

Return of Organization Exempt From Income Tax

2003

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

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

A For the 2003 calendar year, or tax year beginning and ending

B Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization SWISS BENEVOLENT SOCIETY OF NEW YORK	D Employer identification number 13-1624199
	Please use IRS label or print or type. See Specific Instructions Number and street (or P O box if mail is not delivered to street address) Room/suite 500 FIFTH AVENUE 1800	E Telephone number 212-246-0655
	City or town, state or country, and ZIP + 4 NEW YORK, NY 10110	F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)

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

H and I are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates? Yes No

H(b) If "Yes," enter number of affiliates

H(c) Are all affiliates included? N/A Yes No (If "No," attach a list.)

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

G Website: **SWISSBENEVOLENTNY.COM**

J Organization type (check only one) 501(c)(3) (insert no) 4947(a)(1) or 527

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.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **3,947,519.**

M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

1	Contributions, gifts, grants, and similar amounts received:				
a	Direct public support	1a	222,652.		
b	Indirect public support	1b			
c	Government contributions (grants)	1c			
d	Total (add lines 1a through 1c) (cash \$ 202,530. noncash \$ 20,122.)	1d		222,652.	
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2			
3	Membership dues and assessments	3			
4	Interest on savings and temporary cash investments	4			
5	Dividends and interest from securities	5		40,556.	
6 a	Gross rents	6a			
b	Less: rental expenses	6b			
c	Net rental income or (loss) (subtract line 6b from line 6a)	6c			
7	Other investment income (describe)	7			
8 a	Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
		8a	3,656,338.		
b	Less: cost or other basis and sales expenses	8b	3,899,674.		
c	Gain or (loss) (attach schedule)	8c	<243,336.>		
d	Net gain or (loss) (combine line 8c, columns (A) and (B)) STMT 1	8d		<243,336.>	
9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>				
	Gross revenue (not including \$ 1,000. of contributions reported on line 1a)	9a	16,014.		
b	Less: direct expenses other than fundraising expenses	9b	30,048.		
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c		<14,034.>	
10 a	Gross sales of inventory, less returns and allowances	10a			
b	Less: cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
11	Other revenue (from Part VII, line 103)	11		11,959.	
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		17,797.	
13	Program services (from line 44, column (B))	13		373,630.	
14	Management and general (from line 44, column (C))	14		215,807.	
15	Fundraising (from line 44, column (D))	15			
16	Payments to affiliates (attach schedule)	16			
17	Total expenses (add lines 16 and 44, column (A))	17		589,437.	
18	Excess or (deficit) for the year (subtract line 17 from line 12)	18		<571,640.>	
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		7,935,035.	
20	Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 3	20		1,856,242.	
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		9,219,637.	

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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.

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 (attach schedule) cash \$173,925. noncash \$	173,925.	173,925.	STATEMENT 5	
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc.	60,102.	30,051.	30,051.	0.
26	Other salaries and wages	116,224.	80,922.	35,302.	
27	Pension plan contributions				
28	Other employee benefits	17,085.	13,294.	3,791.	
29	Payroll taxes	14,135.	9,243.	4,892.	
30	Professional fundraising fees				
31	Accounting fees	9,650.		9,650.	
32	Legal fees	2,055.	2,055.		
33	Supplies	6,482.	3,289.	3,193.	
34	Telephone	1,798.	1,073.	725.	
35	Postage and shipping	9,963.	2,982.	6,981.	
36	Occupancy	50,733.	25,367.	25,366.	
37	Equipment rental and maintenance				
38	Printing and publications				
39	Travel	2,539.	2,407.	132.	
40	Conferences, conventions, and meetings				
41	Interest				
42	Depreciation, depletion, etc. (attach schedule)				
43	Other expenses not covered above (itemize):				
a					
b					
c					
d					
e	SEE STATEMENT 4	124,746.	29,022.	95,724.	
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	589,437.	373,630.	215,807.	0.

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? 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

What is the organization's primary exempt purpose?

