



Home (<https://www.mass.gov/orgs/the-attorney-generals-non-profit-organizationspublic-charities-division>)

Office of the Massachusetts Attorney General



Form-PC

DORER COMMUNITY SERVICE FOUNDATION INC.

AG Charity Number	Filing Year	Filing Status
069140	2022	Submitted

▼ Charity

AGO Charity Record

[Rec-66059 \(/FilingSearch/s/detail/a094U00001qq8zCQAQ\)](#)

AG Charity Number

069140

Charity Name

DORER COMMUNITY SERVICE FOUNDATION INC.

▼ eFiler Info

Filing Year

2022

Preparer Name

DAVID J DORER

▼ Charity Reviewers

Reviewer name as a confirmation

DAVID J DORER

Reviewer 1 Name

JOHN P HEBERT

Reviewer 2 Name

Reviewer1 Status

Accepted

Reviewer2 Status

Preparer authorized signatory?

Yes

▼ Organization Details

Form-PC Name

FPC-639936

Filing Status

Submitted

Current Fiscal Period Start Date

1/1/2022

eFiler Compay Name (if diff frm Charity)

Is eFiler different from org contact?

No

eFiler Name (diff frm Charity)

eFiler Street Address (diff frm Charity)

eFiler State (diff frm Charity)

eFiler Zip Code (diff frm Charity)

eFiler Phone Number (diff frm Charity)

Fax Number

Email

ddorer@dorerfoundation.org
(mailto:ddorer@dorerfoundation.org)

Organization Name

DORER COMMUNITY SERVICE FOUNDATION INC.

Organization Purpose 1

Other

Organization Purpose 2

Research

Organization Address

26 BEALS ST

Other form of Organization

Organization City

BROOKLINE

Organization State

Massachusetts

Organization Zip Code

02446

Type of Organization

Public/ Society Benefit - Multipurpose and Other

Under what section 501(c)

Current Fiscal Period End Date

12/31/2022

Form of Organization

Corporation

IRS Tax Exempt Status

Received

Is address same as org address?

Is Final Prior to Dissolution?

Mailing Address

26 BEALS ST

City

BROOKLINE

State

Massachusetts

Zip Code

02446

Phone Number

(617) 232-9133

Website

dorerfoundation.org (https://dorerfoundation.org)

Organization Created Date

12/3/2021

Organization Created Place

Massachusetts

Organization First Charity Engage Date

12/3/2021

Primary Contact Name

DAVID J DORER

Primary Contact Street Address

26 BEALS ST

Primary Contact City

BROOKLINE

Primary Contact State

Massachusetts

Primary Contact Zip Code

02446

Primary Contact Phone

3

(617) 232-9133

IRS Exemption under 501(C)

▼ Types of Solicitation activities expect to engage (Fiscal year reported here)

Sch.A1 Mass mailing

Sch.A1 door-to-door

Sch.A1 Entertainment event

Sch.A1 Telemarketing w/out sale of goods

Sch.A1 Telemarketing with sale of goods

Sch.A1 Telemarketing with sale of ads

Sch.A1 Via the Internet

Sch.A1 Raffle, bingo, or gaming event

Sch.A1 Sale of goods not by telephone

Sch.A1 Individual mailings

Sch.A1 Corporate solicitations

Sch.A1 Grant proposals

Sch.A1 Other types of solicitation

▼ Types of Solicitation activities expect to engage (Fiscal year following)

Sch.A2 Mass mailing

Sch.A2 door-to-door

Sch.A2 Entertainment event

Sch.A2 Telemarketing w/out sale of goods

Sch.A2 Telemarketing with sale of goods

Sch.A2 Telemarketing with sale of ads

Sch.A2 Via the Internet

Sch.A2 Raffle, bingo, or gaming event

Sch.A2 Sale of goods not by telephone

Sch.A2 Individual mailings

Sch.A2 Corporate solicitations

Sch.A2 Grant proposals

Sch.A2 Other types of solicitation

Direct contact with potential doners by
board/advisory board members

▼ Solicitation

Solicit contributions FY reported?

Sch.A1 Claim exemption?

