

# Return of Organization Exempt From Income Tax

OMB No. 1545-0047

**2011**

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**

Department of the Treasury  
Internal Revenue Service

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

**A For the 2011 calendar year, or tax year beginning** January 1, 2011, **and ending** December 31, 2011

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Terminated  
 Amended return  
 Application pending

**C Name of organization** People Making a Difference through Community Service, Inc.  
 Doing Business As \_\_\_\_\_  
 Number and street (or P.O. box if mail is not delivered to street address) \_\_\_\_\_ Room/suite \_\_\_\_\_  
**P.O. Box** 120189  
 City or town, state or country, and ZIP + 4  
**Boston, MA 02112-0189**

**D Employer identification number**  
04-3191846

**E Telephone number**  
781-963-0373

**G Gross receipts \$** 109,227

**F Name and address of principal officer:** Lori Tsuruda  
5 Milton Terrace, Randolph, MA 02368

**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)

**I Tax-exempt status:**  501(c)(3)  501(c) ( ) ◀ (insert no.)  4947(a)(1) or  527

**J Website:** ▶ www.pmd.org

**K Form of organization:**  Corporation  Trust  Association  Other ▶

**L Year of formation:** 1993 **M State of legal domicile:** MA

**H(c) Group exemption number** ▶

**Part I Summary**

|   |  |               |                |
|---|--|---------------|----------------|
| <b>Activities &amp; Governance</b>  | <b>1</b> Briefly describe the organization's mission or most significant activities: <b>PMD promotes informed and responsible volunteerism by engaging individuals in meaningful, hands-on work that meets local needs and by helping other charities and businesses develop successful community involvement programs. In 2011, PMD helped 33 charities by organizing 66 service projects engaging 898 volunteers, as well as trained 271 nonprofit staff and volunteers.</b> |               |                |
|   | <b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.   |               |                |
|   | <b>3</b> Number of voting members of the governing body (Part VI, line 1a)   | <b>3</b>      | <b>6</b>       |
|   | <b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)   | <b>4</b>      | <b>6</b>       |
|   | <b>5</b> Total number of individuals employed in calendar year 2011 (Part V, line 2a)  | <b>5</b>      | <b>1</b>       |
|   | <b>6</b> Total number of volunteers (estimate if necessary)  | <b>6</b>      | <b>898</b>     |
|   | <b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12   | <b>7a</b>     | <b>0</b>       |
| <b>b</b> Net unrelated business taxable income from Form 990-T, line 34             | <b>7b</b>  | <b>0</b>      |                |
| <b>Revenue</b>  | <b>8</b> Contributions and grants (Part VIII, line 1h)   | <b>79,499</b> | <b>85,716</b>  |
|   | <b>9</b> Program service revenue (Part VIII, line 2g)  | <b>5,460</b>  | <b>9,378</b>   |
|   | <b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)  | <b>83</b>     | <b>108</b>     |
|   | <b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)   | <b>12,772</b> | <b>14,025</b>  |
|   | <b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)   | <b>97,814</b> | <b>109,227</b> |
| <b>Expenses</b>   | <b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3)   | <b>0</b>      | <b>0</b>       |
|   | <b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)  | <b>0</b>      | <b>0</b>       |
|   | <b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)  | <b>61,168</b> | <b>61,773</b>  |
|   | <b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)   | <b>0</b>      | <b>0</b>       |
|   | <b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶   | <b>0</b>      | <b>0</b>       |
|   | <b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)   | <b>31,622</b> | <b>32,120</b>  |
| <b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) | <b>92,790</b>  | <b>93,893</b> |                |
| <b>19</b> Revenue less expenses. Subtract line 18 from line 12                      | <b>5,024</b>   | <b>15,334</b> |                |
| <b>Net Assets or Fund Balances</b>  | <b>20</b> Total assets (Part X, line 16)   | <b>44,064</b> | <b>63,640</b>  |
|   | <b>21</b> Total liabilities (Part X, line 26)  | <b>2,703</b>  | <b>6,945</b>   |
|   | <b>22</b> Net assets or fund balances. Subtract line 21 from line 20   | <b>41,361</b> | <b>56,695</b>  |

**Part II Signature Block**

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

**Sign Here**

Signature of officer: Lori Tsuruda Date: 11/15/12  
 Type or print name and title: Lori Tsuruda, President

**Paid Preparer Use Only**

Print/Type preparer's name \_\_\_\_\_ Preparer's signature \_\_\_\_\_ Date \_\_\_\_\_ Check  if self-employed PTIN \_\_\_\_\_  
 Firm's name ▶ \_\_\_\_\_ Firm's EIN ▶ \_\_\_\_\_  
 Firm's address ▶ \_\_\_\_\_ Phone no. \_\_\_\_\_

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  Yes  No

**1** Briefly describe the organization's mission:

PMD seeks to create a world in which people and businesses are socially aware and engaged in their communities such that they approach volunteerism by learning about problems and needs, volunteering their time, providing resources to address these problems and needs, and carrying out these activities dependably, safely, and enjoyably.

**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 and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

**4a** (Code: \_\_\_\_\_) (Expenses \$ 74,820 including grants of \$ \_\_\_\_\_) (Revenue \$ 9,378 )

People Making a Difference (PMD) helped 33 charities and trained 271 nonprofit staff and volunteers in effective volunteer recruitment and management practices. PMD worked with these charities to plan and to complete 66 productive, quality projects involving 898 motivated volunteers. PMD also conducted 19 workshops, classes, and sessions, providing consulting services on volunteer management (described in Schedule O) for leaders/ managers of volunteers.

In 2011, PMD recruited 762 new volunteers who participated in PMD-organized service projects (detailed in Schedule O). Together with 136 PMD volunteers who had participated in prior PMD projects, they gave 3,700 hours to complete needed work in 20 communities. Two-thirds of the charities that PMD assisted had no staff dedicated to working with volunteers or relied on part-time staff, while the remainder received PMD assistance due to seasonal volunteer shortages.

PMD's community service program addressed the following issues: 49% literacy; 18% poverty, hunger, and homelessness; 15% environment and conservation; 12% youth development; and 8% elderly.

**4b** (Code: \_\_\_\_\_) (Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_ )

**4c** (Code: \_\_\_\_\_) (Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_ )

**4d** Other program services (Describe in Schedule O.)  
(Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_ )

**4e** Total program service expenses **▶**

**Part IV Checklist of Required Schedules**

|  | Yes                                 | No                                  |
|--|-------------------------------------|-------------------------------------|
| <b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A . . . . .</i>  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| <b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? . . . . .  | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I . . . . .</i>   | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II . . . . .</i>  | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>5</b> 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? <i>If "Yes," complete Schedule C, Part III . . . . .</i>  | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>6</b> 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? <i>If "Yes," complete Schedule D, Part I . . . . .</i>   | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II . . . . .</i>   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| <b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III . . . . .</i>  | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>9</b> Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV . . . . .</i>  | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V . . . . .</i>  | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>11</b> 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.  |                                     |                                     |
| <b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI . . . . .</i>  | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>b</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? <i>If "Yes," complete Schedule D, Part VII . . . . .</i>  | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>c</b> 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? <i>If "Yes," complete Schedule D, Part VIII . . . . .</i>  | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>d</b> 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? <i>If "Yes," complete Schedule D, Part IX . . . . .</i>   | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X . . . . .</i>  | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>f</b> 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)? <i>If "Yes," complete Schedule D, Part X . . . . .</i>   | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>12 a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII . . . . .</i>   | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional . . . . .</i>   | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E . . . . .</i>   | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>14 a</b> Did the organization maintain an office, employees, or agents outside of the United States? . . . . .  | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>b</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? <i>If "Yes," complete Schedule F, Parts I and IV. . . . .</i> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>15</b> 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? <i>If "Yes," complete Schedule F, Parts II and IV . . . . .</i>   | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>16</b> 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? <i>If "Yes," complete Schedule F, Parts III and IV . . . . .</i>   | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>17</b> 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? <i>If "Yes," complete Schedule G, Part I (see instructions) . . . . .</i>   | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II . . . . .</i>  | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III . . . . .</i>  | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>20 a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H . . . . .</i>   | <input type="checkbox"/>            | <input type="checkbox"/>            |
| <b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . .  | <input type="checkbox"/>            | <input type="checkbox"/>            |

