

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

Department of the Treasury
Internal Revenue Service

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning JUL 1, 2013 **and ending** JUN 30, 2014

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization BOSTON AFTER SCHOOL & BEYOND, INC. Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite 89 SOUTH STREET, SUITE 601 City or town, state or province, country, and ZIP or foreign postal code BOSTON, MA 02111 F Name and address of principal officer: CHRISTOPHER J. SMITH SAME AS C ABOVE	D Employer identification number 20-1308560 E Telephone number 617-345-5322 G Gross receipts \$ 3,211,370. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ WWW.BOSTONBEYOND.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 2005 M State of legal domicile: MA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: BOSTON AFTER SCHOOL & BEYOND'S MISSION IS TO ENABLE BOSTON'S STUDENTS ACCESS TO LEARNING 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 13 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 13 5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 27 6 Total number of volunteers (estimate if necessary) 6 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 7b 0.																									
Revenue		<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">Prior Year</th> <th style="text-align: center;">Current Year</th> </tr> </thead> <tbody> <tr> <td>8 Contributions and grants (Part VIII, line 1h)</td> <td style="text-align: right;">5,017,801.</td> <td style="text-align: right;">3,195,744.</td> </tr> <tr> <td>9 Program service revenue (Part VIII, line 2g)</td> <td style="text-align: right;">79,316.</td> <td style="text-align: right;">0.</td> </tr> <tr> <td>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td> <td style="text-align: right;">3,660.</td> <td style="text-align: right;">3,232.</td> </tr> <tr> <td>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td> <td style="text-align: right;">2,791.</td> <td style="text-align: right;">12,394.</td> </tr> <tr> <td>12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td> <td style="text-align: right;">5,103,568.</td> <td style="text-align: right;">3,211,370.</td> </tr> </tbody> </table>		Prior Year	Current Year	8 Contributions and grants (Part VIII, line 1h)	5,017,801.	3,195,744.	9 Program service revenue (Part VIII, line 2g)	79,316.	0.	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,660.	3,232.	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,791.	12,394.	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,103,568.	3,211,370.						
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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 CHRISTOPHER J. SMITH, PRESIDENT AND EXEC. DIR. Type or print name and title	Date			
Paid Preparer Use Only	Print/Type preparer's name DAVID KELLEHER, CPA	Preparer's signature DAVID KELLEHER, CPA	Date 10/20/14	Check if self-employed <input type="checkbox"/>	PTIN P01059560
	Firm's name ▶ ALEXANDER, ARONSON, FINNING & CO., P.C. Firm's address ▶ 21 EAST MAIN STREET WESTBORO, MA 01581	Firm's EIN ▶ 04-2571780 Phone no. 508-366-9100			

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: BOSTON AFTER SCHOOL & BEYOND, INC. IS A PUBLIC PRIVATE PARTNERSHIP THAT PURSUES A WIDELY UNDERSTOOD AND UNIFIED AFTER-SCHOOL AND SUMMER LEARNING SYSTEM THAT PROMOTES STAKEHOLDER ALIGNMENT, A FOCUS ON RESULTS, AND ACCESS TO LEARNING OPPORTUNITIES, PARTICULARLY FOR

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 [X] 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 [X] No If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses \$ 2,419,497. including grants of \$ 1,575,106.) (Revenue \$) BOSTON SUMMER LEARNING PROJECT - LAUNCHED BY THE BOSTON OPPORTUNITY AGENDA IN 2010, AND CO-MANAGED BY THE AGENCY AND THE BOSTON PUBLIC SCHOOLS, THE BOSTON SUMMER LEARNING PROJECT (SLP) SEEKS TO REVERSE SUMMER LEARNING LOSS AND DEVELOP THE SKILLS AND RESILIENCIES ASSOCIATED WITH SCHOOL SUCCESS. IT ALSO AIMS TO INFORM A CITYWIDE SYSTEM OF SUMMER LEARNING AND A MODEL OF EXPANDING LEARNING THROUGH SCHOOL-COMMUNITY PARTNERSHIPS. SINCE ITS 2010 LAUNCH WITH 232 STUDENTS, FIVE SCHOOLS AND SEVEN COMMUNITY PARTNERS, THE PROJECT HAS GROWN TO INCLUDE APPROXIMATELY 1,700 STUDENTS, 51 SCHOOLS, 18 LEAD AND 10 SUPPORTING COMMUNITY PARTNERS, AND MULTIPLE LOCAL AND NATIONAL FUNDERS. THROUGH THIS INITIATIVE, BOSTON IS PARTICIPATING IN NATIONAL RESEARCH FUNDED BY THE WALLACE FOUNDATION. IN 2013, THE NATIONAL