No

Sch.A1 religious exemption

Sch.A1 Under 5k, 10 people exemption

AKA during Solicitation of Charity

Sch.A1 Professional solicitor

Sch.A1 Professional solicitor name

Sch.A1 Professional solicitor address

Sch.A1 Professional solicitor city

Sch.A1 Professional solicitor state

Sch.A1 Professional solicitor zip code

Sch.A1 Professional fundraising counsel

Sch.A1 Prof fundraising counsel name

Sch.A1 Prof fundraising counsel address

Sch.A1 Prof fundraising counsel city

Sch.A1 Prof fundraising counsel state

Sch.A1 Prof fundraising counsel zip code

Sch.A1 Commercial co-venturer

Sch.A1 Commercial co-venturer Name

Sch.A1 Commercial co-venturer address

Sch.A1 Commercial co-venturer city

Sch.A1 Commercial co-venturer state

Sch.A1 Commercial co-venturer zip code

Sch.A1 Own employees

Sch.A1 Volunteers

Sch.A1 Custody Indiv Responsible Name 1

Sch. A1 Custody Indiv Responsible Add 1

Sch.A1 Custody Indiv Responsible City 1

Sch.A1 Custody Indiv Responsible State 1

Sch.A1 Custody Indiv Responsible Zip 1

Sch.A1 Custody Indiv Responsible Name 2

Sch. A1 Custody Indiv Responsible Add 2

Sch.A1 Custody Indiv Responsible City 2

Sch.A1 Custody Indiv Responsible State 2

Sch.A1 Custody Indiv Responsible Zip 2

Sch.A1 Custody Indiv Responsible Name 3

Sch. A1 Custody Indiv Responsible Add 3

Sch.A1 Custody Indiv Responsible City 3

Sch.A1 Custody Indiv Responsible State 3

Sch.A1 Custody Indiv Responsible Zip 3

Sch.A1 Distrib Indiv Responsible Name 1

Sch. A1 Distrub Indiv Responsible City 1

Sch. A1 Distrib Indiv Responsible Zip 1

Sch.A1 Distrib Indiv Responsible Name 2

Sch. A1 Distrub Indiv Responsible City 2

Sch. A1 Distrib Indiv Responsible Zip 2

Sch.A1 Distrib Indiv Responsible Name 3

Sch. A1 Distrub Indiv Responsible City 3

Sch. A1 Distrib Indiv Responsible Zip 3

Solicit contributions following FY?

Yes

Sch.A2 religious exemption

AKA during Solicitation of Charity 2

DORER COMMUNITY SERVICE FOUNDATION

Sch.A2 Professional solicitor

No

Sch.A2 Professional solicitor address

Sch.A2 Professional solicitor state

Sch.A2 Professional fundraising counsel

No

Sch.A2 Prof fundraising counsel address

Sch.A2 Prof fundraising counsel state

Sch.A2 Commercial co-venturer

No

Sch.A1 Distrib Indiv Responsible Add 1

Sch.A1 Distrib Indiv Responsible State 1

Sch.A1 Distrib Indiv Responsible Add 2

Sch.A1 Distrib Indiv Responsible State 2

Sch.A1 Distrib Indiv Responsible Add 3

Sch.A1 Distrib Indiv Responsible State 3

Sch.A2 Claim exemption?

No

Sch.A2 Under 5k, 10 people exemption

Sch.A2 Professional solicitor name

Sch.A2 Professional solicitor city

Sch.A2 Professional solicitor zip code

Sch.A2 Prof fundraising counsel name

Sch.A2 Prof fundraising counsel city

Sch.A2 Prof fundraising counsel zip code

Sch.A2 Commercial co-venturer name

Sch.A2 Commercial co-venturer address

Sch.A2 Commercial co-venturer city

Sch.A2 Commercial co-venturer state

Sch.A2 Commercial co-venturer zip code

Sch.A2 Own employees

Sch.A2 Volunteers

Sch.A2 Custody Indiv Responsible Name 1
DAVID J DORER, PRESIDENT AND BOARD MEMBER

Sch.A2 Custody Indiv Responsible Add 1
26 BEALS ST

Sch.A2 Custody Indiv Responsible City 1
BROOKLINE

Sch.A2 Custody Indiv Responsible State 1
Massachusetts

Sch.A2 Custody Indiv Responsible Zip 1
02446

Sch.A2 Custody Indiv Responsible Name 2
JOHN P HEBERT, TREASURER AND BOARD
MEMBER