**Part IV Checklist of Required Schedules** *(continued)*

|  | Yes | No |
|--|-----|----|
| <b>21</b> 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> . . . . .   |     | ✓  |
| <b>22</b> 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> . . . . .   |     |    |
| <b>23</b> 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> . . . . .  |     |    |
| <b>24a</b> 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> . . . . .                            |     |    |
| <b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .   |     |    |
| <b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .  |     | ✓  |
| <b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .   |     |    |
| <b>25a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> 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> . . . . .   |     |    |
| <b>b</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> . . . . .  |     |    |
| <b>26</b> Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> . . . . .  |     |    |
| <b>27</b> 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> . . . . . |     |    |
| <b>28</b> 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):  |     |    |
| <b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .  |     |    |
| <b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .   |     |    |
| <b>c</b> 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> . . . . .   |     |    |
| <b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .  |     |    |
| <b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .  |     |    |
| <b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .  |     |    |
| <b>32</b> 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> . . . . .  |     |    |
| <b>33</b> 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> . . . . .  |     |    |
| <b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> . . . . .   |     |    |
| <b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . .   |     |    |
| <b>b</b> 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> . . . . .  |     |    |
| <b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .   |     |    |
| <b>37</b> 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> . . . . .   |     |    |
| <b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .   |     |    |

**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                                  |  |  |
|------------|--|------------|-------------------------------------|--|--|
| <b>1a</b>  | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . . . . .   | <b>1a</b>  | 0                                   |  |  |
| <b>b</b>   | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . .  | <b>1b</b>  |                                     |  |  |
| <b>c</b>   | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .   | <b>1c</b>  | <input checked="" type="checkbox"/> |  |  |
| <b>2a</b>  | 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  | <b>2a</b>  | 1                                   |  |  |
| <b>b</b>   | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . . . . .<br><b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) . . . . .                                 | <b>2b</b>  |                                     |  |  |
| <b>3a</b>  | Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .  | <b>3a</b>  |                                     |  |  |
| <b>b</b>   | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . .   | <b>3b</b>  |                                     |  |  |
| <b>4a</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)? . . . . .                                   | <b>4a</b>  |                                     |  |  |
| <b>b</b>   | If "Yes," enter the name of the foreign country: ▶ _____<br>See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.   |            |                                     |  |  |
| <b>5a</b>  | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .  | <b>5a</b>  |                                     |  |  |
| <b>b</b>   | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . .   | <b>5b</b>  |                                     |  |  |
| <b>c</b>   | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? . . . . .  | <b>5c</b>  |                                     |  |  |
| <b>6a</b>  | 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? . . . . .  | <b>6a</b>  |                                     |  |  |
| <b>b</b>   | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .  | <b>6b</b>  |                                     |  |  |
| <b>7</b>   | <b>Organizations that may receive deductible contributions under section 170(c).</b>   |            |                                     |  |  |
| <b>a</b>   | 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? . . . . .  | <b>7a</b>  |                                     |  |  |
| <b>b</b>   | If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .  | <b>7b</b>  |                                     |  |  |
| <b>c</b>   | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .   | <b>7c</b>  |                                     |  |  |
| <b>d</b>   | If "Yes," indicate the number of Forms 8282 filed during the year . . . . .  | <b>7d</b>  |                                     |  |  |
| <b>e</b>   | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .  | <b>7e</b>  |                                     |  |  |
| <b>f</b>   | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .   | <b>7f</b>  |                                     |  |  |
| <b>g</b>   | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .   | <b>7g</b>  |                                     |  |  |
| <b>h</b>   | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .   | <b>7h</b>  |                                     |  |  |
| <b>8</b>   | <b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . . | <b>8</b>   |                                     |  |  |
| <b>9</b>   | <b>Sponsoring organizations maintaining donor advised funds.</b>   |            |                                     |  |  |
| <b>a</b>   | Did the organization make any taxable distributions under section 4966? . . . . .  | <b>9a</b>  |                                     |  |  |
| <b>b</b>   | Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .   | <b>9b</b>  |                                     |  |  |
| <b>10</b>  | <b>Section 501(c)(7) organizations.</b> Enter:   |            |                                     |  |  |
| <b>a</b>   | Initiation fees and capital contributions included on Part VIII, line 12 . . . . .   | <b>10a</b> |                                     |  |  |
| <b>b</b>   | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . .  | <b>10b</b> |                                     |  |  |
| <b>11</b>  | <b>Section 501(c)(12) organizations.</b> Enter:  |            |                                     |  |  |
| <b>a</b>   | Gross income from members or shareholders . . . . .  | <b>11a</b> |                                     |  |  |
| <b>b</b>   | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . .   | <b>11b</b> |                                     |  |  |
| <b>12a</b> | <b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . .  | <b>12a</b> |                                     |  |  |
| <b>b</b>   | If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . . .  | <b>12b</b> |                                     |  |  |
| <b>13</b>  | <b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>  |            |                                     |  |  |
| <b>a</b>   | Is the organization licensed to issue qualified health plans in more than one state? . . . . .<br><b>Note.</b> See the instructions for additional information the organization must report on Schedule O.   | <b>13a</b> |                                     |  |  |
| <b>b</b>   | 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 . . . . .  | <b>13b</b> |                                     |  |  |
| <b>c</b>   | Enter the amount of reserves on hand . . . . .   | <b>13c</b> |                                     |  |  |
| <b>14a</b> | Did the organization receive any payments for indoor tanning services during the tax year? . . . . .   | <b>14a</b> |                                     |  |  |
| <b>b</b>   | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . . .  | <b>14b</b> |                                     |  |  |

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

**Section A. Governing Body and Management**

|           |  | Yes | No                                  |
|-----------|--|-----|-------------------------------------|
| <b>1a</b> | Enter the number of voting members of the governing body at the end of the tax year . . . . .<br>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>1b</b> | Enter the number of voting members included in line 1a, above, who are independent . . . . .   |     |                                     |
| <b>2</b>  | 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? . . . . .  |     | <input checked="" type="checkbox"/> |
| <b>3</b>  | 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? . . . . .   |     |                                     |
| <b>4</b>  | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?   |     |                                     |
| <b>5</b>  | Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .   |     |                                     |
| <b>6</b>  | Did the organization have members or stockholders? . . . . .   |     |                                     |
| <b>7a</b> | 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? . . . . .   |     |                                     |
| <b>7b</b> | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .  |     |                                     |
| <b>8</b>  | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  |     |                                     |
| <b>8a</b> | The governing body? . . . . .  |     |                                     |
| <b>8b</b> | Each committee with authority to act on behalf of the governing body? . . . . .  |     |                                     |
| <b>9</b>  | 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 . . . . .   |     |                                     |

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

|            |  | Yes | No |
|------------|--|-----|----|
| <b>10a</b> | Did the organization have local chapters, branches, or affiliates? . . . . .   |     |    |
| <b>10b</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?   |     |    |
| <b>11a</b> | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  |     |    |
| <b>11b</b> | Describe in Schedule O the process, if any, used by the organization to review this Form 990.  |     |    |
| <b>12a</b> | Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .  |     |    |
| <b>12b</b> | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  |     |    |
| <b>12c</b> | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done . . . . .   |     |    |
| <b>13</b>  | Did the organization have a written whistleblower policy? . . . . .  |     |    |
| <b>14</b>  | Did the organization have a written document retention and destruction policy? . . . . .   |     |    |
| <b>15</b>  | 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?   |     |    |
| <b>15a</b> | The organization's CEO, Executive Director, or top management official . . . . .   |     |    |
| <b>15b</b> | Other officers or key employees of the organization . . . . .  |     |    |
|            | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  |     |    |
| <b>16a</b> | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .  |     |    |
| <b>16b</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? . . . . . |     |    |

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed ► Massachusetts
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website     Another's website     Upon request
- 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: ► Barrett Heacock, Deloitte, 200 Berkeley St., Boston, MA 02116, 617-437-3660

