	6,747
17	Travel.	3,477	284	3,166	27
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	36,314	19,325	16,989	
20	Interest.	42,976		42,976	
21	Payments to affiliates.	293,148	293,148		
22	Depreciation, depletion, and amortization.	6,802	6,802		
23	Insurance.				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a	BAD DEBT	82,790		82,790	
b	PROGRAM COSTS	23,760	23,760		
c	MISCELLANEOUS	13,699	4,183	9,516	0
d	PARKING	4,158	1,909	2,058	191
e	All other expenses	-284,730		-285,623	893
25	Total functional expenses. Add lines 1 through 24e.	2,977,385	1,974,419	815,677	187,289
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

Check if Schedule O contains a response to any question in this Part X

☐

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		454,135	1	440,405
	2	Savings and temporary cash investments		261,713	2	160,883
	3	Pledges and grants receivable, net		874,477	3	796,048
	4	Accounts receivable, net		14,214	4	7,591
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		6,181	9	23,471
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a1,801,060			
	b	Less accumulated depreciation	10b589,930	11,058,787	10c	1,211,130
	11	Investments—publicly traded securities			11	
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11		1,530,467	13	676,460
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		4,625,288	15	17,164,947
	16	Total assets. Add lines 1 through 15 (must equal line 34)		18,825,262	16	20,480,935
Liabilities	17	Accounts payable and accrued expenses		943,330	17	1,257,971
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		49,357	21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties		13,689,842	23	17,149,245
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		694,116	25	1,312,495
	26	Total liabilities. Add lines 17 through 25		15,376,645	26	19,719,711
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		2,454,088	27	-64,110
	28	Temporarily restricted net assets		994,529	28	825,334
	29	Permanently restricted net assets			29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		3,448,617	33	761,224
	34	Total liabilities and net assets/fund balances		18,825,262	34	20,480,935

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,553,814
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,977,385
3	Revenue less expenses Subtract line 2 from line 1	3	576,429
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,448,617
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-3,263,822
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	761,224

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

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

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization DORCHESTER BAY ECON DEVELOPMENT CORP	Employer identification number 04-2681632
--	--

Part I

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

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

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33¹/₃% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33¹/₃% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11

☐

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

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Non-functionally integrated
- e

☐

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

☐

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

☐

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

(i)

A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii)

A family member of a person described in (i) above?

(iii)

A 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)
- | | Yes | No |
|----------|-----|----|
| 11g(i) | | |
| 11g(ii) | | |
| 11g(iii) | | |
- | (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions)) | (iv) Is the organization in col (i) listed in your governing document? | | (v) Did you notify the organization in col (i) of your support? | | (vi) Is the organization in col (i) organized in the U S ? | | (vii) Amount of monetary support |
|------------------------------------|----------|--|--|----|---|----|--|----|----------------------------------|
| | | | Yes | No | Yes | No | Yes | No | |
| | | | | | | | | | |
| | | | | | | | | | |
| Total | | | | | | | | | |
- For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990EZ.

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2012

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	2,506,036	2,113,585	958,175	765,351	1,458,965	7,802,112
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	2,506,036	2,113,585	958,175	765,351	1,458,965	7,802,112
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,833,580
6 Public support. Subtract line 5 from line 4						5,968,532

Section B. Total Support							
Calendar year (or fiscal year beginning in) ▶		(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	2,506,036	2,113,585	958,175	765,351	1,458,965	7,802,112
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	7,410	286	657		588	8,941
9	Net income from unrelated business activities, whether or not the business is regularly carried on	-17,291	-74,485	-63,924	-14,044	-76,610	-246,354
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support (Add lines 7 through 10)						7,564,699
12	Gross receipts from related activities, etc (see instructions)					12	8,382,395
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage			
14	Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	78 900 %
15	Public support percentage for 2011 Schedule A, Part II, line 14	15	76 560 %
16a	33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
b	33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
17a	10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization		
b	10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization		
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		

Part IIISupport Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage			
15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15		
16 Public support percentage from 2011 Schedule A, Part III, line 15	16		