Sch.A2 Custody Indiv Responsible Add 2
21 AUBURN ST

Sch.A2 Custody Indiv Responsible City 2
BROOKLINE

Sch.A2 Custody Indiv Responsible State 2
Massachusetts

Sch.A2 Custody Indiv Responsible Zip 2
02446

Sch.A2 Custody Indiv Responsible Name 3

Sch.A2 Custody Indiv Responsible Add 3

Sch.A2 Custody Indiv Responsible City 3

Sch.A2 Custody Indiv Responsible State 3

Sch.A2 Custody Indiv Responsible Zip 3

Sch.A1 Distrib Indiv Responsible Name 4
DAVID J DORER, PRESIDENT AND BOARD MEMBER

Sch.A1 Distrib Indiv Responsible Add 4
26 BEALS ST

Sch.A2 Distrib Indiv Responsible City 1
BROOKLINE

Sch.A2 Distrib Indiv Responsible State 1
Massachusetts

Sch.A2 Distrib Indiv Responsible Zip 1
02446

Sch.A1 Distrib Indiv Responsible Name 5
JOHN P HEBERT, TREASURER AND BOARD
MEMBER

Sch.A1 Distrib Indiv Responsible Add 5
21 AUBURN ST

Sch.A2 Distrib Indiv Responsible City 2
BROOKLINE

Sch.A2 Distrib Indiv Responsible State 2
Massachusetts

Sch.A2 Distrib Indiv Responsible Zip 2
02446

Sch.A1 Distrib Indiv Responsible Name 6
COLIN MCARDLE, CLERK AND BOARD MEMBER

Sch.A1 Distrib Indiv Responsible Add 6
31 WEYBRIDGE RD

Sch.A2 Distrib Indiv Responsible City 3
BROOKLINE

Sch.A2 Distrib Indiv Responsible Zip 3
02445

Has this org solicitd funds out of state
No

Financial

Paid employees?
No

Charity maintain a Bank Account?
Yes

Organization's accounting method
Cash

Contributions, gifts, grants received
\$4,000

Program services and similar amounts
\$0

Management and general expenses
\$2,670

Total expenses
\$2,670

Restricted funds

Donor restrict funds loaned unrestrict
No

Restrict remove from donor-restrict fund
No

Management & Affiliates

Enjoined/prohibited from solic contrib?
No

Been refused reg?
No

Voluntary agreement of compliance?
No

Subject of a proceeding?
No

Sch.A2 Distrib Indiv Responsible State 3
Massachusetts

Solicitation States

Compensation to individuals not included

Compensation provided to consultants
Yes

No Charity Bank Reason

Gross support and revenue
\$0

Fundraising expenses
\$0

Payments to affiliates
\$0

Net assets or fund balances
\$2,030

Restrict remove from fund - explain

Donor restrict funds loaned - explain

Enj/prohib from solic contrib - explain

Been refused reg - Explanation

Voluntary agree of compliance - Explain

Subject of a proceeding - explanation

Other offices/branches/chapters/affilia

No

✓ Schedule VCO

Schedule VCO Q1

No

Schedule VCO Q2

Charitable purposes

Organization purpose

✓ Related Parties

Payment/value transfer to related party

No

Pymnt/value trnsfer to related party TA

Sold/bought asset to/from related party?

No

Sold/bought asset to/frm relted party TA

Leased assets to/from related party?

No

Leased assets to/from related party? TA

Been indebted to related party?

No

Been indebted to related party? TA

Made/help investment in related party?

No

Made/help investment in related party?TA

Furnished goods, etc to related party?

No

Acquired goods etc from RP-compensation?

No

Acquird goods etc frm RP-compensation?TA

Furnished goods, etc to related party?TA

Agreement with related party

No
Agreement with related party TA

Paid wages to related party?

No

Paid wages to related party? TA

Transferred income to/for use by RP?

No

Transferred income to/for use by RP? TA

Org party to transaction w/fin interest?

No

Org party to transactin w/fin interest?TA

Org invested in corporate stock?

No

Org invested in corporate stock? TA

Property held in name of person/org?

No

Property held in name of person/org? TA

Org make grant award/contribution?

No

Org make grant award/contribution? TA

Related party explanation - value, terms

Related party explanation - name, nature

Subject: Certificate of Solicitation

From: MA Charities No-Reply <ma_charities_donotreply@mass.gov>

Date: 8/10/23, 11:36

To: "ddorer@dorerfoundation.org" <ddorer@dorerfoundation.org>



THE COMMONWEALTH OF MASSACHUSETTS
OFFICE OF THE ATTORNEY GENERAL

ANDREA JOY CAMPBELL
ATTORNEY GENERAL

ONE ASHBURTON PLACE
BOSTON, MASSACHUSETTS 02108

(617) 727-2200
www.mass.gov/ago

Certificate of Solicitation

This certificate has been issued to the organization listed below because it is current in its filings with the Non-Profit Organizations/Public Charities Division of the Massachusetts Attorney General's Office. This registration in no manner constitutes endorsement or approval by the Commonwealth of Massachusetts of the named organization.