**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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

| (A)<br>Name and Title                              | (B)<br>Average hours per week (describe hours for related organizations in Schedule O) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>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) Jennifer Blackmon<br>Vice President & Director | 1  | <input checked="" type="checkbox"/>   |                       |         |              |                              |        | 0  | 0   | 0   |
| (2) Meghan Callaghan<br>Director                   | 0.25   |   |                       |         |              |                              |        |  |   |   |
| (3) Jenny Hartwell                                 |  |   |                       |         |              |                              |        |  |   |   |
| (4) Barrett Heacock<br>Treasurer & Director        | 2  |   |                       |         |              |                              |        |  |   |   |
| (5) Caroline Reinsch<br>Clerk & Director           |  |   |                       |         |              |                              |        |  |   |   |
| (6) Neal Rosen<br>Board Chair & Director           |  |   |                       |         |              |                              |        |  |   |   |
| (7) Lori Tsuruda<br>President & Executive Director | 57   |   |                       |         |              |                              |        | 51,487   |   | 6,103   |
| (8)  |  |   |                       |         |              |                              |        |  |   |   |
| (9)  |  |   |                       |         |              |                              |        |  |   |   |
| (10)   |  |   |                       |         |              |                              |        |  |   |   |
| (11)   |  |   |                       |         |              |                              |        |  |   |   |
| (12)   |  |   |                       |         |              |                              |        |  |   |   |
| (13)   |  |   |                       |         |              |                              |        |  |   |   |
| (14)   |  |   |                       |         |              |                              |        |  |   |   |

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

| (A)<br>Name and title  | (B)<br>Average hours per week (describe hours for related organizations in Schedule O) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|--|--|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
|  |  | Individual trustee or director  | Institutional trustee | Officer | Key employee | Highest compensated employee | Former |  |   |   |
| (15)   |  |   |                       |         |              |                              |        |  |   |   |
| (16)   |  |   |                       |         |              |                              |        |  |   |   |
| (17)   |  |   |                       |         |              |                              |        |  |   |   |
| (18)   |  |   |                       |         |              |                              |        |  |   |   |
| (19)   |  |   |                       |         |              |                              |        |  |   |   |
| (20)   |  |   |                       |         |              |                              |        |  |   |   |
| (21)   |  |   |                       |         |              |                              |        |  |   |   |
| (22)   |  |   |                       |         |              |                              |        |  |   |   |
| (23)   |  |   |                       |         |              |                              |        |  |   |   |
| (24)   |  |   |                       |         |              |                              |        |  |   |   |
| (25)   |  |   |                       |         |              |                              |        |  |   |   |
| <b>1b Sub-total</b>  |  |   |                       |         |              |                              | 51,487 | 0  | 6,103   |   |
| <b>c Total from continuation sheets to Part VII, Section A</b> |  |   |                       |         |              |                              |        |  |   |   |
| <b>d Total (add lines 1b and 1c)</b>                           |  |   |                       |         |              |                              |        |  |   |   |

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

|  | Yes | No |
|--|-----|----|
| <b>3</b> Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>                                       |     | ✓  |
| <b>4</b> 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> |     |    |
| <b>5</b> 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>                       |     |    |

**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)<br>Name and business address | (B)<br>Description of services | (C)<br>Compensation |
|----------------------------------|--------------------------------|---------------------|
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |

**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 **0**



**Part VIII Statement of Revenue**

|   |  |  |  | (A)<br>Total revenue | (B)<br>Related or<br>exempt<br>function<br>revenue | (C)<br>Unrelated<br>business<br>revenue | (D)<br>Revenue<br>excluded from tax<br>under sections<br>512, 513, or 514 |  |
|---|--|--|--|----------------------|--|---|---|--|
| <b>Contributions, Gifts, Grants<br/>and Other Similar Amounts</b> | <b>1a</b>  | Federated campaigns . . . . .  | <b>1a</b> 4,588  |                      |  |   |   |  |
|   | <b>b</b>   | Membership dues . . . . .  | <b>1b</b> 0  |                      |  |   |   |  |
|   | <b>c</b>   | Fundraising events . . . . .   | <b>1c</b> 14,025   |                      |  |   |   |  |
|   | <b>d</b>   | Related organizations . . . . .  | <b>1d</b>  |                      |  |   |   |  |
|   | <b>e</b>   | Government grants (contributions)  | <b>1e</b>  |                      |  |   |   |  |
|   | <b>f</b>   | All other contributions, gifts, grants,<br>and similar amounts not included above  | <b>1f</b> 81,128   |                      |  |   |   |  |
|   | <b>g</b>   | Noncash contributions included in lines 1a-1f: \$  | 2,527  |                      |  |   |   |  |
|   | <b>h</b>   | <b>Total.</b> Add lines 1a-1f . . . . . ▶  |  | 99,741               |  |   |   |  |
| <b>Program Service Revenue</b>                                    |  |  | <b>Business Code</b>                                       |                      |  |   |   |  |
|   | <b>2a</b>  | Service Project Planning & Mngmt   | 541900   | 4,275                |  |   |   |  |
|   | <b>b</b>   | Service Project Supplies   | 900099   | 4,853                |  |   |   |  |
|   | <b>c</b>   | Volunteer Management Training  | 611430   | 250                  |  |   |   |  |
|   | <b>d</b>   | -----  |  |                      |  |   |   |  |
|   | <b>e</b>   | -----  |  |                      |  |   |   |  |
|   | <b>f</b>   | All other program service revenue .  |  |                      |  |   |   |  |
| <b>g</b>  | <b>Total.</b> Add lines 2a-2f . . . . . ▶                          |  | 9,378  |                      |  |   |   |  |
| <b>Other Revenue</b>  | <b>3</b>   | Investment income (including dividends, interest,<br>and other similar amounts) . . . . . ▶  |  | 108                  |  | 0                                       | 0   |  |
|   | <b>4</b>   | Income from investment of tax-exempt bond proceeds ▶   |  |                      |  |   | 0   |  |
|   | <b>5</b>   | Royalties . . . . . ▶  |  |                      |  |   |   |  |
|   | <b>6a</b>  | Gross rents . . . . .  | (i) Real   | (ii) Personal        |  |   |   |  |
|   |  |  | Less: rental expenses                                      |                      |  |   |   |  |
|   |  |  | Rental income or (loss)                                    |                      |  |   |   |  |
|   |  |  | <b>d</b> Net rental income or (loss) . . . . . ▶           |                      |  |   |   |  |
|   | <b>7a</b>  | Gross amount from sales of<br>assets other than inventory  | (i) Securities   | (ii) Other           |  |   |   |  |
|   |  |  | Less: cost or other basis<br>and sales expenses . . . . .  |                      |  |   |   |  |
|   |  |  | <b>c</b> Gain or (loss) . . . . .                          |                      |  |   |   |  |
|   |  |  | <b>d</b> Net gain or (loss) . . . . . ▶                    |                      |  |   |   |  |
|   | <b>8a</b>  | Gross income from fundraising<br>events (not including \$ 14,025<br>of contributions reported on line 1c).<br>See Part IV, line 18 . . . . . | <b>a</b>   | 1,806                |  |   |   |  |
|   |  |  | <b>b</b> Less: direct expenses . . . . .                   | <b>b</b> 1,806       |  |   |   |  |
|   |  |  | <b>c</b> Net income or (loss) from fundraising events . ▶  |                      |  |   |   |  |
|   | <b>9a</b>  | Gross income from gaming activities.<br>See Part IV, line 19 . . . . .   | <b>a</b>   |                      |  |   |   |  |
|   |  |  | <b>b</b> Less: direct expenses . . . . .                   | <b>b</b>             |  |   |   |  |
|   |  |  | <b>c</b> Net income or (loss) from gaming activities . . ▶ |                      |  |   |   |  |
| <b>10a</b>  | Gross sales of inventory, less<br>returns and allowances . . . . . | <b>a</b>   | 10   |                      |  |   |   |  |
|   |  | <b>b</b> Less: cost of goods sold . . . . .  | <b>b</b> 7.85  |                      |  |   |   |  |
|   |  | <b>c</b> Net income or (loss) from sales of inventory . . ▶  |  | 2                    |  |   |   |  |
| Miscellaneous Revenue   |  | <b>Business Code</b>   |  |                      |  |   |   |  |
| <b>11a</b>  | -----  |  |  |                      |  |   |   |  |
| <b>b</b>  | -----  |  |  |                      |  |   |   |  |
| <b>c</b>  | -----  |  |  |                      |  |   |   |  |
| <b>d</b>  | All other revenue . . . . .  |  |  |                      |  |   |   |  |
| <b>e</b>  | <b>Total.</b> Add lines 11a-11d . . . . . ▶                        |  |  |                      |  |   |   |  |
| <b>12</b>   | <b>Total revenue.</b> See instructions. . . . . ▶                  |  |  | 109,227              |  |   |   |  |

