

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

2001

Department of the Treasury Internal Revenue Service

Note The organization may be able to use a copy of this return to satisfy state reporting requirements

For calendar year 2001, or tax year beginning 2001, and ending

G Check all that apply Initial return Final return Amended return Address change Name change

Use the IRS label Otherwise, print or type See Specific Instructions

Name of organization: THERESA ALESSANDRA RUSSO FOUNDATION, INC
Number and street (or P O box number if mail is not delivered to street address): C/O VINCENT J RUSSO & ASSOCIATES, P C
Room/suite:
1600 STEWART AVENUE, SUITE 300
City or town, state, and ZIP code: WESTBURY, NY 11590

A Employer identification number: 11-3126316
B Telephone number (see page 10 of the instructions): (516) 683-1717

C If exemption application is pending check here
D 1 Foreign organizations check here
2 Foreign organizations meeting the 85% test, check here and attach computation
E If private foundation status was terminated under section 507(b)(1)(A) check here
F If the foundation is in a 60-month termination under section 507(b)(1)(B) check here

H Check type of organization X Section 501(c)(3) exempt private foundation
Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col (c), line 16) 63,700
J Accounting method X Cash Accrual
Other (specify)
(Part I, column (d) must be on cash basis)

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 page 10 of the instructions))

Table with 5 columns: (a) Revenue and expenses per books, (b) Net investment income, (c) Adjusted net income, (d) Disbursements for charitable purposes (cash basis only). Rows include contributions, interest, dividends, gross rents, net gain, capital gain, income modifications, total operating and administrative expenses, and net investment income.

SCANNED AUG 23 '02

Operating and Administrative Expenses



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P 21

Part I 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				
	2	Savings and temporary cash investments	66,709	63,700	63,700	
	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 page 15 of the 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				
	10 a	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	1,903				
	Less accumulated depreciation (attach schedule)	1,903	110			
15	Other assets (describe)					
16	<b>Total assets (to be completed by all filers - see page 16 of the instructions. Also, see page 1, item I)</b>	<b>66,819</b>	<b>63,700</b>	<b>63,700</b>		
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	<b>Total liabilities (add lines 17 through 22)</b>					
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31					
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
	Organizations that do not follow SFAS 117, check here and complete lines 27 through 31 <input checked="" type="checkbox"/>					
	27	Capital stock, trust principal, or current funds				
	28	Paid-in or capital surplus - or land, bldg and equipment fund				
	29	Retained earnings - accumulated income - endowment - or other funds	66,819	63,700		
30	<b>Total net assets or fund balances (see page 17 of the instructions)</b>	<b>66,819</b>	<b>63,700</b>			
31	<b>Total liabilities and net assets/fund balances (see page 17 of the instructions)</b>	<b>66,819</b>	<b>63,700</b>			

**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 30 (must agree with end-of-year figure reported on prior year's return)	1	66,819
2	Enter amount from Part I, line 27a	2	-3,119
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3	4	63,700
5	Decreases not included in line 2 (itemize)	5	
6	<b>Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30</b>	6	<b>63,700</b>

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., 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			(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
(i) F M V 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(5) and (6) If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions) If (loss), enter -0- in Part I, line 8		3	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the organization liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No  
If 'Yes,' the organization does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2000	15,555	NONE	NONE
1999	15,553	NONE	NONE
1998	34,778	NONE	NONE
1997	27,020	NONE	NONE
1996	NONE	NONE	NONE

2 Total of line 1, column (d)	2	NONE
3 Average distribution ratio for the 5-year base period-divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	NONE
4 Enter the net value of noncharitable-use assets for 2001 from Part X, line 5	4	NONE
5 Multiply line 4 by line 3	5	NONE
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	22
7 Add lines 5 and 6	7	22
8 Enter qualifying distributions from Part XII, line 4	8	44,688

If line 8 is equal to or greater than line 7 check the box in Part VI line 1b and complete that part using a 1% tax rate See the Part VI instructions on page 18