4b (Code:) (Expenses \$ 622,489. including grants of \$ 440,666.) (Revenue \$) ADVANCING QUALITY PARTNERSHIPS - THE AGENCY IS HELPING EIGHT TURNAROUND AND HIGH SUPPORT SCHOOLS TO MEASURE AND DOCUMENT THEIR DRIVE TOWARD TRANSFORMING THE STUDENT LEARNING EXPERIENCE THROUGH STRATEGIC PARTNERSHIPS. ADVANCING QUALITY PARTNERSHIPS (AQP), A JOINT INITIATIVE OF THE AGENCY, BOSTON PUBLIC SCHOOLS, AND THE BARR FOUNDATION, PROVIDES SUPPORT FOR SCHOOL IMPROVEMENT STRATEGIES THAT INTEGRATE ACADEMICS, SOCIAL-EMOTIONAL SUPPORTS, AND EXPANDED LEARNING OPPORTUNITIES THROUGH SCHOOL-COMMUNITY PARTNERSHIPS. THIS EFFORT HELPS TO ALIGN SCHOOLS AND PARTNERS AROUND MEASURABLE AND SPECIFIC SHARED GOALS, CREATE AN EVIDENCE BASE UPON WHICH TO FOCUS IMPROVEMENTS, AND PROVIDE SCHOOL LEADERS WITH INSIGHTS INTO THE VALUE PARTNERS BRING TO THEIR STUDENTS. THROUGH THIS WORK, SUMMER LEARNING PROJECT, AND OTHER EFFORTS, THE

4c (Code:) (Expenses \$ 234,074. including grants of \$ 161,000.) (Revenue \$) TEEN INITIATIVE - THE TEEN INITIATIVE IS FOCUSED ON THE GOALS OF GETTING AND KEEPING YOUNG PEOPLE ON TRACK FOR HIGH SCHOOL GRADUATION AND COLLEGE SUCCESS BY PROVIDING EXPERIENCES THAT BUILD TANGIBLE CONNECTIONS BETWEEN WHAT THEY LEARN IN SCHOOL AND THE WORLD BEYOND THE CLASSROOM WALLS. THIS IS ACHIEVED BY CREATING EXPANDED LEARNING OPPORTUNITIES FOR STUDENTS TO EARN ACADEMIC CREDIT AND TO DEVELOP THE SKILLS NECESSARY FOR SUCCESS IN HIGH QUALITY COMMUNITY-BASED LEARNING EXPERIENCES. THE TEEN INITIATIVE AIMS TO PROVIDE ALL OF THE CITY'S STUDENTS WITH ACCESS TO ITS WIDE ARRAY OF CULTURAL, NATURAL, CIVIC AND COMMUNITY ASSETS, MAKING LEARNING RELEVANT AND ENGAGING.

4d Other program services (Describe in Schedule O.) (Expenses \$ 358,585. including grants of \$ 28,374.) (Revenue \$ 12,394.)

4e Total program service expenses 3,634,645.

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3	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>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7	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>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	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>		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	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>	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
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 and XII is optional</i>		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
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>		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18	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>		X
19	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>		X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22	Did the organization report more than \$5,000 of grants or 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>		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24b			
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24c			
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
24d			
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
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>		X
25b			X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II		X
26			X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
27			X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28a			X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28b			X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	X	
28c		X	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
29			X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
30			X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
31			X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
32			X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
33			X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
34			X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35a			X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
35b			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36			X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
37			X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	
38		X	

Note. 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 or note to any line in this Part V

Main form area containing questions 1a through 14b with input fields and Yes/No columns.

