

Return of Organization Exempt From Income Tax

2000

Department of the Treasury Internal Revenue Service

Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation), section 527 or section 4947(a)(1) nonexempt charitable trust

Open to Public Inspection

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

A For the 2000 calendar year, or tax year period beginning 7/01, 2000, and ending 6/30, 2001

- B Check if applicable: Change of address, Change of name, Initial return, Final return, Amended return

Please use IRS label or print or type See Specific Instructions.

C NEIGHBORHOOD ECONOMIC DEVELOPMENT ADVOCACY PROJECT, INC 73 SPRING STREET #506 NEW YORK, NY 10012

D Employer identification number 13-3842270 E Telephone number 212-680-5100 F Check if application pending

G Organization type (check only one) Section 501(c)(3) (insert no) 527 OR 4947(a)(1)

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

J Accounting method Cash Accrual Other (specify)

K Check here if the organization's gross receipts are normally not more than \$25,000 The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data Some states require a complete return

Note H and I are not applicable to section 527 orgs H(a) Is this a group return filed for affiliates? H(b) If "Yes," enter number of affiliates H(c) Are all affiliates included? H(d) Is this a separate return filed by an organization covered by a group ruling? I Enter 4-digit group exemption no (GEN) L Check this box if the organization is not required to attach Schedule B (Form 990 or 990-EZ)

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 16)

Table with 21 rows and multiple columns for revenue, expenses, and net assets. Includes a 'RECEIVED' stamp from the IRS dated FEB 28 2002.

SCANNED MAR 07 2002

Part II: Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See Specific Instructions on page 20.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (att. sch) See Stmt 1 (cash \$ 19,980 non-cash \$)	19,980	19,980		
23	Specific assistance to individuals (att. sch)				
24	Benefits paid to or for members (att. sch)				
25	Compensation of officers, directors, etc	60,000	60,000		
26	Other salaries and wages	83,834	37,883	34,463	11,488
27	Pension plan contributions				
28	Other employee benefits	6,770	5,131	1,229	410
29	Payroll taxes	11,004	8,340	1,998	666
30	Professional fundraising fees				
31	Accounting fees	2,750		2,750	
32	Legal fees				
33	Supplies	2,100	1,680	315	105
34	Telephone	5,778	4,622	867	289
35	Postage and shipping	1,257	951	247	59
36	Occupancy	25,150	20,120	3,773	1,257
37	Equipment rental and maintenance				
38	Printing and publications	703	240	448	15
39	Travel	965	772	193	
40	Conferences, conventions, and meetings	1,109		1,109	
41	Interest				
42	Depreciation, depletion, etc (attach schedule)	1,911		1,911	
43	Other expenses (itemize) a Statement 2	96,116	81,338	14,683	95
b					
c					
d					
e					
44	Total functional expenses (add lines 22 thru 43) Organizations completing columns (B)-(D), carry these totals to lines 13 - 15.	319,427	241,057	63,986	14,384

Reporting of Joint Costs. Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____, (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III: Statement of Program Service Accomplishments (See Specific Instructions on page 23)

What is the organization's primary exempt purpose? See Statement 3	Program Service Expenses (Required for 501(c)(3) and (4) orgs and 4947(a)(1) trusts but optional for others)
a To provide organizing, technical and legal support on a broad range of community economic development and reinvestment matters. (Grants and allocations \$ 19,980)	241,057
b (Grants and allocations \$)	
c (Grants and allocations \$)	
d (Grants and allocations \$)	
e Other program services (attach schedule) (Grants and allocations \$)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	241,057

Part IV Balance Sheets (See Specific Instructions on page 23)