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17		
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18		
19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶			
b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶			
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶			

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization DORCHESTER BAY ECON DEVELOPMENT CORP	Employer identification number 04-2681632
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Part I

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

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes☐ No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes☐ No	

Part II

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

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)☐ Preservation of an historically important land area☐ Protection of natural habitat☐ Preservation of a certified historic structure☐ Preservation of open space

2

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

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

3

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

4

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

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes☐ No

6

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

7

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

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes☐ No

9

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

Part III

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

1a

If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

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

▶\$ _____

(ii) Assets included in Form 990, Part X

▶\$ _____

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a

Revenues included in Form 990, Part VIII, line 1

▶\$ _____

b

Assets included in Form 990, Part X

▶\$ _____

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

Cat No 52283D

Schedule D (Form 990) 2012

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

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☒ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☒ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☒

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

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

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Temporarily restricted endowment ▶

The percentages in lines 2a, 2b, and 2c should equal 100%

3a

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

(i)

unrelated organizations

3a(i)

Yes	No

(ii)

related organizations

3a(ii)

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

4

Describe in Part XIII the intended uses of the organization's endowment funds

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		1,338,762	167,345	1,171,417
c Leasehold improvements		146,431	142,010	4,421
d Equipment		315,867	280,575	35,292
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				1,211,130

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return					
1	Total revenue, gains, and other support per audited financial statements			1	3,533,409
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			2e	0
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines 2a through 2d			2e	0
3	Subtract line 2e from line 1			3	3,533,409
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			4c	20,405
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b	20,405		
c	Add lines 4a and 4b				
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)			5	3,553,814
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return					
1	Total expenses and losses per audited financial statements			1	2,996,451
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			2e	19,066
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d	19,066		
e	Add lines 2a through 2d			2e	19,066
3	Subtract line 2e from line 1			3	2,977,385
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :			4c	0
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines 4a and 4b				
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)			5	2,977,385

Part XIII Supplemental Information

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

Identifier	Return Reference	Explanation
	PART IV, LINE 2B	DBEDC AND AFFILIATES MAINTAIN CASH ACCOUNTS AS A FISCAL AGENT ON BEHALF OF SEVERAL NEIGHBORHOOD GROUPS. THEY ALSO HOLD SECURITY DEPOSITS FOR TENANTS AT 65 BAY STREET AND THE PIERCE BUILDING, AS WELL AS FUNDS AS ESCROW AGENT FOR BORROWERS OF ITS LOAN PROGRAMS.
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	DBEDC FOLLOWS THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES STANDARD, WHICH REQUIRES DBEDC TO REPORT UNCERTAIN TAX POSITIONS, RELATED INTEREST AND PENALTIES, AND TO ADJUST UNRECOGNIZED TAX BENEFITS AND ACCRUED INTEREST AND PENALTIES ACCORDINGLY. AS OF DECEMBER 31, 2012, DBEDC DETERMINED THAT THERE ARE NO MATERIAL UNRECOGNIZED TAX BENEFITS TO REPORT. DBEDC DOES NOT EXPECT THAT THE AMOUNTS OF UNRECOGNIZED TAX BENEFITS WILL CHANGE SIGNIFICANTLY WITHIN THE NEXT TWELVE MONTHS. DBEDC FILES TAX RETURNS IN FEDERAL AND MASSACHUSETTS JURISDICTIONS. THOSE RETURNS ARE GENERALLY SUBJECT TO EXAMINATION FOR THREE YEARS FROM THE DATE FILED.
PART XI, LINE 4B - OTHER ADJUSTMENTS		PIERCE RENTAL INCOME 39,471. DIRECT FUNDRAISING EXPENSE -19,066.
PART XII, LINE 2D - OTHER ADJUSTMENTS		DIRECT FUNDRAISING EXPENSE 19,066.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		ANNUAL EVENT (event type)	(event type)	(total number)	(add col (a) through col (c))
Revenue	1	Gross receipts	126,243		126,243
	2	Less Contributions . . .	126,243		126,243
	3	Gross income (line 1 minus line 2)			
Direct Expenses	4	Cash prizes			
	5	Noncash prizes . . .			
	6	Rent/facility costs . . .	2,455		2,455
	7	Food and beverages .	258		258
	8	Entertainment	1,500		1,500
	9	Other direct expenses .	14,853		14,853
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			
	11	Net income summary Combine line 3, column (d), and line 10 ▶			
					(19,066)
					-19,066