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

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)<br>Total expenses | (B)<br>Program service expenses | (C)<br>Management and general expenses | (D)<br>Fundraising expenses |
|---|-----------------------|---------------------------------|--|-----------------------------|
| <b>1</b> Grants and other assistance to governments and organizations in the United States. See Part IV, line 21  | 0                     |                                 |  |                             |
| <b>2</b> Grants and other assistance to individuals in the United States. See Part IV, line 22 . . . . .  |                       |                                 |  |                             |
| <b>3</b> Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 . . . . .   | 0                     |                                 |  |                             |
| <b>4</b> Benefits paid to or for members . . . . .  | 0                     |                                 |  |                             |
| <b>5</b> Compensation of current officers, directors, trustees, and key employees . . . . .   | 51,487                | 41,190                          | 2,574                                  | 7,723                       |
| <b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .  | 6,103                 | 4,861                           | 301                                    | 941                         |
| <b>7</b> Other salaries and wages . . . . .   | 4,184                 | 3,347                           | 209                                    | 628                         |
| <b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)   |                       |                                 | 0                                      | 0                           |
| <b>9</b> Other employee benefits . . . . .  |                       |                                 | 0                                      | 0                           |
| <b>10</b> Payroll taxes . . . . .   |                       |                                 |  |                             |
| <b>11</b> Fees for services (non-employees):  |                       |                                 |  |                             |
| <b>a</b> Management . . . . .   |                       |                                 |  |                             |
| <b>b</b> Legal . . . . .  | 1,507                 | 540                             | 967                                    |                             |
| <b>c</b> Accounting . . . . .   | 1,000                 |                                 | 1,000                                  |                             |
| <b>d</b> Lobbying . . . . .   |                       |                                 |  |                             |
| <b>e</b> Professional fundraising services. See Part IV, line 17  |                       |                                 |  |                             |
| <b>f</b> Investment management fees . . . . .   |                       |                                 |  |                             |
| <b>g</b> Other . . . . .  | 638                   | 544                             | 0                                      | 94                          |
| <b>12</b> Advertising and promotion . . . . .   |                       |                                 |  |                             |
| <b>13</b> Office expenses . . . . .   | 13,431                | 12,339                          | 94                                     | 998                         |
| <b>14</b> Information technology . . . . .  | 858                   | 716                             | 35                                     | 107                         |
| <b>15</b> Royalties . . . . .   |                       |                                 |  |                             |
| <b>16</b> Occupancy . . . . .   | 5,548                 | 4,439                           | 277                                    | 832                         |
| <b>17</b> Travel . . . . .  | 2,679                 | 2,131                           | 77                                     | 471                         |
| <b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials  |                       |                                 |  |                             |
| <b>19</b> Conferences, conventions, and meetings . . . . .  |                       |                                 |  |                             |
| <b>20</b> Interest . . . . .  |                       |                                 |  |                             |
| <b>21</b> Payments to affiliates . . . . .  |                       |                                 |  |                             |
| <b>22</b> Depreciation, depletion, and amortization . . . . .   | 210                   | 197                             | 3                                      | 10                          |
| <b>23</b> Insurance . . . . .   | 2,720                 | 2,223                           | 12                                     | 485                         |
| <b>24</b> 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.)  |                       |                                 |  |                             |
| <b>a</b> <u>Service Fees</u> . . . . .  | 775                   | 507                             | 33                                     | 235                         |
| <b>b</b> <u>Training</u> . . . . .  | 215                   |                                 |  |                             |
| <b>c</b> . . . . .  |                       |                                 |  |                             |
| <b>d</b> . . . . .  |                       |                                 |  |                             |
| <b>e</b> All other expenses <u>Support Svcs, Member, Otr</u> . . . . .  | 2,538                 | 1,571                           |  | 967                         |
| <b>25</b> <b>Total functional expenses.</b> Add lines 1 through 24e   | 93,893                | 74,820                          | 5,582                                  | 13,491                      |
| <b>26</b> <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) . . . . . |                       |                                 |  |                             |

**Part X Balance Sheet**

|   |  | (A)               |           | (B)            |  |
|---|--|-------------------|-----------|----------------|--|
|   |  | Beginning of year |           | End of year    |  |
| <b>Assets</b>   | <b>1</b> Cash—non-interest-bearing . . . . .   | 9,087             | <b>1</b>  | 12,930         |  |
|   | <b>2</b> Savings and temporary cash investments . . . . .  | 36,419            | <b>2</b>  | 49,077         |  |
|   | <b>3</b> Pledges and grants receivable, net . . . . .  | 0                 | <b>3</b>  |                |  |
|   | <b>4</b> Accounts receivable, net . . . . .  |                   | <b>4</b>  |                |  |
|   | <b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .   |                   | <b>5</b>  |                |  |
|   | <b>6</b> 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) . . . . . |                   | <b>6</b>  |                |  |
|   | <b>7</b> Notes and loans receivable, net . . . . .   |                   | <b>7</b>  |                |  |
|   | <b>8</b> Inventories for sale or use . . . . .   | 1,979             | <b>8</b>  | 1,413          |  |
|   | <b>9</b> Prepaid expenses and deferred charges . . . . .   |                   | <b>9</b>  |                |  |
|   | <b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D   | <b>10a</b> 3,026  |           |                |  |
|   | <b>b</b> Less: accumulated depreciation . . . . .  | <b>10b</b> 2,806  | 431       | <b>10c</b> 220 |  |
|   | <b>11</b> Investments—publicly traded securities . . . . .   |                   | <b>11</b> |                |  |
|   | <b>12</b> Investments—other securities. See Part IV, line 11 . . . . .   |                   | <b>12</b> |                |  |
|   | <b>13</b> Investments—program-related. See Part IV, line 11 . . . . .  |                   | <b>13</b> |                |  |
|   | <b>14</b> Intangible assets . . . . .  |                   | <b>14</b> |                |  |
|   | <b>15</b> Other assets. See Part IV, line 11 . . . . .   |                   | <b>15</b> |                |  |
| <b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . . |  | 47,916            | <b>16</b> | 63,640         |  |
| <b>Liabilities</b>  | <b>17</b> Accounts payable and accrued expenses . . . . .  | 2,703             | <b>17</b> | 458            |  |
|   | <b>18</b> Grants payable . . . . .   |                   | <b>18</b> |                |  |
|   | <b>19</b> Deferred revenue . . . . .   |                   | <b>19</b> |                |  |
|   | <b>20</b> Tax-exempt bond liabilities . . . . .  |                   | <b>20</b> |                |  |
|   | <b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .  | 3,852             | <b>21</b> | 6,487          |  |
|   | <b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .   |                   | <b>22</b> |                |  |
|   | <b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .   |                   | <b>23</b> |                |  |
|   | <b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .   |                   | <b>24</b> |                |  |
|   | <b>25</b> 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 . . . . .  | 0                 | <b>25</b> |                |  |
|   | <b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .   | 6,555             | <b>26</b> | 6,945          |  |
| <b>Net Assets or Fund Balances</b>  | <b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>   |                   |           |                |  |
|   | <b>27</b> Unrestricted net assets . . . . .  | 41,361            | <b>27</b> | 56,695         |  |
|   | <b>28</b> Temporarily restricted net assets . . . . .  |                   | <b>28</b> |                |  |
|   | <b>29</b> Permanently restricted net assets . . . . .  |                   | <b>29</b> |                |  |
|   | <b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>  |                   |           |                |  |
|   | <b>30</b> Capital stock or trust principal, or current funds . . . . .   |                   | <b>30</b> |                |  |
|   | <b>31</b> Paid-in or capital surplus, or land, building, or equipment fund . . . . .   |                   | <b>31</b> |                |  |
|   | <b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .   |                   | <b>32</b> |                |  |
|   | <b>33</b> Total net assets or fund balances . . . . .  |                   | <b>33</b> |                |  |
| <b>34</b> Total liabilities and net assets/fund balances . . . . .            |  | <b>34</b>         |           |                |  |