Note		Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		(A) Beginning of year		(B) End of year
ASSETS	45	Cash - non-interest-bearing			45	
	46	Savings and temporary cash investments		64,368	46	123,063
	47 a	Accounts receivable	47a			
	b	Less allowance for doubtful accounts	47b		47c	
	48 a	Pledges receivable	48a			
	b	Less allowance for doubtful accounts	48b		48c	
	49	Grants receivable			49	
	50	Receivables from officers, directors, trustees, and key employees (attach sch)			50	
	51 a	Other notes and loans receivable (attach schedule)	51a			
	b	Less allowance for doubtful accounts	51b		51c	
	52	Inventories for sale or use			52	
	53	Prepaid expenses and deferred charges			53	
	54	Investments - securities (attach schedule)			54	
55 a	Investments - land, buildings, and equipment basis	55a				
b	Less accumulated depreciation (attach schedule)	55b		55c		
56	Investments - other (attach schedule)			56		
57 a	Land, buildings, and equipment basis	57a	11,488			
b	Less accumulated depreciation (attach schedule) Stmt 4	57b	2,668	7,178	57c	8,820
58	Other assets (describe ▶)			58		
59	Total assets (add lines 45 through 58) (must equal line 74)		71,546	59	131,883	
LIABILITIES	60	Accounts payable and accrued expenses		2,750	60	2,750
	61	Grants payable			61	
	62	Deferred revenue			62	
	63	Loans from officers, directors, trustees, and key employees (attach schedule)			63	
	64 a	Tax-exempt bond liabilities (attach schedule)			64a	
	b	Mortgages and other notes payable (attach schedule)			64b	
	65	Other liabilities (describe ▶)			65	
66	Total liabilities (add lines 60 through 65)		2,750	66	2,750	
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74					
	67	Unrestricted		68,796	67	92,440
	68	Temporarily restricted			68	36,693
	69	Permanently restricted			69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74					
	70	Capital stock, trust principal, or current funds			70	
	71	Paid-in or capital surplus, or land, building, and equipment fund			71	
	72	Retained earnings, endowment, accumulated income, or other funds			72	
73	Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19 and column (B) must equal line 21)		68,796	73	129,133	
74	Total liabilities and net assets/fund balances (add lines 66 and 73)		71,546	74	131,883	

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See Specific Instructions, page 25)

a	Total revenue, gains, and other support per audited financial statements	a	379,764
b	Amounts included on line a but not on line 12, Form 990	b	
(1)	Net unrealized gains on investments		\$
(2)	Donated services and use of facilities		\$
(3)	Recoveries of prior year grants		\$
(4)	Other (specify)		
	Add amounts on lines (1) through (4)	b	
c	Line a minus line b	c	379,764
d	Amounts included on line 12, Form 990 but not on line a	d	
(1)	Investment expenses not included on line 6b, Form 990		\$
(2)	Other (specify)		
	Add amounts on lines (1) and (2)	d	
e	Total revenue per line 12, Form 990 (line c plus line d)	e	379,764

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements	a	319,427
b	Amounts included on line a but not on line 17, Form 990	b	
(1)	Donated services and use of facilities		\$
(2)	Prior year adjustments reported on line 20, Form 990		\$
(3)	Losses reported on line 20, Form 990		\$
(4)	Other (specify)		
	Add amounts on lines (1) through (4)	b	
c	Line a minus line b	c	319,427
d	Amounts included on line 17, Form 990 but not on line a	d	
(1)	Investment expenses not included on line 6b, Form 990		\$
(2)	Other (specify)		
	Add amounts on lines (1) and (2)	d	
e	Total expenses per line 17, Form 990 (line c plus line d)	e	319,427

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see Specific Instructions on page 25)

(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 & deferred compensation	(E) Expense account and other allowances
Sarah I. Ludwig 299 Broadway, Suite 706 New York, NY 10034	Executive Dir 40	60,000	0	0
Hilary Botein 490 Second Street #3 Brooklyn, NY 11215	Secretary As needed	0	0	0
Maria E. Navarro 99 Church Street New York, NY 10007	Treasurer As needed	0	0	0
Minifa Akinwole Bandele 73 Spring Street 506 New York, NY 10012	Vice Presiden As needed	0	0	0
Michael Bowen 73 Spring Street 506 New York, NY 10012	Director As needed	0	0	0
April G. Tyler 73 Spring Street 506 New York, NY 10012	Director As needed	0	0	0
Clarke Bruno 73 Spring Street 506 New York, NY 10012	President As needed	0	0	0