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the Instructions)**

1 a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter 'N/A' on line 1 Date of ruling letter _____ (attach copy of ruling letter if necessary - see instructions)		
b	Domestic organizations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	22
c	All other domestic organizations enter 2% of line 27b Exempt foreign organizations enter 4% 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	22
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	NONE
5	Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0-	5	22
6	Credits/Payments		
a	2001 estimated tax payments and 2000 overpayment credited to 2001	6a	
b	Exempt foreign organizations - tax withheld at source	6b	NONE
c	Tax paid with application for extension of time to file (Form 8868)	6c	NONE
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments Add lines 6a through 6d	7	NONE
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	22
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11	Enter the amount of line 10 to be Credited to 2002 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

**Part VII-A Statements Regarding Activities**

	Yes	No
1 a		X
b		X
c	N/A	
2		X
3		X
4 a		X
4 b	N/A	
5		X
6	X	
7	X	
8 a		
8 b	X	
9		X
10		X
11	N/A	

12 The books are in care of VINCENT J. RUSSO & ASSOCIATES Telephone no 516-683-1717  
 Located at 1600 STEWART AVENUE, WESTBURY, NEW YORK ZIP+4 11590

13 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here   
 and enter the amount of tax-exempt interest received or accrued during the year 13

Part VII-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

Table with columns for question text, Yes/No checkboxes, and Yes/No columns. Rows include questions 1a through 6b regarding disqualifying activities, disaster assistance, and business holdings.

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

**1** List all officers, directors, trustees, foundation managers and their compensation (see page 20 of the 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
SEE STATEMENT 5		NONE	NONE	NONE

**2** Compensation of five highest-paid employees (other than those included on line 1 - see page 21 of the 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 ▶ NONE

**3** Five highest-paid independent contractors for professional services - (see page 21 of the 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 ▶ NONE

**Part IX-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
<b>1</b> FUNDS ARE DISTRIBUTED TO OTHER TAX-EXEMPT ORGANIZATIONS FOR THEIR EXEMPT PURPOSES	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments** (see page 21 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 <u>NONE</u>	
2	
All other program related investments See page 22 of the instructions	
3 <u>NONE</u>	
<b>Total</b> Add lines 1 through 3	

**Part X Minimum Investment Return** (All domestic foundations must complete this part Foreign foundations, see page 22 of the 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	1 a	
b Average of monthly cash balances	1 b	
c Fair market value of all other assets (see page 22 of the instructions)	1 c	NONE
d Total (add lines 1a, b, and c)	1 d	NONE
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1 e	
2 Acquisition indebtedness applicable to line 1 assets	2	NONE
3 Subtract line 2 from line 1d	3	NONE
4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 23 of the instructions)	4	NONE
5 Net value of noncharitable-use assets Subtract line 4 from line 3 Enter here and on Part V, line 4	5	NONE
6 Minimum investment return Enter 5% of line 5	6	NONE

**Part XI Distributable Amount** (see page 23 of the 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 X, line 6	1	NONE
2 a Tax on investment income for 2001 from Part VI, line 5	2 a	22
b Income tax for 2001 (This does not include the tax from Part VI)	2 b	
c Add lines 2a and 2b	2 c	22
3 Distributable amount before adjustments Subtract line 2c from line 1	3	-22
4 a Recoveries of amounts treated as qualifying distributions	4 a	NONE
b Income distributions from section 4947(a)(2) trusts	4 b	
c Add lines 4a and 4b	4 c	NONE
5 Add lines 3 and 4c	5	-22
6 Deduction from distributable amount (see page 23 of the instructions)	6	NONE
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	

**Part XII Qualifying Distributions** (see page 23 of the instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1 a	44,688
b Program-related investments - Total from Part IX-B	1 b	NONE
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	NONE
3 Amounts set aside for specific charitable projects that satisfy the		
a Suitability test (prior IRS approval required)	3 a	NONE
b Cash distribution test (attach the required schedule)	3 b	NONE
4 Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8 and Part XIII, line 4	4	44,688
5 Organizations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see page 24 of the instructions)	5	22
6 Adjusted qualifying distributions Subtract line 5 from line 4	6	44,666