**Part XI Reconciliation of Net Assets**

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

|          |  |          |         |
|----------|--|----------|---------|
| <b>1</b> | Total revenue (must equal Part VIII, column (A), line 12)  | <b>1</b> | 109,227 |
| <b>2</b> | Total expenses (must equal Part IX, column (A), line 25)   | <b>2</b> | 93,893  |
| <b>3</b> | Revenue less expenses. Subtract line 2 from line 1   | <b>3</b> | 15,334  |
| <b>4</b> | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))                      | <b>4</b> | 41,361  |
| <b>5</b> | Other changes in net assets or fund balances (explain in Schedule O)   | <b>5</b> | 0       |
| <b>6</b> | Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) | <b>6</b> | 56,695  |

**Part XII Financial Statements and Reporting**

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

- 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?
- b** Were the organization's financial statements audited by an independent accountant?
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- d** If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

|           | Yes | No |
|-----------|-----|----|
|           |     |    |
| <b>2a</b> |     | ✓  |
| <b>2b</b> |     |    |
| <b>2c</b> |     |    |
|           |     |    |
| <b>3a</b> |     |    |
| <b>3b</b> |     |    |



Department of the Treasury  
Internal Revenue Service  
Ogden UT 84201

For assistance, call:  
1-877-829-5500

**Notice Number:** CP211A  
**Date:** September 3, 2012

**Taxpayer Identification Number:**  
04-3191846  
**Tax Form:** 990  
**Tax Period:** December 31, 2011

002732.104917.0008.001 1 AT 0.374 373



PEOPLE MAKING A DIFFERENCE THROUGH  
COMMUNITY SERVICE INC  
PO BOX 120189  
BOSTON MA 02112-0189



002732

## APPLICATION FOR EXTENSION OF TIME TO FILE AN EXEMPT ORGANIZATION RETURN - APPROVED

We received and approved your Form 8868, Application for Extension of Time to File an Exempt Organization Return, for the return (form) and tax period identified above. Your extended due date to file your return is **November 15, 2012**.

When it's time to file your Form 990, 990-EZ, 990-PF or 1120-POL, you should consider filing electronically. Electronic filing is the fastest, easiest and most accurate way to file your return. For more information, visit the Charities and Nonprofit web at [www.irs.gov/eo](http://www.irs.gov/eo). This site will provide information about:

- The type of returns that can be filed electronically,
- approved e-File providers, and
- if you are required to file electronically.

If you have any questions, please call us at the number shown above, or you may write us at the address shown at the top of this letter.



Department of the Treasury  
Internal Revenue Service  
Ogden UT 84201

For assistance, call:  
1-877-829-5500

Notice Number: CP211A  
Date: April 30, 2012

Taxpayer Identification Number:  
04-3191846  
Tax Form: 990  
Tax Period: December 31, 2011

003336.961068.0012.001 1 AT 0.374 373  
|||

PEOPLE MAKING A DIFFERENCE THROUGH  
COMMUNITY SERVICE INC  
PO BOX 120189  
BOSTON MA 02112-0189

3336

**APPLICATION FOR EXTENSION OF TIME TO FILE AN EXEMPT ORGANIZATION RETURN - APPROVED**

We received and approved your Form 8868, Application for Extension of Time to File an Exempt Organization Return, for the return (form) and tax period identified above. Your extended due date to file your return is **August 15, 2012**.

When it's time to file your Form 990, 990-EZ, 990-PF or 1120-POL, you should consider filing electronically. Electronic filing is the fastest, easiest and most accurate way to file your return. For more information, visit the Charities and Nonprofit web at [www.irs.gov/eo](http://www.irs.gov/eo). This site will provide information about:

- The type of returns that can be filed electronically,
- approved e-File providers, and
- if you are required to file electronically.

If you have any questions, please call us at the number shown above, or you may write us at the address shown at the top of this letter.

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

**Public Charity Status and Public Support**

OMB No. 1545-0047

**2011**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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.

|   |   |
|---|---|
| <b>Name of the organization</b><br>People Making a Difference through Community Service, Inc. | <b>Employer identification number</b><br>04-3191846 |
|---|---|

**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 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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—Other
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that 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? 

|          |     |    |
|----------|-----|----|
|          | Yes | No |
| 11g(i)   |     |    |
| 11g(ii)  |     |    |
| 11g(iii) |     |    |
  - (ii) A family member of a person described in (i) above? 

|         |     |    |
|---------|-----|----|
|         | Yes | No |
| 11g(ii) |     |    |
  - (iii) A 35% controlled entity of a person described in (i) or (ii) above? 

|          |     |    |
|----------|-----|----|
|          | Yes | No |
| 11g(iii) |     |    |
- h Provide the following information about the supported organization(s).

| (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 support |
|------------------------------------|----------|---|---|----|--|----|---|----|-------------------------|
|                                    |          |   | Yes   | No | Yes  | No | Yes   | No |                         |
| (A)                                |          |   |   |    |  |    |   |    |                         |
| (B)                                |          |   |   |    |  |    |   |    |                         |
| (C)                                |          |   |   |    |  |    |   |    |                         |
| (D)                                |          |   |   |    |  |    |   |    |                         |
| (E)                                |          |   |   |    |  |    |   |    |                         |
| <b>Total</b>                       |          |   |   |    |  |    |   |    |                         |

**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) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
|--|----------|----------|----------|----------|----------|-----------|
| <b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .  | 87,389   | 75,308   | 81,848   | 79,499   | 85,716   | 409,760   |
| <b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .   | 0        |          |          |          |          |           |
| <b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .   |          |          |          |          |          |           |
| <b>4 Total.</b> Add lines 1 through 3 . . . . .  | 87,389   | 75,308   | 81,848   | 79,499   | 85,716   | 409,760   |
| <b>5</b> 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) . . . . . |          |          |          |          |          |           |
| <b>6 Public support.</b> Subtract line 5 from line 4.  |          |          |          |          |          |           |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in) ►  | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total                |
|--|----------|----------|----------|----------|----------|--------------------------|
| <b>7</b> Amounts from line 4 . . . . .   |          |          |          |          |          |                          |
| <b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .  | 187      | 161      | 142      | 83       | 108      | 681                      |
| <b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .  |          |          |          |          |          |                          |
| <b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . .  |          |          |          |          |          |                          |
| <b>11 Total support.</b> Add lines 7 through 10  |          |          |          |          |          | 410,441                  |
| <b>12</b> Gross receipts from related activities, etc. (see instructions) . . . . .  |          |          |          |          | 12       | 75,248                   |
| <b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . . |          |          |          |          |          | <input type="checkbox"/> |

**Section C. Computation of Public Support Percentage**

|  |    |                                     |
|--|----|-------------------------------------|
| <b>14</b> Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) . . . . .   | 14 | 99.83 %                             |
| <b>15</b> Public support percentage from 2010 Schedule A, Part II, line 14 . . . . .   | 15 | %                                   |
| <b>16a 33 1/3% support test—2011.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . .   |    | <input checked="" type="checkbox"/> |
| <b>b 33 1/3% support test—2010.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . .  |    | <input type="checkbox"/>            |
| <b>17a 10%-facts-and-circumstances test—2011.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .    |    | <input type="checkbox"/>            |
| <b>b 10%-facts-and-circumstances test—2010.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . |    | <input type="checkbox"/>            |
| <b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . .   |    | <input type="checkbox"/>            |



**SCHEDULE D  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

▶ **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**  
▶ **Attach to Form 990. ▶ See separate instructions.**

OMB No. 1545-0047

**2011**

**Open to Public Inspection**

Name of the organization

People Making a Difference through Community Service, Inc.

Employer identification number

04-3191846

**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? . . . . .  | <input type="checkbox"/> Yes <input type="checkbox"/> 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? . . . . . | <input type="checkbox"/> Yes <input type="checkbox"/> 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 Tax Year |
|--|---------------------------------|
| a Total number of conservation easements . . . . .   | 2a                              |
| b Total acreage restricted by conservation easements . . . . .   | 2b                              |
| c Number of conservation easements on a certified historic structure included in (a) . . . . .   | 2c                              |
| d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register . . . . . | 2d                              |
- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_
- 4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_
- 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation 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 XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 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 XIV, 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 . . . . . ▶ \$ \_\_\_\_\_

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

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

- a**  Public exhibition
- b**  Scholarly research
- c**  Preservation for future generations
- d**  Loan or exchange programs
- e**  Other .....