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 or note to any line in this Part VI

Section A. Governing Body and Management

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

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
10b	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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	X	
15b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16b	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 **MA**
- 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 Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **CHRISTOPHER J. SMITH - 617-345-5322**
89 SOUTH STREET, SUITE 601, BOSTON, MA 02111

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

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

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) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ROGER BROWN DIRECTOR	0.40	X						0.	0.	0.
(2) CLAUDIO MARTINEZ DIRECTOR	0.40	X						0.	0.	0.
(3) KATHRYN PLAZAK CLERK	0.40	X		X				0.	0.	0.
(4) AMY RYAN EX OFFICIO	0.40	X						0.	0.	0.
(5) CHRISTOPHER BYNER EX OFFICIO	0.40	X						0.	0.	0.
(6) JUDITH KURLAND DIRECTOR	0.40	X						0.	0.	0.
(7) VANESSA CALDERON-ROSADO DIRECTOR	0.40	X						0.	0.	0.
(8) RAHN DORSEY DIRECTOR	0.40	X						0.	0.	0.
(9) JOSHUA KRAFT DIRECTOR	0.40	X						0.	0.	0.
(10) JOSEPH MCGRILL TREASURER	0.40	X		X				0.	0.	0.
(11) WANDA MCCLAIN CHAIR	0.80	X		X				0.	0.	0.
(12) JOHN MCDONOUGH EX OFFICIO	0.40	X						0.	0.	0.
(13) DANIEL ARRIGG KOH EX OFFICIO	0.40	X						0.	0.	0.
(14) CHRISTOPHER SMITH PRESIDENT AND EXECUTIVE	40.00			X				143,243.	0.	13,590.

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	258,873.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	2,936,871.				
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f			3,195,744.			
	Program Service Revenue	2 a	Business Code				
b							
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		3,232.			3,232.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real					
		(ii) Personal					
		b Less: rental expenses					
		c Rental income or (loss)					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities					
		(ii) Other					
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)					
	d Net gain or (loss)						
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
		b Less: direct expenses	b				
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a OTHER INCOME		900099	12,394.	12,394.			
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d			12,394.			
12 Total revenue. See instructions.			3,211,370.	12,394.	0.	3,232.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	2,205,146.	2,205,146.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	173,825.	59,100.	88,651.	26,074.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	409,222.	370,548.	37,545.	1,129.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	57,179.	53,381.	3,528.	270.
10 Payroll taxes	43,300.	35,445.	5,783.	2,072.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	56,340.		56,340.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	573,785.	544,921.	28,739.	125.
12 Advertising and promotion	160.	80.	80.	
13 Office expenses	246,409.	229,357.	14,309.	2,743.
14 Information technology				
15 Royalties				
16 Occupancy	73,468.	55,003.	16,629.	1,836.
17 Travel	45,245.	43,760.	1,179.	306.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	41,713.	35,560.	5,829.	324.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	495.		495.	
23 Insurance	4,156.	1,933.	2,159.	64.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a EQUIPMENT MAINTENANCE	520.	411.	96.	13.
b				
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	3,930,963.	3,634,645.	261,362.	34,956.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	3,092,554.	1	
	2 Savings and temporary cash investments	906,253.	2	3,727,391.
	3 Pledges and grants receivable, net	1,776,754.	3	1,194,535.
	4 Accounts receivable, net	15,342.	4	11,018.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	10,593.	9	117,230.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 46,795.		
	b Less: accumulated depreciation	10b 46,795.	495.	10c 0.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	7,091.	15	5,025.
16 Total assets. Add lines 1 through 15 (must equal line 34)	5,809,082.	16	5,055,199.	
Liabilities	17 Accounts payable and accrued expenses	234,196.	17	326,746.
	18 Grants payable	411,000.	18	284,160.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	645,196.	26	610,906.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	399,275.	27	466,673.
	28 Temporarily restricted net assets	4,764,611.	28	3,977,620.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	5,163,886.	33	4,444,293.	
34 Total liabilities and net assets/fund balances	5,809,082.	34	5,055,199.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,211,370.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,930,963.
3	Revenue less expenses. Subtract line 2 from line 1	3	-719,593.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,163,886.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	4,444,293.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
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?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

2013

Open to Public Inspection

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization BOSTON AFTER SCHOOL & BEYOND, INC.	Employer identification number 20-1308560
---	---

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 - Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(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?	11g(i)	
(ii) A family member of a person described in (i) above?	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	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 monetary support
			Yes	No	Yes	No	Yes	No	
Total									

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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,940,023.	2,551,625.	3,617,361.	5,017,801.	3,195,744.	16,322,554.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	1,940,023.	2,551,625.	3,617,361.	5,017,801.	3,195,744.	16,322,554.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						9,322,680.
6 Public support. Subtract line 5 from line 4.						6,999,874.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	1,940,023.	2,551,625.	3,617,361.	5,017,801.	3,195,744.	16,322,554.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,748.	6,438.	8,648.	3,660.	3,232.	25,726.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	516.	6,454.		2,791.	12,394.	22,155.
11 Total support. Add lines 7 through 10						16,370,435.
12 Gross receipts from related activities, etc. (see instructions)					12	144,867.
13 First five years. 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 stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	42.76 %
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	52.64 %
16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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.**

▶ **Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990**

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization

BOSTON AFTER SCHOOL & BEYOND, INC.