**Note** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

**Part XIII Undistributed Income** (see page 24 of the instructions)

	(a) Corpus	(b) Years prior to 2000	(c) 2000	(d) 2001
1 Distributable amount for 2001 from Part XI, line 7				NONE
2 Undistributed income if any as of the end of 2000				
a Enter amount for 2000 only			NONE	
b Total for prior years		NONE		
3 Excess distributions carryover, if any, to 2001				
a From 1996	NONE			
b From 1997	NONE			
c From 1998	NONE			
d From 1999	NONE			
e From 2000	NONE			
f Total of lines 3a through e	NONE			
4 Qualifying distributions for 2001 from Part XII, line 4	NONE			
a Applied to 2000, but not more than line 2a			NONE	
b Applied to undistributed income of prior years (Election required - see page 24 of the instructions)		NONE		
c Treated as distributions out of corpus (Election required - see page 24 of the instructions)	NONE			
d Applied to 2001 distributable amount				NONE
e Remaining amount distributed out of corpus	NONE			
5 Excess distributions carryover applied to 2001 (if an amount appears in column (d) the same amount must be shown in column (a))	NONE			NONE
6 Enter the net total of each column as indicated below				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	NONE			
b Prior years undistributed income Subtract line 4b from line 2b		NONE		
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		NONE		
d Subtract line 6c from line 6b Taxable amount - see page 25 of the instructions		NONE		
e Undistributed income for 2000 Subtract line 4a from line 2a Taxable amount - see page 25 of the instructions			NONE	
f Undistributed income for 2001 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2002				NONE
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(E) or 4942(g)(3) (see page 25 of the instructions)	NONE			
8 Excess distributions carryover from 1996 not applied on line 5 or line 7 (see page 25 of the instructions)	NONE			
9 Excess distributions carryover to 2002 Subtract lines 7 and 8 from line 6a	NONE			
10 Analysis of line 9				
a Excess from 1997	NONE			
b Excess from 1998	NONE			
c Excess from 1999	NONE			
d Excess from 2000	NONE			
e Excess from 2001	NONE			

**Part XIV Private Operating Foundations** (see page 25 of the instructions and Part VII-A, question 9) **NOT APPLICABLE**

**1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation and the ruling is effective for 2001, enter the date of the ruling ▶

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

	Tax year		Prior 3 years		(e) Total
	(a) 2001	(b) 2000	(c) 1999	(d) 1998	
<b>2 a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
<b>b</b> 85% of line 2a					
<b>c</b> Qualifying distributions from Part XII line 4 for each year listed					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test - enter					
<b>(1)</b> Value of all assets					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test. Enter 2/3 of minimum investment return shown in Part X line 6 for each year listed					
<b>c</b> "Support" alternative test - enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)) or royalties)					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(ii)					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information** (Complete this part only if the organization had \$5,000 or more in assets at any time during the year - see page 26 of the 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) )

N/A

**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

N/A

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc , Programs**

Check here  if the organization only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the organization makes gifts, grants, etc (see page 26 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

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

**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 XV** Supplementary Information (continued)

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

Recipient Name and address (home or business)	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
<p>a <i>Paid during the year</i></p> <p>SEE STATEMENT 6</p>				
<b>Total</b>			▶ 3a	<b>44,688</b>
<p>b <i>Approved for future payment</i></p>				
<b>Total</b>			▶ 3b	





FORM 990PF, PART I - CONTRIBUTIONS, GIFTS AND GRANTS RECEIVED

NAME AND ADDRESS	DATE	DIRECT PUBLIC SUPPORT
THERESA FOUNDATION		5,470
THERESA DRESS DOWN DAY		261
THERESA AWARDS DINNER		43,538.
GIFT OF LIFE CARDS		3,038
TARF GOLF OUTING		22,755.
THERESA FUN DAY		3,455.
THERESA FOUNDATION/HOLIDAY		2,193.
TOTAL CONTRIBUTION AMOUNTS		80,710.

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
JP MORGAN ACCOUNTS	2,194.	2,194
TOTAL	2,194.	4,224

FORM 990PF, PART I - TAXES  
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DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----
OTHER TAXES	81
TOTALS	----- 81 =====

FORM 990PF, PART I - OTHER EXPENSES  
 =====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----
TELEPHONE	1,234.
ADVERTISING	234.
THERESA FUN DAY EXPENSES	1,069
SUPPLIES	1,252.
NEWSLETTER EXPENSE	3,133.
POSTAGE	125.
OFFICE-DISBURSEMENT	215
THERESA AWARDS DINNER	19,151.
TARF GOLF OUTING	14,407.
THERESA DRESS DOWN DAY	324
	-----
TOTALS	41,144 =====