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations?
If "Yes," attach schedule - see Specific Instructions on page 26

Yes No

Part VI Other Information (See Specific Instructions on page 26)		N/A	Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity			X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes			X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?			X
78b	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement			X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?			X
80b	If "Yes," enter the name of the organization <u>N/A</u> and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt			
81a	Enter the amount of political expenditures, direct or indirect, as described in the instructions for line 81	81a	0	
81b	Did the organization file Form 1120-POL for this year?			X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?			X
82b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II (See instructions for reporting in Part III)	82b	N/A	
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?		X	
83b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?		X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?			X
84b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			N/A
85a	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?			N/A
85b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year			N/A
85c	c Dues, assessments, and similar amounts from members	85c	N/A	
85d	d Section 162(e) lobbying and political expenditures	85d	N/A	
85e	e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A	
85f	f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A	
85g	g Does the organization elect to pay the section 6033(e) tax on the amount in 85f?			N/A
85h	h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?			N/A
86a	501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12	86a	N/A	
86b	b Gross receipts, included on line 12, for public use of club facilities	86b	N/A	
87a	501(c)(12) organizations Enter a Gross income from members or shareholders	87a	N/A	
87b	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	N/A	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 30.7701-3? If "Yes," complete Part IX			X
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <u>0</u> , section 4912 <u>0</u> , section 4955 <u>0</u>			
89b	501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction			X
	c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			0
	d Enter Amount of tax in 89c, above, reimbursed by the organization			0
90a	List the states with which a copy of this return is filed <u>New York</u>			
90b	Number of employees employed in the pay period that includes March 12, 2000 (See instructions)	90b	6	
91	The books are in care of <u>Sarah I. Ludwig</u> Telephone no <u>212-393-9595</u> Located at <u>299 Broadway, Suite 706, New York, NY</u> ZIP code <u>10007</u>			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year	92	N/A	<input type="checkbox"/>

Part VII Analysis of Income-Producing Activities (See Specific Instructions on page 30)

	Unrelated business income		Excluded by section 512, 513, or 514		(E)
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	Related or exempt function income
93 Program service revenue					
a Service fees					10,047
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings & temporary cash investments			14	699	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain/loss from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a Miscellaneous in					659
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				699	10,706
105 Total (add line 104, columns (B), (D), and (E))					11,405

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See Specific Instructions on page 31)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
93a	Fees received while performing consulting in accordance with the organizations objectives.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions on page 31)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See Specific Instructions on page 31)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

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, the information on this return is true and correct. This return is based on all information of which preparer has knowledge.

Date: 2/1/02
 Type or print name and title: Sarah Ludwig, Exec. Dir.

Part III Statements About Activities

	Yes	No
<p>1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ <u>N/A</u> Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities</p>	1	X
<p>2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any of its trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary</p>		
<p>a Sale, exchange, or leasing of property?</p>	2a	X
<p>b Lending of money or other extension of credit?</p>	2b	X
<p>c Furnishing of goods, services, or facilities?</p>	2c	X
<p>d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? See Form 990, Part V</p>	2d	X
<p>e Transfer of any part of its income or assets? If the answer to any question is "Yes," attach a detailed statement explaining the transactions</p>	2e	X
<p>3 Does the organization make grants for scholarships, fellowships, student loans, etc.?</p>	3	X
<p>4a Do you have a section 403(b) annuity plan for your employees?</p>	4a	X
<p>b Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs qualify to receive payments. (See page 2 of the instructions)</p>		

Part IV Reason for Non-Private Foundation Status (See pages 2 through 5 of the instructions)