Employer identification number

20-1308560

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

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

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

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

(ii) Assets included in Form 990, Part X

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

a Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

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

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

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

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

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

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

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

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

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

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

- a Board designated or quasi-endowment _____ %
- b Permanent endowment _____ %
- c Temporarily restricted endowment _____ %

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

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

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

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		9,207.	9,207.	0.
d Equipment		31,438.	31,438.	0.
e Other		6,150.	6,150.	0.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				0.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: 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)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. 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)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

2. Liability for uncertain tax positions. In Part XIII, 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). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	3,284,870.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	73,500.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	73,500.
3	Subtract line 2e from line 1	3	3,211,370.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	3,211,370.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	4,004,463.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	73,500.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	73,500.
3	Subtract line 2e from line 1	3	3,930,963.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	3,930,963.

Part XIII Supplemental Information.

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

PART X, LINE 2:

THE AGENCY ACCOUNTS FOR UNCERTAINTY IN INCOME TAXES IN

ACCORDANCE WITH ASC TOPIC, INCOME TAXES. THIS STANDARD CLARIFIES THE

ACCOUNTING FOR UNCERTAINTY IN TAX POSITIONS AND PRESCRIBES A RECOGNITION

THRESHOLD AND MEASUREMENT ATTRIBUTE FOR THE FINANCIAL STATEMENT REGARDING

A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. THE AGENCY

HAS DETERMINED THAT THERE ARE NO UNCERTAIN TAX POSITIONS WHICH QUALIFY FOR

EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS AT JUNE 30,

2014. THE AGENCY'S INFORMATION RETURNS ARE SUBJECT TO EXAMINATION BY THE

FEDERAL AND STATE JURISDICTIONS AND GENERALLY REMAIN OPEN FOR THE MOST

RECENT THREE YEARS.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ **Attach to Form 990.**

OMB No. 1545-0047

2013

**Open to Public
Inspection**

▶ **Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990**

Name of the organization **BOSTON AFTER SCHOOL & BEYOND, INC.** Employer identification number **20-1308560**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALTERNATIVES FOR COMMUNITY & ENVIRONMENT - 2181 WASHINGTON STREET, SUITE 301 - ROXBURY, MA 02119	04-3228509	501(C)(3)	15,418.	0.			TO FURTHER THE MISSION OF THE TEEN INITIATIVE AND THE BOSTON YOUTH ENVIRONMENTAL NETWORK
BOSTON DEBATE LEAGUE 31 STATE STREET, FLOOR 10 BOSTON, MA 02109	59-3789722	501(C)(3)	15,000.	0.			TO FURTHER THE MISSION OF THE TEEN INITIATIVE
BOSTON PRIVATE INDUSTRY COUNCIL 2 OLIVER STREET BOSTON, MA 02109	04-2676661	501(C)(3)	91,750.	0.			TO FURTHER THE MISSION OF THE SUMMER LEARNING PROJECT
THE BOSTON EDUCATIONAL DEVELOPMENT FOUNDATION, INC. - 26 COURT ST - BOSTON, MA 02108	22-2514422	501(C)(3)	338,230.	0.			TO FURTHER THE MISSION OF THE SUMMER LEARNING PROJECT AND THE ADVANCING QUALITY PARTNERSHIPS
BOYS AND GIRLS CLUB OF BOSTON 50 CONGRESS ST. BOSTON, MA 02111	04-2103922	501(C)(3)	143,861.	0.			TO FURTHER THE MISSION OF THE SUMMER LEARNING PROJECT
BUILDING EDUCATED LEADERS FOR LIFE (BELL) - 60 CLAYTON STREET - DORCHESTER, MA 02122	04-3182053	501(C)(3)	231,000.	0.			TO FURTHER THE MISSION OF THE SUMMER LEARNING PROJECT AND THE ADVANCING QUALITY PARTNERSHIP

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **32.**
- 3** Enter total number of other organizations listed in the line 1 table **33.**