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
SUSAN RUSSO 91 BIARRITZ STREET LIDO BEACH, NY 11561	PRESIDENT AS NEC.	NONE	NONE	NONE
FATHER JAMES MALTESE 169 E. MARKET STREET LONG BEACH, NY 11561	VICE-PRES AS NEC.	NONE	NONE	NONE
VINCENT J. RUSSO 91 BIARRITZ STREET LIDO BEACH, NY 11561	TREASURER AS NEC	NONE	NONE	NONE
JUDY MURDAUGH JACKSON 3624 SOUTHVIEW AVENUE WANTAGH, NY 11793	SECRETARY AS NEC.	NONE	NONE	NONE
GRAND TOTALS		NONE	NONE	NONE

TERESA ALESSANDRA RUSSO FOUNDATION, INC  
 FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR  
 AND  
 FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
MS SYLVIA TORTORA RESEARCH FOUNDATION OF SUNY COLLEGE AT BROCKPORT 350 NEW CAMPUS DR , BROCKPORT, NY 11420-2932	CAMP ABILITIES FOR BLIND/VISUALLY IMP CHILDR	1,500
LONG BEACH REGIONAL CATHOLIC SCHOOL 735 WEST BROADWAY, LONG BEACH, NY 11561	RECOGNIZE A 8TH GRADER FOR COMMUNITY SERVICE	250
MS LISA GATTI, PAL-O-MINE EQUESTRIAN, INC 33 LLOYD HARBOR ROAD, HUNTINGTON, NY 11743	THERAPEUTIC HORSEBACK RIDING FOR DISABLED	2,800
JUSTIN WEISNER LEARNING CENTER 1050 SOUTH TUTTLE AVENUE, SARASOTA, FL 34237	MAINTAIN SERVICES OF A SPECIAL ED TEACHER	500
MS LYNN SHELTON EL RIO HEALTH CARE- REACH OUT AND READ PROGRAM 839 WEST CONGRESS STREET, TUCSON, AZ 85745	DISABILITY AWARENESS PROGRAM & PROVIDES BOOKS	500
MS ELAINE LEVENTHAL THE WE CARE FUND-MASSAU COUNTY BAR ASSOCIATION 5TH AND WEST STREETS, MINEOLA, NY 11501	SPONSORSHIP FOR A WEEK AT CAMP KIWANIS	500
HARRY & EVELYN PEREZ DIRECT FINANCIAL SUPPORT 1611 MORGAN STREET, VALLEY STREAM, NY 11560	TO FUND CONSTRUCTION OF ADAPTIVE BATHROOM	4,688
TILT DANCE COMPANY 3557-B BALDWIN AVENUE, MAKAWAO, HI 96768	PROVIDE FOR 2 DANCE TEACHERS & STUDIO SPACE	2,300
TECHNOLOGY FOR LANGUAGE AND LEARNING, INC P O BOX 327, EAST ROCKAWAY, NY 11518-0327	ESTABLISH SOFTWARE LENDING LIBRARY/COMPUTER	1,000

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AND

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
HOLY ANGELS, INC 6600 WILKINSON BOULEVARD, P O BOX 710 BELMONT, NC 28012	NON-PROFIT	OPERATING COSTS OF CREATIVE ARTS PROGRAM	2,500
FULL RADIUS DANCE PO BOX 54453 ATLANTA, GA	NON-PROFIT	POSITIVE MOTION PROGRAM FOR VISUALLY IMPAIRED	1,600
CAMP ABILITIES 2001- MS SYLVIA TORTORA RESEARCH FOUNDATION OF SUNY COLLEGE AT BROCKPORT 350 NEW CAMPUS DR , BROCKPORT, NY 11420-2932	NON-PROFIT	CAMP ABILITIES FOR BLIND/VISUALLY IMPAIRED	2,000
NORTHERN WESTCHESTER CENTER FOR THE ARTS 272 NORTH BEDFORD ROAD MT KISCO, NY 10549	NON-PROFIT	DANCE CLASSES FOR CHILDREN IN WHEELCHAIRS	1,500
LONG ISLAND INFANT AND DEVELOPMENTAL PROGRAM 2174 HEWLETT AVE, SUITE 105, MERRICK, NY 11566-3612	NON-PROFIT	FUNDS TO ENHANCE LIIDP LIBRARY	2,600
MS CAROL ROSETO, LAWRENCE PUBLIC SCHOOLS 1 RILLY ROAD, CEDARHURST, NY 11516	NON-PROFIT	PURCHASE OF PROSTHETIC LIMB FOR STUDENT	1,250
JOHN AND SHARON BELCHER ROUTE 1 LYLESVILLE, NC	NONE	ASSIST IN PMT OF MEDICAL EXPENSES FOR CHILD	1,700
MOUNT HOPE FAMILY CENTER 187 EBINBURGH STREET, ROCHESTER, NY 14608	NON-PROFIT	RENOVATION OF SCHOOL SPACE	2,500
FEGS-LONG ISLAND DIVISION 6900 JERICHO TURNPIKE , SUITE 309, SYOSSET,NY 11791	NON-PROFIT	SUPPORTS FAMILY COUNSELING, EDUCATION PROGRAM	500