- **Name of the Organization:** DORER COMMUNITY SERVICE FOUNDATION INC.
- **Certificate End Date:** 5/15/2024
- **AGO Charity Number:** 069140
- **Charity Address:** 26 Beal Street, Brookline, Massachusetts, 02446

<https://www.mass.gov/service-details/overview-of-solicitation>

MASSACHUSETTS FORM PC
DORER COMMUNITY SERVICE FOUNDATION INC
EIN 87-3853277
27 June 2023

List of names, titles, and addresses (street and/or mailing) of officers, directors, trustees, and the principal salaried executives of organization.

David J. Dorer, President and Director, 26 Beals St, Brookline MA 02446 Compensation \$0.

John P. Hebert, Treasurer and Director, 21 Auburn St, Brookline MA 02446 Compensation \$0.

Colin R. McArdle, Clerk and Director, 31 Weybridge Rd, Brookline MA 02445 Compensation \$0.

MASSACHUSETTS FORM PC
DORER COMMUNITY SERVICE FOUNDATION INC
EIN 87-3853277
29 June 2023

Types of Solicitation activities in which you expect to engage (other).

Individual Board/Advisory Board Members may personally solicit donations from people or organizations within their networks.

Advisory Board Members,

Christine McArdle, 31 Weybridge Rd, Brookline MA 02445

Stephanie Lustgarten, Boston MA

MASSACHUSETTS FORM PC
DORER COMMUNITY SERVICE FOUNDATION INC
EIN 87-3853277
27 JUNE 2023

List of names, titles, and addresses (street and/or mailing) of any individual(s) authorized to sign checks, and any individual(s) responsible for: custody of funds; distribution of funds; fundraising; and custody of financial records.

Check signing, financial records, fundraising, distribution of funds, custody of funds:

David J. Dorer, President/Director, 26 Beals St, Brookline MA 02446

John P. Hebert, Treasurer/Director, 21 Auburn St, Brookline MA 02446

Fundraising, distribution of funds:

Colin R. McArdle, Clerk/Director, 31 Weybridge Rd, Brookline MA 02445

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

2022

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

For calendar year **2022** or tax year beginning , **2022**, and ending , **20**

Name of foundation DORER COMMUNITY SERVICE FOUNDATION INC		A Employer identification number 87-3853277
Number and street (or P.O. box number if mail is not delivered to street address) 26 BEALS STREET	Room/suite	B Telephone number (see instructions) 6172329133
City or town, state or province, country, and ZIP or foreign postal code BROOKLINE MA 02446		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 2,030.	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d), must be on cash basis.)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	4,000.			
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	4,000.				
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	965.			965.
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)				
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule) See Stmt	1,705.			1,705.
	24 Total operating and administrative expenses. Add lines 13 through 23	2,670.			2,670.
	25 Contributions, gifts, grants paid				
26 Total expenses and disbursements. Add lines 24 and 25	2,670.			2,670.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	1,330.				
b Net investment income (if negative, enter -0-)					
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	700.	2,030.	2,030.
	2 Savings and temporary cash investments			
	3 Accounts receivable Less: allowance for doubtful accounts			
	4 Pledges receivable Less: allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) Less: allowance for doubtful accounts			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis Less: accumulated depreciation (attach schedule)			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment: basis Less: accumulated depreciation (attach schedule)			
15 Other assets (describe)				
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	700.	2,030.	2,030.	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe)			
	23 Total liabilities (add lines 17 through 22)			
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30. <input type="checkbox"/>			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30. <input checked="" type="checkbox"/>			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds	700.	2,030.	
29 Total net assets or fund balances (see instructions)	700.	2,030.		
30 Total liabilities and net assets/fund balances (see instructions)	700.	2,030.		