- The organization is not a private foundation because it is (Please check only ONE applicable box)
- 5 A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
 - 6 A school Section 170(b)(1)(A)(ii) (Also complete Part V, page 5)
 - 7 A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
 - 8 A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
 - 9 A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state
 ► _____
 - 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the Support Schedule in Part IV-A)
 - 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)
 - 11b A community trust. Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)
 - 12 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 charitable, etc., 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) (Also complete the Support Schedule in Part IV-A)
 - 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting
 Note You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 1999	(b) 1998	(c) 1997	(d) 1996	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	147,699	121,781	115,165	108,060	492,705
16 Membership fees received					
17 Gross receipts from admissions merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable etc purpose	35,381	5,525	6,860	4,419	52,185
18 Gross income from interest dividends, amounts received from payments on securities (section 512(a)(5)), rents royalties and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30 1975	903	671	437	563	2,574
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income Attach a sch Do not include gain or (loss) from sale of capital assets See St 5		1,808	40	234	2,082
23 Total of lines 15 through 22	183,983	129,785	122,502	113,276	549,546
24 Line 23 minus line 17	148,602	124,260	115,642	108,857	497,361
25 Enter 1% of line 23	1,840	1,298	1,225	1,133	

26 Organizations described on lines 10 or 11:	a Enter 2% of amount in column (e), line 24	26a	9,947
	b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a government unit or publicly supported organization) whose total gifts for 1996 through 1999 exceeded the amount shown in line 26a Enter the sum of all these excess amounts	26b	
	c Total support for section 509(a)(1) test Enter line 24, column (e)	26c	497,361
	d Add Amounts from column (e) for lines 18 <u>2,574</u> 19 <u> </u> 22 <u>2,082</u> 26b <u> </u>	26d	4,656
	e Public support (line 26c minus line 26d total)	26e	492,705
	f Public support percentage (line 26e (numerator) divided by line 26c (denominator))	26f	99.06%

27 Organizations described on line 12:	a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," attach a list (which is not open to public inspection) to show the name of, and total amounts received in each year from, each "disqualified person" Enter the sum of such amounts for each year N/A	(1999) _____ (1998) _____ (1997) _____ (1996) _____	
	b For any amount included in line 17 that was received from a nondisqualified person, attach a list to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of all these differences (the excess amounts) for each year	(1999) _____ (1998) _____ (1997) _____ (1996) _____	
	c Add Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____	27c	
	d Add Line 27a total _____ and line 27b total _____	27d	
	e Public support (line 27c total minus line 27d total)	27e	
	f Total support for section 509(a)(2) test Enter amount on line 23, column (e)	27f	
	g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	27g	%
	h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	27h	%

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1996 through 1999, attach a list (which is not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not include these grants in line 15 (See page 5 of the instructions)

Part V Private School Questionnaire (See page 5 of the instructions)
 (To be completed ONLY by schools that checked the box on line 6 in Part IV)

N/A

- 29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?
- 30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?
- 31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?
 If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)

	Yes	No
29		
30		
31		

- 32 Does the organization maintain the following
 - a Records indicating the racial composition of the student body, faculty, and administrative staff?
 - b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?
 - c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?
 - d Copies of all material used by the organization or on its behalf to solicit contributions?
 If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)

32a		
32b		
32c		
32d		

- 33 Does the organization discriminate by race in any way with respect to
 - a Students' rights or privileges?
 - b Admissions policies?
 - c Employment of faculty or administrative staff?
 - d Scholarships or other financial assistance?
 - e Educational policies?
 - f Use of facilities?
 - g Athletic programs?
 - h Other extracurricular activities?
 If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)

33a		
33b		
33c		
33d		
33e		
33f		
33g		
33h		

- 34 a Does the organization receive any financial aid or assistance from a governmental agency?
 b Has the organization's right to such aid ever been revoked or suspended?
 If you answered "Yes" to either 34a or b, please explain using an attached statement.
- 35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation

34a		
34b		
35		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 7 of the instructions)
 (To be completed ONLY by an eligible organization that filed Form 5768)

N/A

Check here **a** if the organization belongs to an affiliated group
 Check here **b** if you checked "a" above and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount Enter the amount from the following table - If the amount on line 40 is - Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000 The lobbying nontaxable amount is - 20% of the amount on line 40 \$100,000 plus 15% of the excess over \$500,000 \$175,000 plus 10% of the excess over \$1,000,000 \$225,000 plus 5% of the excess over \$1,500,000 \$1,000,000	41	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	