TO PROVIDE INFORMATION & PROGRAMS TO ITS MEMBERS

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others)

a	SOCIAL SERVICES- CASE MANAGEMENT AND COUNSELING TO 61 CLIENTS 566 HOME VISITS. MONTHLY KAFFEEKLATSCH FOR SENIORS: AVERAGE ATTENDENCE 15 PERSONS. SPRING OUTING: ATTENDENCE ABOUT 40 PERSONS (Grants and allocations \$ _____)	171,607.
b	SCHOLARSHIPS:TUITION ASSISTANCE TO NEDDY COLLEGE BOUND YOUTHS OF SWISS DECENT. PELLEGRINI SCHOLARSHIPS: 55 SCHOLARSHIPS AWARDED. OUTSTANDING SCHOLASTIC ACHIEVEMENT: 1 AWARD. MEDICUS STUDENT EXCHANGE: 4 AWARDS (Grants and allocations \$ 173,925.)	202,023.
c		
d		
e	Other program services (attach schedule) (Grants and allocations \$ _____)	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)	373,630.

Part IV Balance Sheets

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	234,592.	46 141,581.
	47 a Accounts receivable	47a	47c
	b Less: allowance for doubtful accounts	47b	
	48 a Pledges receivable	48a	48c
	b Less: allowance for doubtful accounts	48b	
	49 Grants receivable		49
	50 Receivables from officers, directors, trustees, and key employees		50
	51 a Other notes and loans receivable	51a	51c
	b Less: allowance for doubtful accounts	51b	
	52 Inventories for sale or use		52
	53 Prepaid expenses and deferred charges	5,111.	53 6,359.
	54 Investments - securities	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	54
	55 a Investments - land, buildings, and equipment: basis	55a	55c
	b Less: accumulated depreciation	55b	
56 Investments - other	SEE STATEMENT 6	56 7,762,399.	
57 a Land, buildings, and equipment: basis	57a 17,069.	57c	
b Less: accumulated depreciation STMT 7	57b 17,069.		
58 Other assets (describe ACCRUED INTEREST RECEIVABLE)	2,111.	58 11,376.	
59 Total assets (add lines 45 through 58) (must equal line 74)	8,004,213.	59 9,312,527.	
Liabilities	60 Accounts payable and accrued expenses	5,990.	60 3,040.
	61 Grants payable	63,188.	61 89,850.
	62 Deferred revenue		62
	63 Loans from officers, directors, trustees, and key employees		63
	64 a Tax-exempt bond liabilities		64a
	b Mortgages and other notes payable		64b
	65 Other liabilities (describe)		65
66 Total liabilities (add lines 60 through 65)	69,178.	66 92,890.	
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	5,809,211.	67 6,961,903.
	68 Temporarily restricted	1,125,824.	68 1,257,734.
	69 Permanently restricted	1,000,000.	69 1,000,000.
	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, column (B) must equal line 21)	7,935,035.	73 9,219,637.	
74 Total liabilities and net assets / fund balances (add lines 66 and 73)	8,004,213.	74 9,312,527.	

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 VI Other Information

76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity
77 Were any changes made in the organizing or governing documents but not reported to the IRS?
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?
78 b If "Yes," has it filed a tax return on Form 990-T for this year?
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year?
80 a 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?
80 b If "Yes," enter the name of the organization
81 a Enter direct or indirect political expenditures. See line 81 instructions
81 b Did the organization file Form 1120-POL for this year?
82 a 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?
82 b 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 in Part III.)
83 a Did the organization comply with the public inspection requirements for returns and exemption applications?
83 b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?
84 a Did the organization solicit any contributions or gifts that were not tax deductible?
84 b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?
85 b Did the organization make only in-house lobbying expenditures of \$2,000 or less?
85 c Dues, assessments, and similar amounts from members
85 d Section 162(e) lobbying and political expenditures
85 e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices
85 f Taxable amount of lobbying and political expenditures (line 85d less 85e)
85 g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?
85 h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?
86 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12
86 b Gross receipts, included on line 12, for public use of club facilities
87 501(c)(12) organizations. Enter: a Gross income from members or shareholders
87 b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)
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 301.7701-3?
89 a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911; section 4912; section 4955
89 b 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?
89 c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
89 d Enter: Amount of tax on line 89c, above, reimbursed by the organization
90 a List the states with which a copy of this return is filed
90 b Number of employees employed in the pay period that includes March 12, 2003
91 The books are in care of

Located at 500 FIFTH AVENUE ROOM 1800, NEW YORK, NY ZIP +4 10110
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

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities	523000	19,719.	14	20,837.	
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 or (loss) from sales of assets other than inventory			18	<243,336.>	
101 Net income or (loss) from special events			01	<14,034.>	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a MISCELLANEOUS			01	11,959.	
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		19,719.		<224,574.>	0.
105 Total (add line 104, columns (B), (D), and (E))					<204,855.>

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 page 34 of the instructions.)