**4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

**5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if 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 XIV and complete the following table:

|   | Amount |
|---|--------|
| <b>1c</b> Beginning balance             |        |
| <b>1d</b> Additions during the year     |        |
| <b>1e</b> Distributions during the year |        |
| <b>1f</b> Ending balance                |        |

**2a** Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

**b** If "Yes," explain the arrangement in Part XIV.

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

|   | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|---|------------------|----------------|--------------------|----------------------|---------------------|
| <b>1a</b> Beginning of year balance                     |                  |                |                    |                      |                     |
| <b>b</b> Contributions                                  |                  |                |                    |                      |                     |
| <b>c</b> Net investment earnings, gains, and losses     |                  |                |                    |                      |                     |
| <b>d</b> Grants or scholarships                         |                  |                |                    |                      |                     |
| <b>e</b> Other expenditures for facilities and programs |                  |                |                    |                      |                     |
| <b>f</b> Administrative expenses                        |                  |                |                    |                      |                     |
| <b>g</b> 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
- (ii)** related organizations

|               | Yes | No |
|---------------|-----|----|
| <b>3a(i)</b>  |     |    |
| <b>3a(ii)</b> |     |    |
| <b>3b</b>     |     |    |

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

**4** Describe in Part XIV 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 |
|---------------------------------|--------------------------------------|---------------------------------|------------------------------|----------------|
| <b>1a</b> Land                  |                                      | 0                               |                              |                |
| <b>b</b> Buildings              |                                      | 1,465                           | 1,245                        | 220            |
| <b>c</b> Leasehold improvements |                                      |                                 | 0                            |                |
| <b>d</b> Equipment              |                                      | 282                             | 282                          |                |
| <b>e</b> Other                  |                                      |                                 |                              |                |

**Total.** Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶

**Part VII Investments—Other Securities.** See Form 990, Part X, line 12.

| (a) Description of security or category<br>(including name of security)     | (b) Book value | (c) Method of valuation:<br>Cost or end-of-year market value |
|---|----------------|--|
| (1) Financial derivatives . . . . .   |                |  |
| (2) Closely-held equity interests . . . . .                                 |                |  |
| (3) Other -----   |                |  |
| (A) -----   |                |  |
| (B) -----   |                |  |
| (C) -----   |                |  |
| (D) -----   |                |  |
| (E) -----   |                |  |
| (F) -----   |                |  |
| (G) -----   |                |  |
| (H) -----   |                |  |
| (I) -----   |                |  |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶ |                |  |

**Part VIII Investments—Program Related.** See Form 990, Part X, line 13.

| (a) Description of investment type  | (b) Book value | (c) Method of valuation:<br>Cost or end-of-year market value |
|---|----------------|--|
| (1)   |                |  |
| (2)   |                |  |
| (3)   |                |  |
| (4)   |                |  |
| (5)   |                |  |
| (6)   |                |  |
| (7)   |                |  |
| (8)   |                |  |
| (9)   |                |  |
| (10)  |                |  |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶ |                |  |

**Part IX Other Assets.** See Form 990, Part X, line 15.

| (a) Description   | (b) Book value |
|---|----------------|
| (1)   |                |
| (2)   |                |
| (3)   |                |
| (4)   |                |
| (5)   |                |
| (6)   |                |
| (7)   |                |
| (8)   |                |
| (9)   |                |
| (10)  |                |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) . . . . . ▶ |                |

**Part X Other Liabilities.** See Form 990, Part X, line 25.

| 1. (a) Description of liability   | (b) Book value |  |
|---|----------------|--|
| (1) Federal income taxes  |                |  |
| (2)   |                |  |
| (3)   |                |  |
| (4)   |                |  |
| (5)   |                |  |
| (6)   |                |  |
| (7)   |                |  |
| (8)   |                |  |
| (9)   |                |  |
| (10)  |                |  |
| (11)  |                |  |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ |                |  |

**2. FIN 48 (ASC 740) Footnote.** In Part XIV, provide the text of the footnote to the organization’s financial statements that reports the organization’s liability for uncertain tax positions under FIN 48 (ASC 740).

| <b>Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements</b> |  |           |
|---|--|-----------|
| <b>1</b>  | Total revenue (Form 990, Part VIII, column (A), line 12)                                 | <b>1</b>  |
| <b>2</b>  | Total expenses (Form 990, Part IX, column (A), line 25)                                  | <b>2</b>  |
| <b>3</b>  | Excess or (deficit) for the year. Subtract line 2 from line 1                            | <b>3</b>  |
| <b>4</b>  | Net unrealized gains (losses) on investments   | <b>4</b>  |
| <b>5</b>  | Donated services and use of facilities   | <b>5</b>  |
| <b>6</b>  | Investment expenses  | <b>6</b>  |
| <b>7</b>  | Prior period adjustments   | <b>7</b>  |
| <b>8</b>  | Other (Describe in Part XIV.)  | <b>8</b>  |
| <b>9</b>  | Total adjustments (net). Add lines 4 through 8   | <b>9</b>  |
| <b>10</b>   | Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 | <b>10</b> |

| <b>Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return</b> |  |           |
|--|--|-----------|
| <b>1</b>   | Total revenue, gains, and other support per audited financial statements                       | <b>1</b>  |
| <b>2</b>   | Amounts included on line 1 but not on Form 990, Part VIII, line 12:                            |           |
| <b>a</b>   | Net unrealized gains on investments  | <b>2a</b> |
| <b>b</b>   | Donated services and use of facilities   | <b>2b</b> |
| <b>c</b>   | Recoveries of prior year grants  | <b>2c</b> |
| <b>d</b>   | Other (Describe in Part XIV.)  | <b>2d</b> |
| <b>e</b>   | Add lines <b>2a</b> through <b>2d</b>  | <b>2e</b> |
| <b>3</b>   | Subtract line <b>2e</b> from line <b>1</b>   | <b>3</b>  |
| <b>4</b>   | Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b> :                   |           |
| <b>a</b>   | Investment expenses not included on Form 990, Part VIII, line 7b                               | <b>4a</b> |
| <b>b</b>   | Other (Describe in Part XIV.)  | <b>4b</b> |
| <b>c</b>   | Add lines <b>4a</b> and <b>4b</b>  | <b>4c</b> |
| <b>5</b>   | Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) | <b>5</b>  |

| <b>Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return</b> |   |           |
|---|---|-----------|
| <b>1</b>  | Total expenses and losses per audited financial statements                                      | <b>1</b>  |
| <b>2</b>  | Amounts included on line 1 but not on Form 990, Part IX, line 25:                               |           |
| <b>a</b>  | Donated services and use of facilities  | <b>2a</b> |
| <b>b</b>  | Prior year adjustments  | <b>2b</b> |
| <b>c</b>  | Other losses  | <b>2c</b> |
| <b>d</b>  | Other (Describe in Part XIV.)   | <b>2d</b> |
| <b>e</b>  | Add lines <b>2a</b> through <b>2d</b>   | <b>2e</b> |
| <b>3</b>  | Subtract line <b>2e</b> from line <b>1</b>  | <b>3</b>  |
| <b>4</b>  | Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :                      |           |
| <b>a</b>  | Investment expenses not included on Form 990, Part VIII, line 7b                                | <b>4a</b> |
| <b>b</b>  | Other (Describe in Part XIV.)   | <b>4b</b> |
| <b>c</b>  | Add lines <b>4a</b> and <b>4b</b>   | <b>4c</b> |
| <b>5</b>  | Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.) | <b>5</b>  |

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Part IV, Line 2b: People Making a Difference through Community Service, Inc. (PMD) continued as the fiscal sponsor for the unincorporated professional organization the Directors of Volunteer Administration (DOVA) so that DOVA could continue to enhance the professionalism of its 50+ members through workshops and training, advance the creative development and support of voluntary human resources in achieving agency and organizational goals, and provide its members with opportunities to share experiences, idea, and skills through networking and discussion.

**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 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

**2011**

**Open to Public  
Inspection**

Name of the organization

People Making a Difference through Community Service, Inc.

Employer identification number

04-3191846

Part VI, Lines 6 & 7a. The organization has corporate members who elect other corporate members and directors.