Caution If there is an amount on either line 43 or line 44, you must file Form 4720

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below
 See the instructions for lines 45 through 50 on page 9 of the instructions)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
45	Lobbying nontaxable amount				
46	Lobbying ceiling amount (150% of line 45(e))				
47	Total lobbying expenditures				
48	Grassroots nontaxable amount				
49	Grassroots ceiling amount (150% of line 48(e))				
50	Grassroots lobbying expenditures				

Part VI-B Lobbying Activity by Nonelecting Public Charities
 (For reporting only by organizations that did not complete Part VI-A) (See page 9 of the instructions)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

- a Volunteers
- b Paid staff or management (Include compensation in expenses reported on lines c through h)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (add lines c through h).

Yes	No	Amount

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Schedule B
(Form 990 or 990-EZ)

Schedule of Contributors

OMB No 1545-0047

2000

Department of the Treasury
Internal Revenue Service

Supplementary information for line 1d of Form 990 or
line 1 of Form 990-EZ (see instructions)

Name of organization NEIGHBORHOOD ECONOMIC DEVELOPMENT
ADVOCACY PROJECT, INC. Employer identification number
13-3842270

Organization type (check one) - Section 501(c)(3) (enter number), 527 or
 4947(a)(1) nonexempt charitable trust

A Section 501(c)(7), (8), or (10) organizations - Check this box if the organization had no charitable contributors who contributed more than \$1,000 during the year (But see General rule below)
Enter here the total gifts received during the year for a religious, charitable, etc, purpose ▶ \$

Note: This form is generally not open to public inspection except for section 527 organizations.

KFA For Paperwork Reduction Act Notice, see page 1 of the Instructions for Form 990 and Form 990-EZ. Schedule B (Form 990 or 990-EZ) (2000)

Name of organization

Employer identification number

NEIGHBORHOOD ECONOMIC DEVELOPMENT

13-3842270

Part I Contributors

(a) No	(b) Name, address and zip code	(c) Aggregate contributions	(d) Type of contribution
<u>1</u>	_____	\$ <u>60,850</u>	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
<u>2</u>	_____	\$ <u>20,000</u>	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
<u>3</u>	_____	\$ <u>20,000</u>	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
<u>4</u>	_____	\$ <u>17,675</u>	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
<u>5</u>	_____	\$ <u>55,000</u>	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
<u>6</u>	_____	\$ <u>182,304</u>	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)

Name of organization

Employer identification number

NEIGHBORHOOD ECONOMIC DEVELOPMENT

13-3842270

Part I Contributors

(a) No	(b) Name, address and zip code	(c) Aggregate contributions	(d) Type of contribution
7	Contributions less than \$5000 	\$ 12,530	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
—	 	\$ _____	Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
—	 	\$ _____	Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
—	 	\$ _____	Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
—	 	\$ _____	Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
—	 	\$ _____	Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)

Name of organization NEIGHBORHOOD ECONOMIC DEVELOPMENT	Employer identification number 13-3842270
--	---