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ALL ISLAND SPORTS 120 N JEFFERSON AVENUE, LINDENHURST, NY 11757	NON-PROFIT	CONTINUED SUPPORT FOR SPECIAL NEED RECREATION	4,000
ACCESSIBLE ARTS, INC 1100 STATE AVENUE, KANSAS CITY, KS 66102	NON-PROFIT	FUNDING TO WRITE & PRODUCE A MUSICAL PLAY	3,000
INDIANA UNIVERSITY FOUNDATION-CRANIOFACIAL PROGRAM 702 BARNHILL DRIVE #2514 INDIANAPOLIS, INDIANA 46202-5200	NON-PROFIT	CAMP THAT HELPS CHILDREN WITH FACIAL DEFECTS	4,000
VALLEY STREAM NORTH HIGH SCHOOL 750 HERMAN AVENUE, FRANKLIN SQUARE, NY 11010	NON-PROFIT	KIDS ON THE BLOCK PROGRAM	2,000
UNITED CEREBRAL PALSY OF NASSAU COUNTY 380 WASHINGTON AVENUE, ROOSEVELT, NY	NON-PROFIT	SPECIAL KEYBOARD FOR MUSIC THERAPY CLASSES	500
THE CENTER FOR DISCOVERY BOX 840- BENHOSCHE ROAD, HARRIS, NY 12742-0840	NON-PROFIT	EDUCATIONAL CLINICAL EXPERIENCES FOR FAMILIES	500
HOLY ANGELS FOUNDATION 6600 WILKINSON BOULEVARD, P O BOX 710 BELMONT, NC 28012	NON-PROFIT	SUPPORT CREATIVE ARTS PROGRAM	500

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AND

RECIPIENT NAME AND ADDRESS

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

TOTAL CONTRIBUTIONS PAID

44,688



# Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

**Note** Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

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

**Note** Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065 1066 or 1041

Type or print	Name of Exempt Organization	Employer identification number
	THERESA ALESSANDRA RUSSO FOUNDATION, INC	11-3126316
	Number, street, and room or suite no If a P O box, see instructions	
File by the due date for filing your return See instructions	C/O VINCENT J RUSSO & ASSOCIATES, P C	
	City, town or post office, state, and ZIP code For a foreign address, see instructions	
	WESTBURY, NY 11590	

### Check type of return to be filed (file a separate application for each return)

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

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the **whole group**, check this box  If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6-month, for **990-T corporation**) extension of time until 08/15, **2002**, to file the exempt organization return for the organization named above The extension is for the organization's return for

▶  calendar year 2001 or

▶  tax year beginning \_\_\_\_\_, \_\_\_\_\_, and ending \_\_\_\_\_

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

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions \$ NONE

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit \$ \_\_\_\_\_

c **Balance Due** Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions \$ NONE

### Signature and Verification

Under penalties of perjury, I declare that I have examined this form including accompanying schedules and statements and to the best of my knowledge and belief it is true, correct and complete, and that I am authorized to prepare this form

Signature ▶ \_\_\_\_\_ Title ▶ \_\_\_\_\_ Date ▶ \_\_\_\_\_

For Paperwork Reduction Act Notice, see Instruction