Part VI, Line 11b. The organization bases its Form 990 filing on financial statements approved by vote of the board of directors. All directors receive electronic copies of the 990 filing, and we provide a link to it on our web site.

Part VI, Line 15a. The process for determining compensation was begun by the board of directors to hire the organization's first (and sole), paid executive director (Lori Tsuruda) on 10/13/1999. The board last convened in December 2010 to determine compensation.

Part VI, Line 15b. The executive director is the organization's only paid employee. The organization has no other officers or key employees.

Part VII. No hours were devoted to any related organization. Other compensation was the direct cost of health insurance benefits provided.

Part III Statement of Program Service Accomplishments, Line 4a Detail:

Continued on Pages that Follow: Descriptions of 2011 PMD Service Projects, Workshops & Clinics, and Additional Activities

|  |  |
|--|--|
| Name of the organization<br>People Making a Difference through Community Service, Inc. | Employer identification number<br>04-3191846 |
|--|--|

### **Descriptions of 2011 PMD Service Projects, Workshops & Clinics, and Additional Activities**

|                           |   |
|---------------------------|---|
| 26 projects throughout yr | Assemble dynamic Lego® science kits (chemistry, protein, DNA, and RNA) to improve science education via hands-on learning by students in the Boston Public Schools; the Detroit Science Center in Michigan; Mt. Desert Island Laboratory in Maine; Science Club for Girls and Breakthrough Cambridge; Los Angeles School District; and additional science centers<br>In close collaboration with the MIT Center for Environmental Health Sciences, MIT Edgerton Center, and Dr. Kathleen Vandiver, the inventor of Lego Life Science, volunteers carefully count, assemble, label, check, and glue molecules, plus label and build storage boxes, so that students and teachers can immediately use these accurate working models to master key concepts and discover what happens if...thus learning, instead of memorizing, basic scientific processes like protein synthesis and DNA replication.  |
| 7 projects throughout yr  | Prepare and share 8 meals and socialize with formerly homeless or at-risk for homelessness residents of the Anna Bissonnette House of HEARTH, South End<br>HEARTH ( <i>formerly called the Committee to End Elder Homelessness</i> ) strives to advocate on behalf of homeless elders, to reach out to, identify, and assist homeless elders in Boston, and to provide housing and services for this often neglected, vulnerable population. The Anna Bissonnette House is home to 40 elderly residents who were homeless or at-risk for homelessness. Nutrition and appropriate socialization are often challenges to the frail residents.   |
| 2 projects throughout yr  | Make cozy, double fleece security blankets for needy children served by Cradles to Crayons and GiftsToGive in North Quincy and New Bedford<br>Cradles to Crayons and GiftsToGive put new and gently used children's essentials into the hands of the children who need them the most. Providing children with essentials like new blankets helps build self-confidence and improves self-esteem, meaning they are more likely to arrive at daycare or school warm, on-time, and ready to learn.   |
| 1/8 & 8/14                | Serve dinner to the men at Pine Street Inn, Boston's largest homeless shelter<br>Pine Street Inn provides emergency shelter, street outreach, permanent, affordable housing, job training, and transitional programs. After the holidays and in the summer, severe volunteer shortages slow distribution of needed food to homeless guests, so PMD volunteers contribute needed labor, fruit, and desserts.   |
| 1/22                      | Salvage & sort donated clothing for needy men and women at St. Francis House, Boston<br>St. Francis House is a nonprofit, non-sectarian, comprehensive day shelter for poor and homeless adults. It provides basic necessities (i.e., food, clothing, and shelter) as well as rehabilitative services.  |
| 1/30                      | Prepare and serve nutritious and tasty lunch for 150 women and children at Rosie's Place, a multi-service homeless shelter for women, Roxbury<br>Rosie's Place is a sanctuary for poor and homeless women. Rosie's Place offers both emergency and long-term assistance to women who have nowhere else to turn. Rosie's Place is committed to welcoming each guest with respect and unconditional love.   |
| 1/30 & 2/5                | Officiate for the Regional "Blue Lobster Bowl" Competition of the National Ocean Sciences Bowl as rules judges, timekeepers, scorekeepers, and moderators, Cambridge<br>This national competition tests ocean knowledge, including the biology, chemistry, geology, physics, history, and economics of the ocean as well as ocean-related current events in a fast-paced, quiz-show style. One of the main goals is to expose talented and aspiring students to the wonder of marine science and the opportunities that exist within the field. Officiating PMD volunteers enabled 24 teams composed of 120 students from 14 Massachusetts high schools to compete. Participating high schools include Acton-Boxborough Regional, Bedford, Belmont, Brookline, Cambridge Rindge & Latin, Chelmsford, Boston English, Lexington, Lincoln-Sudbury, Marblehead, Newton North, Newton South, North Andover, and Phillips Academy.                                     |
| 2/11 & 5/10               | Read stories aloud to and help students select free books as part of Reading is Fundamental (RIF) Days at the William Henderson Inclusion Elementary School, Dorchester<br>RIF programs offer enriching activities that spark children's interest in reading, and every child involved with RIF gets to choose and keep new books at no cost to the children or their families. Some of RIF's most important work occurs in communities where students are at great risk of educational failure. RIF is well known for its flagship service, Books for Ownership (formerly known as the National Book Program) where children choose and keep several free paperback books each year. The Henderson is a small elementary school serving children from early childhood through Grade 5. Students are from diverse ethnic, linguistic, and ability backgrounds. Students who have disabilities learn in general education classrooms with their nondisabled peers. |

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- 2/26 Fulfill prisoners' requests for educational, self-help, research, spiritual, and other books donated to the Prison Book Program, Quincy  
The all-volunteer Prison Book Program strives to provide prisoners across the country with free, quality reading materials to expand their minds beyond the walls that cage them, to change their own lives, and to speak out for their rights.
- 3/5 Paint hundreds of 4x4' signs for Project Bread's Walk for Hunger, East Boston,  
Project Bread is the non-profit organization that organizes the annual Walk for Hunger to raise funds to support 400 emergency feeding programs in 135 communities in Massachusetts, its FoodSource Hotline, food drives, and shaping public policies that address hunger, particularly among children. Signs educate, inform, motivate, and thank the tens of thousands of walkers along the 20-mile route through Boston, Brookline, Newton, and Cambridge
- 3/10 Fill seed orders for community gardeners, Boston  
Sort nearly 10,000 donated and discounted seed packets and then fill orders by community gardeners through the Boston Natural Areas Network (BNAN), to be distributed at the annual Gardeners Gathering. BNAN works to preserve, expand and improve urban open space through community organizing, acquisition, ownership, programming, development and management of urban wilds, greenways and community gardens.
- 3/26 Staff Gardeners Gathering, Boston  
Assemble hundreds of registration packets and register attendees for the 36th annual Gardeners Gathering at Northeastern University. Organized by the Boston Natural Areas Network, the Gardeners Gathering is a city-wide event for community gardeners and other garden enthusiasts. The day is filled with informative and fun activities and workshops by experts from gardening and green space organizations.
- 4/12 Assemble and decorate book folders that older adult mentors at Generations Incorporated will use (with the books they contain) to provide 1:1 reading interventions to help struggling children learn to read, Cambridge Generations Incorporated engages active older adults in results-driven intergenerational programs that inspire students and improve schools in Boston and beyond.
- 4/24 Deliver Easter meals and visit with 9 homebound elders through Little Brothers-Friends of the Elderly, Dorchester and Mattapan  
Little Brothers-Friends of the Elderly is a nonprofit, non-sectarian voluntary organization committed to relieving isolation and loneliness among the elderly. Little Brothers, founded on the philosophy of nurturing the spirit as well as the body, serves elderly Friends who are 70 years or older, have little or no family involvement, and live on an annual income of \$8,000-\$10,000 or less.
- 4/30 Help care for 120 children as part of the annual parents conference at Perkins School for the Blind, Watertown  
The annual New England Regional Seminar for Families with Children with Visual Impairments conference is for families throughout New England and New York state. Volunteer-provided childcare is an integral part of the program since it encourages participation by many families who would otherwise be unable to attend. Parents attend conference sessions to learn more about a variety of topics and meet other families that have a child with vision loss.
- 5/7 Join Hands Day: Plant native species with Mission Hill Green in the Iroquois Woods, Mission Hill  
Volunteers plant native trees and shrubs to replace plants accidentally killed by a contractor working on an abutting parking lot. The Iroquois Street Woods is a 25,000 ft<sup>2</sup> area of undeveloped land that neighbors are reforesting by planting native species to replace invasives. Mission Hill Green is a community of neighbors dedicated to restoration and maintenance of, and advocacy for, natural areas on Mission Hill.
- 5/20 Weed and remove debris from the pond shore with the Friends of Spy Pond Park, Arlington  
Spy Pond Park is a nonprofit organization that preserves and enhances community enjoyment of Spy Pond Park and Spy Pond.
- 5/25 Assemble Braille books for the National Braille Press, Boston.  
The guiding purposes of the National Braille Press are to promote the literacy of blind children in North America through Braille and to enable blind people to better participate in work, family, and civic affairs through information. Braille books are sold for the same prices as printed books are sold to sighted people, so donations and volunteer labor make up the cost difference,
- 6/1 & 8/11 Assemble bicycles, adjust helmets, and assist with safety training for deserving youth/members at Boys and Girls Clubs, Woburn and South Boston