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

Schedule I (Form 990) (2013)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COURAGEOUS SAILING ONE FIRST AVENUE BOSTON, MA 02129	04-2987534	501(C)(3)	127,503.	0.			TO FURTHER THE MISSION OF THE SUMMER LEARNING PROJECT
DORCHESTER BAY ECONOMIC DEVELOPMENT CORP - 594 COLUMBIA ROAD - DORCHESTER, MA 02125	04-2681632	501(C)(3)	13,500.	0.			TO FURTHER THE MISSION OF THE TEEN INITIATIVE
DORCHESTER HOUSE 1353 DORCHESTER AVE. DORCHESTER, MA 02122	23-7125970	501(C)(3)	35,980.	0.			TO FURTHER THE MISSION OF THE SUMMER LEARNING PROJECT
DUDLEY STREET NEIGHBORHOOD INITIATIVE - 504 DUDLEY STREET - ROXBURY, MA 02119	04-2859066	501(C)(3)	7,000.	0.			TO FURTHER THE MISSION OF THE TEEN INITIATIVE
HALE RESERVATION 80 CARBY STREET WESTWOOD, MA 02090	04-2111550	501(C)(3)	115,944.	0.			TO FURTHER THE MISSION OF THE SUMMER LEARNING PROJECT
HYDE SQ. TASK FORCE P. O. BOX 301871 JAMAICA PLAIN, MA 02130	04-3118543	501(C)(3)	53,965.	0.			TO FURTHER THE MISSION OF THE SUMMER LEARNING PROJECT
INQUILINOS BORICUAS EN ACCION 40 SHAWMUT AVE. BOSTON, MA 02118	23-7090081	501(C)(3)	47,982.	0.			TO FURTHER THE MISSION OF THE SUMMER LEARNING PROJECT
THE LEE ACADEMY PILOT SCHOOL FOUNDATION, INC. - 155 TALBOT AVENUE - DORCHESTER, MA 02124	56-2662399	501(C)(3)	5,076.	0.			TO FURTHER THE MISSION OF THE ADVANCING QUALITY PARTNERSHIPS PROGRAM
MATHPOWER 13 LAKE HALL, NORTHEASTERN UNIVERSITY, 360 HUNTINGTON AVE. - BOSTON, MA 0211	04-1679980	501(C)(3)	87,562.	0.			TO FURTHER THE MISSION OF THE SUMMER LEARNING PROJECT, THE TEEN INITIATIVE AND STEM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIERS PARK SAILING CENTER 95 MARGINAL STREET EAST BOSTON, MA 02128	04-3411388	501(C)(3)	6,500.	0.			TO FURTHER THE MISSION OF THE TEEN INITIATIVE
SOCIEDAD LATINA 1530 TREMONT STREET ROXBURY, MA 02120	04-2678311	501(C)(3)	81,709.	0.			TO FURTHER THE MISSION OF THE SUMMER LEARNING PROJECT AND THE TEEN INITIATIVE
SPORTSMEN'S TENNIS CLUB 950 BLUE HILL AVENUE DORCHESTER, MA 02124	23-7037183	501(C)(3)	76,258.	0.			TO FURTHER THE MISSION OF THE SUMMER LEARNING PROJECT AND THE ADVANCING QUALITY PARTNERSHIPS
TENACITY 38 EVERETT STREET BOSTON, MA 02134	04-3452763	501(C)(3)	139,252.	0.			TO FURTHER THE MISSION OF THE SUMMER LEARNING PROJECT
THE AFTER SCHOOL CORPORATION 1440 BROADWAY, 16TH FLOOR NEW YORK, NY 10018	13-4004600	501(C)(3)	10,000.	0.			TO FURTHER THE MISSION OF THE POLICY AND ADVOCACY INITIATIVE
CITIZEN SCHOOLS 308 CONGRESS STREET BOSTON, MA 02210	04-3259160	501(C)(3)	42,000.	0.			TO FURTHER THE MISSION OF THE ADVANCING QUALITY PARTNERSHIPS PROGRAM.
THOMPSON ISLAND OUTWARD BOUND 5-11 DRYDOCK AVENUE, P.O. BOX 127 BOSTON, MA 02127	04-3027800	501(C)(3)	175,728.	0.			TO FURTHER THE MISSION OF THE SUMMER LEARNING PROJECT AND STEM
YMCA OF GREATER BOSTON 316 HUNTINGTON AVENUE BOSTON, MA 02115	04-2103551	501(C)(3)	124,187.	0.			TO FURTHER THE MISSION OF THE SUMMER LEARNING PROJECT
YOUTHBUILD USA 58 DAY STREET SOMERVILLE, MA 02144	22-3076454	501(C)(3)	13,500.	0.			TO FURTHER THE MISSION OF THE TEEN INITIATIVE