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)
▼	

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions.)

(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 page 34 of the instructions.)

- (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).

accompanying schedules and statements, and to the best of my knowledge and belief, it is true,
information of which preparer has any knowledge.

Date: 11/2/04
Type or print name and title: CASPIRE SPICCHIA, TREASURER

Date: _____ Check if _____ Preparer's SSN or PTIN _____

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

OMB No 1545-0047

(Except Private Foundation) and Section 501(a), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

2003

Department of the Treasury
Internal Revenue Service

Supplementary Information-(See separate instructions.)
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

SWISS BENEVOLENT SOCIETY OF NEW YORK

Employer identification number

13 1624199

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions. List each one. If there are 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 & deferred compensation	(e) Expense account and other allowances
NONE				

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

0

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor 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 III Statements About Activities (See page 2 of the instructions.)

	Yes	No
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 ► \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line I of Part VI-B.) 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.		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, 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? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V, FORM 990	X	
e Transfer of any part of its income or assets?		X
3 a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)	X	
b Do you have a section 403(b) annuity plan for your employees?	X	
4 Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 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.)
- 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 6 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) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28)	125,079.	596,374.	680,227.	425,235.	1,826,915.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	20,596.	15,120.	5,770.	17,886.	59,372.
18 Gross income from interest, dividends, amounts received from payments on securities loans (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	47,378.	330,219.	333,014.	241,322.	951,933.
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 schedule. Do not include gain or (loss) from sale of capital assets	5,734.	16,030.	SEE STATEMENT 11 9,720.	9,988.	41,472.
23 Total of lines 15 through 22	198,787.	957,743.	1,028,731.	694,431.	2,879,692.
24 Line 23 minus line 17	178,191.	942,623.	1,022,961.	676,545.	2,820,320.
25 Enter 1% of line 23	1,988.	9,577.	10,287.	6,944.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 56,406.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1999 through 2002 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 1,131,906.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 2,820,320.
d Add: Amounts from column (a) for lines: 18 951,933. 19 _____ 22 41,472. 26b 1,131,906.					26d 2,125,311.
e Public support (line 26c minus line 26d total)					26e 695,009.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 24.6429%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A (2002) (2001) (2000) (1999)					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records 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.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A (2002) (2001) (2000) (1999)					
c Add: Amounts from column (a) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					27c N/A
d Add: Line 27a total and line 27b total					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					27f N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15

Part V Private School Questionnaire (See page 7 of the instructions.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
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.)		
<hr/>			
<hr/>			
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
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.)	32d	
<hr/>			
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)	33h	
<hr/>			
<hr/>			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
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	34b	
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	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.) N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

Check a If the organization belongs to an affiliated group. Check b if you checked "a" 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
	N/A		
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 -	The lobbying nontaxable amount is -		
Not over \$500,000	20% of the amount on line 40		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
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 11 of the instructions.)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

Part VI-B Lobbying Activity by Nonelecting Public Charities N/A

(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions.)

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:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines e 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.)			0.

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

2003 DEPRECIATION AND AMORTIZATION REPORT
FORM 990 PAGE 2

990

Asset No	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
	MANAGEMENT AND GENERAL EQUIPMENT	12/31/00	SL	5.00	16	17,069.			17,069.	17,069.		0.
	* 990 PAGE 2 TOTAL					17,069.		0.	17,069.	17,069.	0.	0.
	MANAGEMENT AND GENERAL					17,069.		0.	17,069.	17,069.	0.	0.
	* GRAND TOTAL 990 PAGE 2 DEPR					17,069.		0.	17,069.	17,069.	0.	0.

FORM 990 . GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES STATEMENT 1

DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
	3,656,338.	3,899,674.	0.	<243,336.>
TO FORM 990, PART I, LINE 8	3,656,338.	3,899,674.	0.	<243,336.>

FORM 990

SPECIAL EVENTS AND ACTIVITIES

STATEMENT 2

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
SWISS NATIONAL DAY	17,014.	1,000.	16,014.	30,048.	<14,034.>
TO FM 990, PART I, LINE 9	17,014.	1,000.	16,014.	30,048.	<14,034.>

FORM 990 . OTHER CHANGES IN NET ASSETS OR FUND BALANCES STATEMENT 3

DESCRIPTION	AMOUNT
UNREALIZED GAIN ON INVESTMENTS	1,856,242.
TOTAL TO FORM 990, PART I, LINE 20	1,856,242.