Part III Analysis of Changes in Net Assets or Fund Balances			
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)		1	700.
2 Enter amount from Part I, line 27a		2	1,330.
3 Other increases not included in line 2 (itemize)		3	
4 Add lines 1, 2, and 3		4	2,030.
5 Decreases not included in line 2 (itemize)		5	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29		6	2,030.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a				
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))	
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.				(j) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
a				
b				
c				
d				
e				
2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }			2
3 Net short-term capital gain or (loss) as defined in sections 1222(f) and (g): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8	{ If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 }			3

Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948—see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____	(attach copy of letter if necessary—see instructions)	1	
b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		2	
3 Add lines 1 and 2		3	0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4	
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	0.
6 Credits/Payments:			
a 2022 estimated tax payments and 2021 overpayment credited to 2022	6a		
b Exempt foreign organizations—tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d		7	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached		8	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	0.
11 Enter the amount of line 10 to be: Credited to 2023 estimated tax Refunded		11	

Part VI-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$ _____ (2) On foundation managers. \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i> .		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV		X
8a Enter the states to which the foundation reports or with which it is registered. See instructions. MA		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation		
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2022 or the tax year beginning in 2022? See the instructions for Part XIII. If "Yes," complete Part XIII	X	
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <u>DORERFOUNDATION.ORG</u>	X	
14 The books are in care of <u>DAVID J. DORER</u> Telephone no. <u>(617) 232-9133</u> Located at <u>26 BEALS STREET BROOKLINE MA</u> ZIP+4 <u>02446</u>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year 15		
16 At any time during calendar year 2022, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country		X

Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1a(1)	X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	1a(2)	X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)	X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)	X
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	1a(5)	X
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	1a(6)	X
b If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	
c Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>		
d Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2022?	1d	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2022, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2022?	2a	X
If "Yes," list the years 20 ____ , 20 ____ , 20 ____ , 20 ____		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)	2b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 20 ____ , 20 ____ , 20 ____ , 20 ____		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	3a	X
b If "Yes," did it have excess business holdings in 2022 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2022.)	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2022?	4b	X

Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required *(continued)*

	Yes	No
5a During the year, did the foundation pay or incur any amount to:		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?		X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?		X
(3) Provide a grant to an individual for travel, study, or other similar purposes?		X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions		X
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?		X
b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions		
c Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>		
d If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d).		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.		X
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		X
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?		

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
DAVID J. DORER 26 BEALS STREET BROOKLINE MA 02446	PRESIDENT 4.00	0.		
JOHN P. HEBERT 21 AUBURN STREET BROOKLINE MA 02446	TREASURER 2.00	0.		
COLIN R. MCARDLE 31 WEYBRIDGE ROAD BROOKLINE MA 02445	CLERK 2.00	0.		

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."

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

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

Part VIII-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
<p>1 CONSULTATION FOR ELEANORE B RAINEY MEMORIAL INSTITUTE, CLEVELAND OH ANALYZED CENSUS DATA AND WROTE REPORT TO PLAN AND EVALUATE PROGRAMS. RAINEY PROVIDES ARTS PROGRAMS TO APPROXIMATELY 2,500 K-12 CHILDREN, 210 HOURS WERE SPENT CONSULTING WITH A FMV OF \$52,500.</p>	0.
<p>2 RESEARCH PRELIMINARY TO WRITING A RESEARCH PROPOSAL FOR A CAMBRIDGE MA 501(C)(3) THAT SERVES THE LOCAL HOMELESS POPULATION OF ABOUT 380 RESIDENTS. 75 HOURS WERE SPENT WITH A FMV OF \$18,500.</p>	0.
<p>3 CONSULTATION FOR HARTFORD STREET PRESBYTERIAN CHURCH IN NATICK, MA. STATISTICAL ANALYSIS OF AMERICAN COMMUNITY SERVICE DATA TO CHARACTERIZE DEMOGRAPHICS OF SURROUNDING COMMUNITIES. 61 HOURS WERE SPENT CONSULTING WITH A FMV OF \$15,200.</p>	0.
<p>4 TOWN OF BROOKLINE SENIOR CENTER, ANALYSIS OF AMERICAN COMMUNITY SURVEY DATA TO EVALUATE DEMOGRAPHICS OF SENIORS IN BROOKLINE. POPULATION SERVICED IS 60,000 RESIDENTS. 88 HOURS WERE SPENT CONSULTING WITH A FMV OF \$22,000.</p>	0.

Part VIII-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

	Amount
<p>1 -----</p>	
<p>2 -----</p>	
<p>All other program-related investments. See instructions.</p> <p>3 -----</p>	
<p>Total. Add lines 1 through 3</p>	

Part IX Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	1,077.
c	Fair market value of all other assets (see instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	1,077.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,077.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions) See Statement	4	1,077.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	0.
6	Minimum investment return. Enter 5% (0.05) of line 5	6	0.