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1	Gross revenue			
	2	Cash prizes			
	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses . . .			
Direct Expenses	6	Volunteer labor			
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶			
	8	Net gaming income summary Combine lines 1 and 7 in column (d) ▶			

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in

a The organization's facility	13a	
b An outside facility	13b	

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name 

Address 

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization  \$ _____ and the amount of gaming revenue retained by the third party  \$ _____

c If "Yes," enter name and address of the third party

Name 

Address 

16 Gaming manager information

Name 

Gaming manager compensation  \$

Description of services provided 

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year  \$ _____

Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	Return Reference	Explanation
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Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
DORCHESTER BAY ECON DEVELOPMENT CORP

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

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990

OMB No 1545-0047

2012

Open to Public
Inspection

Employer identification number
04-2681632

Part I General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2

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

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) CODMAN SQUARE NEIGHBORHOOD DEVELOPMENT CORPORATION 587 WASHINGTON STREET DORCHESTER,MA 02124	04-2752507	501(C)(3)	138,759				LOW INCOME HOUSING ASSISTANCE
(2) SOUTHWEST BOSTON COMMUNITY DEVELOPMENT CORPORATION 11 FAIRMOUNT AVE SUITE 101 HYDE PARK,MA 02136	04-3562853	501(C)(3)	126,195				LOW INCOME HOUSING ASSISTANCE

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

2

3

Enter total number of other organizations listed in the line 1 table

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

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

Part IV

Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
		DORCHESTER BAY EDC ACTS AS THE LEAD AGENT FOR THE FAIRMOUNT COLLABORATIVE, WHICH IS A COLLABORATIVE OF THREE COMMUNITY DEVELOPMENT CORPORATIONS (CDC'S) ALONG THE FAIRMOUNT COMMUTER RAIL CORRIDOR THE THREE CDC'S ARE RAISING FUNDS TOGETHER TO ACQUIRE SITES AND PROMOTE A TRANSIT ORIENTED DEVELOPMENT AGENDA WITH NEW AFFORDABLE HOUSING AND ECONOMIC DEVELOPMENT OPPORTUNITIES THE CDC'S RAISE FUNDS TOGETHER AND DIVIDE THE FUNDS BASED ON GRANT AGREEMENTS GRANTS RECEIVED BY DORCHESTER BAY EDC FOR THE COLLABORATIVE ARE PAID TO THE THREE OTHER CDC'S AND REPORTED AS GRANTS AND SIMILAR AMOUNTS PAID

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization

DORCHESTER BAY ECON DEVELOPMENT CORP

Employer identification number

04-2681632

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE 990 WILL BE DISTRIBUTED TO THE GOVERNING BODY FOR REVIEW AND QUESTIONS
	FORM 990, PART VI, SECTION B, LINE 12C	THE BOARD OF DIRECTORS APPROVED A REVISED CONFLICT OF INTEREST POLICY AT THE JUNE, 2010 BOARD MEETING INCLUDING PROCEDURES TO MONITOR COMPLIANCE WITH THE POLICY
		FORM 990, PART VI, SECTION B, LINE 15 THE BOARD IS CURRENTLY DEVELOPING A PERFORMANCE REVIEW PROCESS THAT WILL INCLUDE A PROCESS FOR DETERMINING COMPENSATION AND ENSURING CONTEMPORANEOUS SUBSTATION OF THE DELIBERATION AND DECISION
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST STATEMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST
OTHER FEES	FORM 990, PART IX, LINE 11G	FAIRMOUNT CONSULTING FEES 244,789 PROGRAM SERVICE EXPENSES 244,789 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 244,789 PAYROLL PROCESSING FEES PROGRAM SERVICE EXPENSES 50,490 MANAGEMENT AND GENERAL EXPENSES 26,529 FUNDRAISING EXPENSES 1,615 TOTAL EXPENSES 78,634 CONSULTING PROGRAM SERVICE EXPENSES 46,541 MANAGEMENT AND GENERAL EXPENSES 24,454 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 70,995 OUTSIDE SERVICES PROGRAM SERVICE EXPENSES 26,071 MANAGEMENT AND GENERAL EXPENSES 13,699 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 39,770 OTHER PROGRAM SERVICE EXPENSES 44,325 MANAGEMENT AND GENERAL EXPENSES 147,107 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 191,432
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	LOSS ON IMPAIRMENT -3,224,351 PIERCE K-1 INCOME ON 990 THAT IS NOT ON FINANCIAL STATEMENTS - 39,471
	FORM 990, PARTXII, LINE 2C	THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR

SCHEDULE R
(Form 990)

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
DORCHESTER BAY ECON DEVELOPMENT CORP

Employer identification number
04-2681632

Part I

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) DB 555 DUDLEY STREET LLC 594 COLUMBIA ROAD DORCHESTER, MA 02125 26-0598856	MIXED USE HOUSING PROJECT	MA	194,126	4,922,056	DORCHESTER BAY ECONOMIC DEVELOPMENT CORPORATION
(2) 65 BAY STREET LLC 594 COLUMBIA ROAD DORCHESTER, MA 02125 04-3562858	COMMERCIAL REAL ESTATE	MA	1,133,862	7,282,545	DORCHESTER BAY ECONOMIC DEVELOPMENT CORPORATION
(3) DB NEIGHBORHOOD HOMES LLC 594 COLUMBIA ROAD DORCHESTER, MA 02125 26-3917979	LOW-INCOME HOUSING DEVELOPMENT	MA	0	4,705,036	DORCHESTER BAY ECONOMIC DEVELOPMENT CORPORATION

Part II

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) DORCHESTER BAY NEIGHBORHOOD LOAN FUND INC 594 COLUMBIA ROAD DORCHESTER, MA 02125 04-3473587	LENDING SERVICES FOR LOW-INCOME PROJECTS	MA	501(C)(3)	7	DORCHESTER BAY ECONOMIC DEVELOPMENT CORPORATION		No
(2) DB HOUSING INC 594 COLUMBIA ROAD DORCHESTER, MA 02125 22-3042334	LOW-INCOME HOUSING DEVELOPMENT	MA	501(C)(3)	7	DORCHESTER BAY ECONOMIC DEVELOPMENT CORPORATION		No

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
See Additional Data Table												

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
See Additional Data Table									

Part V

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

Yes

No

1a Yes

1b Yes

1c

1d Yes

1e

1f

1g

1h

1i

1j

1k Yes

1l Yes

1m

1n

1o

1p

1q

1r

1s

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
See Additional Data Table			

Schedule R (Form 990) 2012

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

[illegible]

Part VII **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation
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Software ID:

Software Version:

EIN: 04-2681632

Name: DORCHESTER BAY ECON DEVELOPMENT CORP

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end- of-year assets	(h) Disproprrtionate allocations?		(i) Code V-UBI amount on Box 20 of K-1	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
DUDLEY VILLAGE NORTH COMMERCIAL LLC 594 COLUMBIA ROAD DORCHESTER, MA 02125 20-5229416	COMMERCIAL REAL ESTATE	MA	N/A	RELATED	-9,087	851,896		No		Yes		51 000 %
PIERCE PROPERTIES LIMITED PARTNERSHIP 594 COLUMBIA ROAD DORCHESTER, MA 02125 04-2816598	MIXED RESIDENTIAL- COMMERCIAL PROPERTY	MA	DORCHESTER BAY ECONOMIC DEVELOPMENT CORP	RELATED	104,792	883,719		No			No	99 000 %
GLENDALE ASSOCIATES LIMITED PARTNERSHIP 594 COLUMBIA ROAD DORCHESTER, MA 02125 04-3052070	RESIDENTIAL REAL ESTATE	MA	GLENDALE PROPERTIES INC	RELATED	-8,022	10,447,188		No			No	99 000 %
CEYLON FIELD LP 594 COLUMBIA ROAD DORCHESTER, MA 02125 04-3338410	RESIDENTIAL REAL ESTATE	MA	CEYLON FIELD INC	RELATED				No			No	
WILDER GARDENS LP 594 COLUMBIA ROAD DORCHESTER, MA 02125 04-3398950	RESIDENTIAL REAL ESTATE	MA	WILDER GARDENS INC	RELATED				No			No	
DB UPHAMS LP 594 COLUMBIA ROAD DORCHESTER, MA 02125 04-3299282	RESIDENTIAL REAL ESTATE	MA	DB UPHAMS INC	RELATED				No			No	99 000 %
150 MAGNOLIA LLC 594 COLUMBIA ROAD DORCHESTER, MA 02125 04-3484374	RESIDENTIAL REAL ESTATE	MA	150 MAGNOLIA CORP	RELATED				No			No	
DUDLEY TERRACE LP 594 COLUMBIA ROAD DORCHESTER, MA 02125 04-3485471	RESIDENTIAL REAL ESTATE	MA	DUDLEY TERRACE INC	RELATED				No			No	
BRUNSWICK HOLBORN LP 594 COLUMBIA ROAD DORCHESTER, MA 02125 20-3067463	RESIDENTIAL REAL ESTATE	MA	BRUNSWICK HOLBORN HOUSING INC	RELATED				No			No	
COLUMBIA WOOD LP 594 COLUMBIA ROAD DORCHESTER, MA 02125 20-3067354	RESIDENTIAL REAL ESTATE	MA	COLUMBIA WOOD HOUSING INC	RELATED				No			No	
COTTAGE BROOK HOUSING LP 594 COLUMBIA ROAD DORCHESTER, MA 02125 04-3154165	RESIDENTIAL REAL ESTATE	MA	DBCB HOUSING INC	RELATED	264,727	7,459,929		No			No	99 000 %
DUDLEY VILLAGE NORTH LP 594 COLUMBIA ROAD DORCHESTER, MA 02125 20-5229824	RESIDENTIAL REAL ESTATE	MA	DV NORTH HOUSING INC	RELATED				No			No	
DUDLEY VILLAGE SOUTH LP 594 COLUMBIA ROAD DORCHESTER, MA 02125 20-5229881	RESIDENTIAL REAL ESTATE	MA	DV SOUTH HOUSING INC	RELATED				No			No	
MATTAPAN HOUSING STABILIZATION INITIATIVE LLC 594 COLUMBIA ROAD DORCHESTER, MA 02125 24-1682164	RESIDENTIAL REAL ESTATE	MA	DORCHESTER BAY ECONOMIC DEVELOPMENT CORP	RELATED				No		Yes		51 000 %
GENEVA APARTMENTS LLC 594 COLUMBIA ROAD DORCHESTER, MA 02125 37-1426384	RESIDENTIAL REAL ESTATE	MA	DB HOUSING INC	RELATED	49,614	280,211		No			No	51 000 %

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end- of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount on Box 20 of K-1	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
QUINCY HEIGHTS LIMITED PARTNERSHIP 594 COLUMBIA ROAD DORCHESTER, MA 02125 26-3912482	RESIDENTIAL REAL ESTATE	MA	QGI HOUSING INC	RELATED				No			No	50 990 %
QUINCY HEIGHTS II LIMITED PARTNERSHIP 594 COLUMBIA ROAD DORCHESTER, MA 02125 27-4257459	RESIDENTIAL REAL ESTATE	MA	QGII HOUSING INC	RELATED				No			No	50 990 %