Part II Noncash Property

(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	<div style="border-bottom: 1px solid black; border-top: 1px solid black; border-left: 1px solid black; border-right: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; border-top: 1px solid black; border-left: 1px solid black; border-right: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; border-top: 1px solid black; border-left: 1px solid black; border-right: 1px solid black; height: 20px; margin-bottom: 2px;"></div>	\$ _____	_____
—	<div style="border-bottom: 1px solid black; border-top: 1px solid black; border-left: 1px solid black; border-right: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; border-top: 1px solid black; border-left: 1px solid black; border-right: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; border-top: 1px solid black; border-left: 1px solid black; border-right: 1px solid black; height: 20px; margin-bottom: 2px;"></div>	\$ _____	_____
—	<div style="border-bottom: 1px solid black; border-top: 1px solid black; border-left: 1px solid black; border-right: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; border-top: 1px solid black; border-left: 1px solid black; border-right: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; border-top: 1px solid black; border-left: 1px solid black; border-right: 1px solid black; height: 20px; margin-bottom: 2px;"></div>	\$ _____	_____
—	<div style="border-bottom: 1px solid black; border-top: 1px solid black; border-left: 1px solid black; border-right: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; border-top: 1px solid black; border-left: 1px solid black; border-right: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; border-top: 1px solid black; border-left: 1px solid black; border-right: 1px solid black; height: 20px; margin-bottom: 2px;"></div>	\$ _____	_____
—	<div style="border-bottom: 1px solid black; border-top: 1px solid black; border-left: 1px solid black; border-right: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; border-top: 1px solid black; border-left: 1px solid black; border-right: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; border-top: 1px solid black; border-left: 1px solid black; border-right: 1px solid black; height: 20px; margin-bottom: 2px;"></div>	\$ _____	_____
—	<div style="border-bottom: 1px solid black; border-top: 1px solid black; border-left: 1px solid black; border-right: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; border-top: 1px solid black; border-left: 1px solid black; border-right: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; border-top: 1px solid black; border-left: 1px solid black; border-right: 1px solid black; height: 20px; margin-bottom: 2px;"></div>	\$ _____	_____
—	<div style="border-bottom: 1px solid black; border-top: 1px solid black; border-left: 1px solid black; border-right: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; border-top: 1px solid black; border-left: 1px solid black; border-right: 1px solid black; height: 20px; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; border-top: 1px solid black; border-left: 1px solid black; border-right: 1px solid black; height: 20px; margin-bottom: 2px;"></div>	\$ _____	_____

Name of organization

Employer identification number

NEIGHBORHOOD ECONOMIC DEVELOPMENT

13-3842270

Part III Section 501(c)(7), (8), or (10) organizations that received more than \$1,000 in charitable gifts during the year-

● Enter the total gifts that were from contributors who gave \$1,000 or less during the year for a religious, charitable, etc., purpose (see instructions)

▶ \$

(a) No from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	_____ _____ _____	_____ _____ _____	_____ _____ _____
(e) Transfer of gift Transferee's name, address, and zip code Relationship of transferor to transferee			
_____ _____ _____		_____ _____ _____	
—	_____ _____ _____	_____ _____ _____	_____ _____ _____
(e) Transfer of gift Transferee's name, address, and zip code Relationship of transferor to transferee			
_____ _____ _____		_____ _____ _____	
—	_____ _____ _____	_____ _____ _____	_____ _____ _____
(e) Transfer of gift Transferee's name, address, and zip code Relationship of transferor to transferee			
_____ _____ _____		_____ _____ _____	
—	_____ _____ _____	_____ _____ _____	_____ _____ _____
(e) Transfer of gift Transferee's name, address, and zip code Relationship of transferor to transferee			
_____ _____ _____		_____ _____ _____	

Client NEDAP

NEIGHBORHOOD ECONOMIC DEVELOPMENT
ADVOCACY PROJECT, INC.

13-3842270

12/27/01

04 01PM

Statement 1
Form 990, Part II, Line 22
Grants and Allocations

Cash Grants and Allocations

Donee's Name:	HARLEM ECONOMIC JUSTICE		
Donee's Address:	1580 AMSTENDAM AVENUE #76		
	NEW YORK, NY 10031		
Amount Given:		\$	19,980
Total Cash Grants and Allocations		\$	<u>19,980</u>
Total Grants and Allocations		\$	<u><u>19,980</u></u>

Statement 2
Form 990, Part II, Line 43
Other Expenses

	(A)	(B)	(C)	(D)
<u>Other Expenses</u>	<u>Total</u>	<u>Program Services</u>	<u>Management & General</u>	<u>Fundraising</u>
Bank charges	\$ 20		20	
Fees & permits	75		75	
Miscellaneous	220	176	33	11
Outside services - Consultants	11,096		11,096	
Outside services - subcontrato	80,109	80,109		
Payroll service fees	821	622	149	50
Professional development	3,207		3,207	
Worker's comp insurance	568	431	103	34
Total	<u>\$ 96,116</u>	<u>81,338</u>	<u>14,683</u>	<u>95</u>

Statement 3
Form 990, Part III
Organization's Primary Exempt Purpose

To provide organizing, technical and legal support on a broad range of community economic development and reinvestment matters.