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BUILD-GREATER BOSTON 6 BEACON STREET, SUITE 415 BOSTON, MA 02108	94-3386695	501(C)(3)	17,500.	0.			TO FURTHER THE MISSION OF THE TEEN INITIATIVE
DANCING CLASSROOMS NEW ENGLAND 200 HINCKLEY ROAD MILTON, MA 02186	00-1105224		7,000.	0.			TO FURTHER THE MISSION OF THE ADVANCING QUALITY PARTNERSHIPS PROGRAM
EAST BOSTON YMCA 215 BREMEN STREET EAST BOSTON, MA 02128	04-2103551	501(C)(3)	15,000.	0.			TO FURTHER THE MISSION OF THE TEEN INITIATIVE
GENERATION CITIZEN 89 SOUTH STREET, SUITE 203 BOSTON, MA 02111	27-2039522	501(C)(3)	7,500.	0.			TO FURTHER THE MISSION OF THE TEEN INITIATIVE
HERE-IN OUR MOTIVES EVOLVE (HOME) 566 COLUMBUS AVENUE BOSTON, MA 02118	04-2635141	501(C)(3)	10,000.	0.			TO FURTHER THE MISSION OF THE TEEN INITIATIVE
PLAYWORKS 29 GERMANIA STREET JAMAICA PLAIN, MA 02130	94-3251867	501(C)(3)	19,800.	0.			TO FURTHER THE MISSION OF THE ADVANCING QUALITY PARTNERSHIPS PROGRAM
PRESIDENTS AND FELLOWS OF HARVARD COLLEGE - 1033 MASSACHUSETTS AVE, SUITE 3 - CAMBRIDGE, MA 02138	04-2103580	501(C)(3)	20,000.	0.			TO FURTHER THE MISSION OF THE TEEN INITIATIVE
THE SALVATION ARMY 650 DUDLEY STREET BOSTON, MA 02125	04-2103624	501(C)(3)	8,400.	0.			TO FURTHER THE MISSION OF THE SUMMER LEARNING PROJECT
UNLOCKING POTENTIAL, INC. 90 CANAL STREET, SUITE 610 BOSTON, MA 02114	27-2194956	501(C)(3)	76,000.	0.			TO FURTHER THE MISSION OF THE ADVANCING QUALITY PARTNERSHIPS PROGRAM

Schedule I (Form 990)

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

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

Part IV **Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

PART I, LINE 2:

PERIODIC PROGRESS REPORTS ARE REQUIRED OF THE GRANTEE AND

REVIEWED BY A PROGRAM MANAGER

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

2013

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990

Name of the organization

BOSTON AFTER SCHOOL & BEYOND, INC.

Employer identification number

20-1308560

Part I Questions Regarding Compensation

	Yes	No								
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<p>b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	1b									
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?</p>	2									
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <table border="0"> <tr> <td><input type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input type="checkbox"/> Independent compensation consultant</td> <td><input type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input checked="" type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study	<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study									
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<p>4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>	4a	X								
	4b	X								
	4c	X								
<p>Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.</p> <p>5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes" to line 5a or 5b, describe in Part III.</p>	5a	X								
	5b	X								
<p>6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes" to line 6a or 6b, describe in Part III.</p>	6a	X								
	6b	X								
<p>7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III</p>	7	X								
<p>8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III</p>	8	X								
<p>9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9									

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) CHRISTOPHER SMITH PRESIDENT AND EXECUTIVE	(i)	143,243.	0.	0.	0.	13,590.	156,833.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
CLAUDIO MARTINEZ	BOARD OF DIRECTORS	135,674.	MR. MARTINEZ		X
VANESSA CALDERON-ROSADO	BOARD OF DIRECTORS	47,982.	MS. CALDERO		X
JOSHUA KRAFT	BOARD OF DIRECTORS	143,861.	MR. KRAFT I		X
RAHN DORSEY	BOARD OF DIRECTORS	951,705.	MR. DORSEY		X
WANDA MCCLAIN	BOARD OF DIRECTORS	91,750.	MS. MCCLAIN		X

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: CLAUDIO MARTINEZ

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

BOARD OF DIRECTORS MEMBER

(D) DESCRIPTION OF TRANSACTION: MR. MARTINEZ IS THE EXECUTIVE DIRECTOR

OF THE HYDE SQ. TASK FORCE, WHICH RECEIVED \$53,965. HE IS MARRIED TO THE

EXECUTIVE DIRECTOR OF SOCIEDAD LATINA, WHICH RECEIVED \$81,709.