Part X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.)

1	Minimum investment return from Part IX, line 6	1	
2a	Tax on investment income for 2022 from Part V, line 5	2a	
b	Income tax for 2022. (This does not include the tax from Part V.)	2b	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	7	

Part XI Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (c), line 26	1a	2,670.
b	Program-related investments—total from Part VIII-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	2,670.

Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2021	(c) 2021	(d) 2022
1 Distributable amount for 2022 from Part X, line 7				
2 Undistributed income, if any, as of the end of 2022:				
a Enter amount for 2021 only				
b Total for prior years: 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2022:				
a From 2017				0.
b From 2018				0.
c From 2019				0.
d From 2020				0.
e From 2021				0.
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2022 from Part XI, line 4: \$ <u>2,670.</u>				
a Applied to 2021, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions)				
c Treated as distributions out of corpus (Election required—see instructions)				
d Applied to 2022 distributable amount				2,670.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2022 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount—see instructions		0.		
e Undistributed income for 2021. Subtract line 4a from line 2a. Taxable amount—see instructions			0.	
f Undistributed income for 2022. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2023				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)				
8 Excess distributions carryover from 2017 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2023. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2018				0.
b Excess from 2019				0.
c Excess from 2020				0.
d Excess from 2021				0.
e Excess from 2022				0.

Part XIII Private Operating Foundations (see instructions and Part VI-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2022, enter the date of the ruling 07/21/2022

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year				(e) Total
	(a) 2022	(b) 2021	(c) 2020	(d) 2019	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed	0.	0.			0.
b 85% (0.85) of line 2a	0.	0.			0.
c Qualifying distributions from Part XI, line 4, for each year listed	2,670.	2,000.			4,670.
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	2,670.	2,000.	0.	0.	4,670.
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test—enter:					
(1) Value of all assets	2,030.	700.			2,730.
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	2,030.	700.			2,730.
b "Endowment" alternative test—enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed					
c "Support" alternative test—enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)	4,000.	2,700.			6,700.
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XIV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

- a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

- b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

- a** The name, address, and telephone number or email address of the person to whom applications should be addressed:

See Supplementary Information Statement
- b** The form in which applications should be submitted and information and materials they should include:

- c** Any submission deadlines:

- d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XIV **Supplementary Information** *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
Total				3a
b <i>Approved for future payment</i>				
Total				3b

COPY

DORER COMMUNITY SERVICE FOUNDATION INC

87-3853277

Form 990-PF: Return of Private Foundation

Part XV, Line 2: Supplementary Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc.

Continuation Statement

Name and Address Information	Form Information	Submission Information	Restrictions
DAVID J. DORER 26 BEALS STREET BROOKLINE, MA 02446	LETTER OR EMAIL		TO RECEIVE CONSULTING SERVICES, GRANTEE / CLIENT ORGANIZATION MUST BE A 501(C)(3) NONPROFIT OR GOVERNMENT ENTITY

COPY

Additional Information From Form 990-PF: Return of Private Foundation

Form 990-PF: Return of Private Foundation

Other Expenses

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
BANK FEES	29.			29.
OFFICE EXPENSES	354.			354.
PERMITS & FEES	884.			884.
POSTAGE & SHIPPING	20.			20.
WEBSITE HOSTING & MAINTENANCE	418.			418.
Total	1,705.			1,705.

Form 990-PF: Return of Private Foundation

Part X, Line 4, Cash Deemed Held For Charitable Activities

Explanation Statement

Cash Deemed Charitable

\$1,077 IS THE MINIMUM BALANCE NEEDED FOR ANTICIPATED ADMINISTRATIVE EXPENSES RELATED TO CHARITABLE ACTIVITIES.

COPY

Additional Information

2022

Name DORER COMMUNITY SERVICE FOUNDATION INC	Identification Number 87-3853277
--	-------------------------------------

PART VIII SUMMARY OF DIRECT CHARITABLE ACTIVITIES (CONTINUED)

5. RESEARCH PRELIMINARY TO DEVELOPING RESEARCH PROPOSALS FOR BROOKLINE MA DEPARTMENT OF PUBLIC HEALTH. POPULATION SERVED: 60,000 BROOKLINE RESIDENTS. 47 HOURS OF SERVICES WERE SPENT WITH AN APPROXIMATE VALUE OF \$11,700. EXPENSES: \$0

COPY