Statement 4
Form 990, Part IV, Line 57
Land, Buildings, and Equipment

<u>Asset</u>	<u>Basis</u>	<u>Accum Deprec.</u>	<u>Book Value</u>
Machinery and equipment	\$ 11,488	2,668	8,820
Total	<u>\$ 11,488</u>	<u>2,668</u>	<u>8,820</u>

12/27/01

04 01PM

Statement 5
Schedule A, Part IV-A, Line 22
Other Income

Description	(a) 1999	(b) 1998	(c) 1997	(d) 1996	(e) Total
Reimbursement	\$ 0	\$ 1,708	\$ 0	\$ 0	\$ 1,708
Miscellaneous	0	100	40	234	374
Total	<u>\$ 0</u>	<u>\$ 1,808</u>	<u>\$ 40</u>	<u>\$ 234</u>	<u>\$ 2,082</u>

Client NEDAP

NEIGHBORHOOD ECONOMIC DEVELOPMENT
ADVOCACY PROJECT, INC.

13-3842270

12/27/01

04.01PM

Form 990/990-PF

No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus. Pct.	Cur 179 Bonus	Prior 179 Bonus	Prior Dec. Bal. Depr	Basis Reductn	Salvage Value	Depr. Basis	Prior Depr.	Method	Life	Rate	Current Depr.
Machinery and Equipment																
1	COMPUTER EQUIPMENT	7/30/99		2,049							2,049		S/L	5		410
2	PRINTER	9/08/99		490							490		S/L	5		98
3	COMPUTER MONITOR	11/01/99		180							180		S/L	5		36
4	COMPUTER EQUIPMENT	12/06/99		1,085							1,085		S/L	5		217
5	PRINTERS	3/17/00		297							297		S/L	5		59
6	COMPUTER EQUIPMENT	3/17/00		2,120							2,120		S/L	5		424
7	COMPUTER EQUIPMENT	6/09/00		1,615							1,615		S/L	5		323
8	OFFICE EQUIPMENT	6/29/00		100							100		S/L	5		20
9	COMPUTER EQUIPMENT	11/13/00		2,272							2,272		S/L	5		303
10	COMPUTER EQUIPMENT	5/20/01		1,280							1,280		S/L	5		21
				Total Machinery and Equipment		0	0	0	0	0	11,488	757				1,911
				Total Depreciation		0	0	0	0	0	11,488	757				1,911
				Grand Total Depreciation		0	0	0	0	0	11,488	757				1,911

Application for Extension of Time to File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ 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 File by the due date for filing your return. See instructions	Name of Exempt Organization NEIGHBORHOOD ECONOMIC DEVELOPMENT ADVOCACY PROJECT, INC.	Employer Identification Number 13-3842270
	Number, Street, and Room or Suite Number. If a P.O. Box, see instructions 299 BROADWAY #706	
	City, Town or Post Office. For a foreign address see instructions NEW YORK, NY 10007	
	State	ZIP Code

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 (Section 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input checked="" type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input 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 2/15, 20 02, to file the exempt organization return for the organization named above. The extension is for the organization's return for

▶ calendar year 20 ____ or

▶ tax year beginning 7/01, 20 00, and ending 6/30, 20 01

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 \$ 0

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 \$ 0

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 \$ 0

Signature and Verification

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, and that I am authorized to prepare this form.

Signature ▶ Ross Wisdom Title ▶ **ROSS WISDOM, CPA**
 370 Lexington Ave., Suite 310 Date ▶ 11/11/01
 NEW YORK, NEW YORK 10017 Form 8868 (12-2000)

KFA For Paperwork Reduction Act Notice, see instructions.