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|--|--|
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Build, check, and adjust new bicycles and helmets for 24 deserving youth, plus provide safety training, backpacks/supplies, and certificates of merit.

- 6/4 National Trails Day: Perform needed trail work at Belle Isle Marsh, East Boston  
Belle Isle Marsh Reservation preserves 152 of the 241-acre Belle Isle Marsh, Boston's last remaining salt marsh. The reservation provides unique opportunities to explore the type of wetlands that once lined the shores of Massachusetts Bay. Rich in nutrients and protected from ocean water, Belle Isle Marsh provides critical habitat for wildlife such as migratory birds and ocean fishes.
- 6/18 Weed and plant native species at Fresh Pond Reservation to increase public enjoyment and protect the drinking water supply from erosion and runoff, Cambridge  
A sanctuary of upland forests, meadows, wetlands, and wildlife on the western side of densely populated Cambridge, Fresh Pond Reservation surrounds and protects the ancient glacial pond called Fresh Pond, which since 1852 has provided drinking water to the City of Cambridge.
- 6/25 Paint children's faces at Old Colony (public housing) Unity Day, South Boston  
Assist the tenants association in providing positive, community building activities in this public housing development.
- 7/9 Clear brush and weeds from the upper corral in preparation for the new Poitou donkey & horse exhibit in the Children's Zoo at Franklin Park Zoo, Dorchester  
The struggling, nonprofit zoo relies heavily on volunteers to maintain its vast grounds and exhibits. Our work made the farm animal exhibit more inviting to the public and healthier for the animals. The zoo's mission is to inspire people to protect and to sustain the world for future generations by creating fun and engaging experiences that integrate wildlife and conservation programs, research, and education.
- 8/10 Sort/salvage frozen foods for the Greater Boston Food Bank, Roxbury  
The Greater Boston Food Bank distributes millions of pounds of food for the needy annually. Volunteers assist with the Food Bank's product recovery program, which represents 43% of the food products going into the Food Bank. The food and other essential products gathered through the program need to be inspected, sorted, and re-packed before they can be redistributed to member feeding programs. In the late summer, severe volunteer shortages slow distribution of needed food, so PMD volunteers contribute needed labor.
- 9/2 Count and package K'nex and other components for FOSS and STC science kits used by tens of thousands of K-8 Boston Public School (BPS) students at the BPS Campbell Resource Center Building, Dorchester  
These specially-designed kits engage students in hands-on learning and inquiry, but there is not sufficient staffing to restock supplies in the kits for reuse by more students.
- 9/11 9/11 Day of Service and Remembrance: Scrape and Paint the fence of Bromley-Heath Community Garden, Jamaica Plain  
The Bromley-Heath Community Garden was renovated through a partnership involving the Boston Natural Areas Network, the Bromley-Heath Tenant Management Corporation, and the Refugee and Immigrant Assistance Center. This garden, located along the Southwest Corridor Bike Path, has 15 plots used by Bromley-Heath and broader neighborhood residents including refugees. Painting the peeling fence greatly improves the garden's appearance and thus the neighborhood's awareness and appreciation.
- 9/24 National Public Lands Day: Mulch maple trees and trails at Fresh Pond Reservation to increase public enjoyment and protect the drinking water supply from erosion and runoff, Cambridge  
Mulching mitigates soil erosion and compaction that have resulted from rainwater runoff, little plant diversity, and heavy foot traffic and usage.
- 10/2 Run "Harvest Day" kids' activities at the Community Growing Center, Somerville  
Somerville's Community Growing Center serves as an outdoor classroom for elementary school students. Harvest Day is one way to build awareness and celebrate where food comes from. Approximately 50 kids and their families participate each year in pumpkin carving, apple bobbing, cider pressing, butter "making," and food tastings that incorporate ingredients from the garden.
- 10/30 Run Hawthorne Youth & Community Center's annual Halloween Party at Marcella Park, Roxbury  
Hawthorne Youth and Community Center's mission is to provide educational, cultural, recreational and vocational opportunities for community youth and adults; to celebrate the rich diversity of the neighborhood; and to work with residents to strengthen the quality of neighborhood life. Each year, 50-75 children and their families participate in this safe celebration of Halloween in their community park. PMD volunteers setup and staff crafts, games, and refreshments.



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- 11/5 Run youth literacy activities and clean up for Family (Literacy) Fun Day of Cambridge Family Literacy Collaborative, Cambridge  
The Cambridge Family Literacy Collaborative educates the community about family literacy and promotes city-wide commitment to family literacy. Family literacy is an educational model that focuses on the strengths and needs of the family. ("Family" is understood to include not only parents, but also grandparents, older siblings, and other family members. "Literacy" includes not only reading and writing, but also math, speaking, and listening skills.) Family Fun Day is a free, annual event organized to celebrate National Family Literacy Day and Family Literacy Month
- 11/12 Plant native shrubs, weed & mulch with the Boston Natural Areas Network at Pope John Paul II Park, Dorchester Land along the Neponset River in Dorchester, once enjoyed in its natural state by the Algonquin and the wildlife that made it their habitat, was restored and used as Pope John Paul II Park for people to appreciate and enjoy beginning in 2001. The area is now an open wetland meadow with tall grasses and other plant life. A big field is surrounded and criss-crossed by footpaths offering beautiful views of the river. New plantings atop "observation mounds" will provide habitat and needed shade.

### **2011 PMD WORKSHOPS & CLINICS**

- 2/7 & 6/20 "Volunteering in America" Talks for Showa Boston
- 2/20 "Volunteer Leader Training and Support Materials" Training for Parents Forum in Cambridge
- 3/3 Engaging Volunteers Who Make a Difference Workshop (Third Sector New England's Bottom Line Training Series) in Boston
- 4/1 & 7/13 Volunteer Management Clinic (Technical Development Corp.)  
Discussion of best practices of volunteer management with answers to participants' specific questions and challenges.
- 4/27 "Making a Real Difference" Address to Parents' Independent School Network
- 5/18 "Using Shared Values to Structure Volunteer Programs: Managing Expectations and Setting/Maintaining Useful Boundaries to Prevent Common Issues Among Staff and Volunteers" Training for the Directors of Volunteer Administration (DOVA) in Boston
- 6/16 & 8/1 PetPal Volunteer Training for FriendshipWorks
- 9/30 Volunteer Roles & Philanthropic Organizational Models  
*Pro bono* consulting for Wingprint Foundation
- 10/4 "Engaging Volunteers Who Make a Difference" for the International Visitor Leadership Program of the U.S. Department of State
- 10/5 "Strengthening Volunteer Selection and Supervision" Workshop (Technical Development Corp.)
- 10/11 "Motivation-Based Position Descriptions & Recruitment Strategies" Workshop  
(VolunteerMaine's Annual, State-wide Blaine House Conference on Volunteerism)
- 11/14 Volunteer Engagement 101  
*Pro bono* consulting for East End House
- 2006-2011 PMD Executive Director Lori Tsuruda leads Boston Directors of Volunteer Administration (DOVA) to enhance the professionalism of its members; advance the creative development and support of voluntary human resources in achieving agency and organizational goals; and provide members with opportunities to share experiences, ideas, and skills with colleagues.