(A) NAME OF PERSON: VANESSA CALDERON-ROSADO

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

BOARD OF DIRECTORS MEMBER

(D) DESCRIPTION OF TRANSACTION: MS. CALDERON-ROSADO IS THE EXECUTIVE

DIRECTOR OF INQUILINOS BORICUAS EN ACCION, WHICH RECEIVED GRANTS OF

\$47,982 FROM THE ORGANIZATION.

(A) NAME OF PERSON: JOSHUA KRAFT

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

BOARD OF DIRECTORS MEMBER

(D) DESCRIPTION OF TRANSACTION: MR. KRAFT IS THE EXECUTIVE DIRECTOR OF

THE BOYS & GIRLS CLUB OF BOSTON WHICH RECEIVED GRANTS OF \$143,861 FROM

Part V Supplemental Information

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

THE ORGANIZATION.

(A) NAME OF PERSON: RAHN DORSEY

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

BOARD OF DIRECTORS MEMBER

(D) DESCRIPTION OF TRANSACTION: MR. DORSEY IS THE EVALUATION DIRECTOR OF

THE BARR FOUNDATION WHICH AWARDED GRANTS TO THE ORGANIZATION OF \$950,000.

MR. DORSEY IS MARRIED TO THE EXECUTIVE DIRECTOR OF PROJECT HIP-HOP WHICH

RECEIVED \$1,705.

(A) NAME OF PERSON: WANDA MCCLAIN

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

BOARD OF DIRECTORS CHAIR

(D) DESCRIPTION OF TRANSACTION: MS. MCCLAIN IS THE CLERK OF THE BOARD OF

THE BOSTON PRIVATE INDUSTRY COUNCIL, WHICH RECEIVED GRANTS OF \$91,750

FROM THE ORGANIZATION.

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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization **BOSTON AFTER SCHOOL & BEYOND, INC.** Employer identification number **20-1308560**

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

OPPORTUNITIES THAT PROVIDE THE KNOWLEDGE AND SKILLS NECESSARY FOR

SUCCESS IN SCHOOL, COLLEGE AND CAREERS. TO THAT END, BOSTON AFTER

SCHOOL & BEYOND CATALYZES PARTNERSHIPS AMONG SCHOOLS, GOVERNMENT,

NONPROFITS, AND PHILANTHROPY TO PURSUE SHARED GOALS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

HIGH-NEED STUDENTS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

SUMMER LEARNING ASSOCIATION RECOGNIZED THIS PROJECT WITH THE NEW YORK

LIFE EXCELLENCE IN SUMMER LEARNING AWARD.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

AGENCY SEEKS TO IMPROVE PARTNERSHIP MANAGEMENT AND MEASUREMENT AT THE

SCHOOL AND DISTRICT LEVEL TO INCREASE ACCESS TO HIGH QUALITY EXPANDED

LEARNING OPPORTUNITIES IN BOSTON.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

MEASUREMENT FOR QUALITY IMPROVEMENT - COMMON MEASURES ACROSS

ORGANIZATIONS REVEAL TRENDS AND HELP INDIVIDUAL ORGANIZATIONS BUILD ON

STRENGTHS AND ADDRESS WEAKNESSES. THE AGENCY IS DRIVING THE ADOPTION

OF COMMON MEASURES OF PROGRAM QUALITY AND STUDENT SKILL GAIN. A

COMPREHENSIVE VIEW OF PROGRAMS INVOLVES THE PERSPECTIVES OF TRAINED

OBSERVERS, TEACHERS AND PROGRAM STAFF, AND YOUNG PEOPLE. ADDITIONALLY,

IN COLLABORATION WITH THE CITY OF BOSTON, THE AGENCY MANAGES BOSTON

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

Schedule O (Form 990 or 990-EZ) (2013)

Name of the organization BOSTON AFTER SCHOOL & BEYOND, INC.	Employer identification number 20-1308560
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NAVIGATOR, A DATABASE OF MORE THAN 1,700 AFTER-SCHOOL AND SUMMER

PROGRAMS OFFERED BY MORE THAN 700 ORGANIZATIONS. THE DATABASE IS

SEARCHABLE BY AGE, TYPE OF ACTIVITY, AND KEYWORD - WITHIN 1/4 MILE OF

ANY ADDRESS. INFORMATION HOUSED IN THE DATABASE INFORMS FUNDERS AND

POLICY-MAKERS ON PROGRAM SUPPLY AND GAPS IN SERVICES FOR YOUTH.