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
GLENDALE PROPERTIES INC 594 COLUMBIA ROAD DORCHESTER, MA 02125 04-2960667	PROJECT DEVELOPMENT	MA	DORCHESTER BAY EDC	C	-1,437	15,690	100 000 %	Yes	
DBC B HOUSING INC 594 COLUMBIA ROAD DORCHESTER, MA 02125 04-3154374	PROJECT DEVELOPMENT	MA	DORCHESTER BAY EDC	C	-364	107,147	100 000 %	Yes	
DB UPHAMS INC 594 COLUMBIA ROAD DORCHESTER, MA 02125 04-3292805	PROJECT DEVELOPMENT	MA	DORCHESTER BAY EDC	C	-3,238		79 000 %	Yes	
CEYLON FIELD INC 594 COLUMBIA ROAD DORCHESTER, MA 02125 04-3334774	PROJECT DEVELOPMENT	MA	DORCHESTER BAY EDC	C	-1,397	182,034	79 000 %	Yes	
WILDER GARDENS INC 594 COLUMBIA ROAD DORCHESTER, MA 02125 04-3398787	PROJECT DEVELOPMENT	MA	DORCHESTER BAY EDC	C	-1,655	296,947	79 000 %	Yes	
BRUNSWICK HOLBORN HOUSING INC 594 COLUMBIA ROAD DORCHESTER, MA 02125 90-0191849	PROJECT DEVELOPMENT	MA	DORCHESTER BAY EDC	C	-1,400		51 000 %	Yes	
COLUMBIA WOOD HOUSING INC 594 COLUMBIA ROAD DORCHESTER, MA 02125 90-0191847	PROJECT DEVELOPMENT	MA	DORCHESTER BAY EDC	C	-1,402		51 000 %	Yes	
150 MAGNOLIA CORP 594 COLUMBIA ROAD DORCHESTER, MA 02125 04-3484373	PROJECT DEVELOPMENT	MA	DORCHESTER BAY EDC	C	-1,395		49 000 %	Yes	
DUDLEY TERRACE INC 594 COLUMBIA ROAD DORCHESTER, MA 02125 04-3486158	PROJECT DEVELOPMENT	MA	DORCHESTER BAY EDC	C	-1,421		75 000 %	Yes	
DV NORTH HOUSING INC 594 COLUMBIA ROAD DORCHESTER, MA 02125 20-5229648	PROJECT DEVELOPMENT	MA	DORCHESTER BAY EDC	C	-1,398		79 000 %	Yes	
DV SOUTH HOUSING INC 594 COLUMBIA ROAD DORCHESTER, MA 02125 20-5229749	PROJECT DEVELOPMENT	MA	DORCHESTER BAY EDC	C	-1,412		79 000 %	Yes	
SISTER CLARA MUHAMMED COOPERATIVE CORP 594 COLUMBIA ROAD DORCHESTER, MA 02125 51-0444516	PROJECT DEVELOPMENT	MA	DORCHESTER BAY EDC	C			51 000 %	Yes	
QHI HOUSING INC 594 COLUMBIA ROAD DORCHESTER, MA 02125 26-3931153	PROJECT DEVELOPMENT	MA	DORCHESTER BAY EDC	C	-1,356		51 000 %	Yes	
QHII HOUSING INC 594 COLUMBIA ROAD DORCHESTER, MA 02125 27-4267346	PROJECT DEVELOPMENT	MA	DORCHESTER BAY EDC	C	-1,356		51 000 %	Yes	

--> **Form 990, Schedule R, Part V - Transactions With Related Organizations**

(a) Name of other organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
GLENDAL ASSOCIATES LP	L	130,311	FAIR VALUE
DB NEIGHBORHOOD HOMES LLC	L	314,152	FAIR VALUE
QUINCY HEIGHTS LP	L	375,565	FAIR VALUE
DB 555 DUDLEY STREET LLC	L	112,927	FAIR VALUE
CEYLON FIELD LP	L	178,948	FAIR VALUE
BOWDOIN GENEVA III LLC	L	9,600	FAIR VALUE
DORCHESTER BAY NEIGHBORHOOD LOAN FUND	L	241,142	FAIR VALUE
DORCHESTER BAY NEIGHBORHOOD LOAN FUND	B	185,056	FAIR VALUE
DB HOUSING INC	B	108,092	FAIR VALUE