POLICY - THE AGENCY PARTICIPATES IN THE EVERY HOUR COUNTS COALITION, A

PARTNERSHIP OF INTERMEDIARY ORGANIZATIONS DEDICATED TO INCREASING THE

AVAILABILITY OF EXPANDED LEARNING OPPORTUNITIES THROUGH COORDINATED

CITYWIDE SYSTEMS.

STEM - THE AGENCY'S STEM INITIATIVES AIM TO MAKE LEARNING HANDS-ON AND

PROJECT-BASED FOR STUDENTS. IT ALSO ENGAGES INFORMAL SCIENCE

PARTNERS, WHICH INCLUDES AFTER-SCHOOL AND SUMMER PROGRAMS, IN STUDENT

LEARNING. THE AGENCY COORDINATES PARTNERSHIPS, PROFESSIONAL

DEVELOPMENT, AND ASSESSMENT AND EVALUATION EFFORTS AIMED AT PROVIDING

HIGH QUALITY STEM EXPERIENCES ACROSS THE CITY.

ACT SKILLS FRAMEWORK - THE ACHIEVING-CONNECTING-THRIVING (ACT) SKILLS

FRAMEWORK GUIDES THE ORGANIZATION'S INITIATIVES AND HELPS CONNECT THE

APPROACHES OF COMMUNITY ORGANIZATIONS WITH THOSE OF THE BOSTON PUBLIC

SCHOOLS. THE FRAMEWORK WAS COMMISSIONED BY THE MAYOR'S OFFICE, THE

BOSTON PUBLIC SCHOOLS AND THE AGENCY AS PART OF THE PARTNERS FOR

STUDENT SUCCESS INITIATIVE, FUNDED BY THE WALLACE FOUNDATION. THE

FRAMEWORK IS INTENDED TO GUIDE THE DEVELOPMENT OF COMMON PRACTICE

AROUND THE DEVELOPMENT OF THE SKILLS THAT HELP YOUNG PEOPLE SUCCEED IN

SCHOOL AND LIFE.

EXPENSES \$ 358,585. INCLUDING GRANTS OF \$ 28,374. REVENUE \$ 12,394.

Name of the organization BOSTON AFTER SCHOOL & BEYOND, INC.	Employer identification number 20-1308560
--	--

FORM 990, PART VI, SECTION B, LINE 11:

THE FORM 990 IS REVIEWED BY THE BOARD'S EXECUTIVE COMMITTEE,
WHICH HAS THE AUTHORITY TO APPROVE THE 990 ON BEHALF OF THE BOARD. AFTER
APPROVAL FROM THE EXECUTIVE COMMITTEE, THE BOARD OF DIRECTORS RECEIVES A
COPY FOR REVIEW.

FORM 990, PART VI, SECTION B, LINE 12C:

ANNUAL FILING BY BOARD MEMBERS AND KEY EMPLOYEES OF THE
CONFLICT OF INTEREST STATEMENT.

FORM 990, PART VI, SECTION B, LINE 15A:

THE BOARD OF DIRECTORS GATHER DATA ON SALARIES FROM COMPARABLE
ORGANIZATIONS, CONDUCT AN ANNUAL PERFORMANCE APPRAISAL, AND VOTE ON THE
EXECUTIVE DIRECTOR'S SALARY.

FORM 990, PART VI, SECTION C, LINE 19:

BOSTON AFTER SCHOOL & BEYOND, INC. DOES MAKE ITS GOVERNING
DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE
TO THE PUBLIC UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

OTHER PROFESSIONAL FEES:

PROGRAM SERVICE EXPENSES	544,921.
MANAGEMENT AND GENERAL EXPENSES	28,739.
FUNDRAISING EXPENSES	125.
TOTAL EXPENSES	573,785.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	573,785.

Name of the organization
BOSTON AFTER SCHOOL & BEYOND, INC.

Employer identification number
20-1308560

FORM 990, PART XII, LINE 2C

BOSTON AFTER SCHOOL & BEYOND'S POLICIES REGARDING
OVERSIGHT OF THE AUDIT AND SELECTION OF AN INDEPENDENT ACCOUNTANT HAVE
NOT CHANGED SINCE THE PRIOR YEAR.