FORM 990	OTHER EXPENSES			STATEMENT 4
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
INSURANCE	6,785.	4,523.	2,262.	
PROFESSIONAL FEES	3,600.	3,600.		
MISCELLANEOUS	3,334.	515.	2,819.	
ASSISTANCE AND CLIENT ACTIVITIES	19,819.	19,819.		
ANNUAL REPORT	4,146.		4,146.	
INTERNET	886.	565.	321.	
INVESTMENT FEES	86,176.		86,176.	
TOTAL TO FM 990, LN 43	124,746.	29,022.	95,724.	

FORM 990

CASH GRANTS AND ALLOCATIONS

STATEMENT 5

<u>CLASSIFICATION</u>	<u>DONEE'S NAME</u>	<u>DONEE'S ADDRESS</u>	<u>DONEE'S RELATIONSHIP</u>	<u>AMOUNT</u>
SCHOLARSHIPS	SEE ATTACHED		NONE	173,925.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22				173,925.

FORM 990	OTHER INVESTMENTS	STATEMENT	6
DESCRIPTION	VALUATION METHOD	AMOUNT	
MUTUAL FUNDS	MARKET VALUE	9,153,211.	
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		9,153,211.	

FORM 990 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 7

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
EQUIPMENT	17,069.	17,069.	0.
TOTAL TO FORM 990, PART IV, LN 57	17,069.	17,069.	0.

FORM 990	OTHER EXPENSES NOT INCLUDED ON FORM 990	STATEMENT	8
DESCRIPTION		AMOUNT	
DIRECT COSTS OF SPECIAL EVENTS		30,048.	
TOTAL TO FORM 990, PART IV-B		30,048.	

FORM 990 OTHER REVENUE INCLUDED ON FORM 990 STATEMENT 9

<u>DESCRIPTION</u>	<u>AMOUNT</u>
DIRECT COSTS OF SPECIAL EVENTS	<30,048.>
TOTAL TO FORM 990, PART IV-A	<30,048.>

FORM 990 PART V - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES STATEMENT 10

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN-SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
ANN MARIE GILMAN 500 FIFTH AVENUE NEW YORK, NY 10020	EXEC. DIRECTOR 37.5HRS./ WK.	60,102.	4,131.	0.
BALZ EGGIMANN 500 FIFTH AVENUE NEW YORK, NEW YORK 10020	PRESIDENT 5 HRS/WK	0.	0.	0.
HANS EGLOFF 500 FIFTH AVENUE NEW YORK, NEW YORK 10020	PAST PRESIDENT 1 HR/WK	0.	0.	0.
PAOLO GRASSI 500 FIFTH AVENUE NEW YORK, NEW YORK 10020	SECRETARY 3 HRS/MONTH	0.	0.	0.
CASPAR SPESCHA 500 FIFTH AVENUE NEW YORK, NEW YORK 10020	TREASURER 2 HRS / WK	0.	0.	0.
NORBERT ARNOLD 500 FIFTH AVENUE NEW YORK, NEW YORK 10020	DIRECTOR 2 HRS / MONTH	0.	0.	0.
RENATE BRAND 500 FIFTH AVENUE NEW YORK, NEW YORK 10020	DIRECTOR 3 HRS/MONTH	0.	0.	0.
RUDOLF BRUHLMANN 500 FIFTH AVENUE NEW YORK, NEW YORK 10020	DIRECTOR 3 HRS/MONTH	0.	0.	0.
RUEDI GREINER 500 FIFTH AVENUE NEW YORK, NEW YORK 10020	DIRECTOR 2 HRS / MONTH	0.	0.	0.
JOSEF HUBER 500 FIFTH AVENUE NEW YORK , NEW YORK 10020	DIRECTOR 2 HRS / MONTH	0.	0.	0.
PATRICK JORDI 500 FIFTH AVENUE NEW YORK, NEW YORK 10020	DIRECTOR 2 HRS / MONTH	0.	0.	0.

PETER JORDI 500 FIFTH AVENUE NEW YORK, NEW YORK 10020	DIRECTOR 2 HRS / MONTH	0.	0.	0.
AMBASSADOR RAYMOND LORETAN 500 FIFTH AVENUE NEW YORK, NEW YORK 10020	HONORARY PRESIDENT 2 HRS / MONTH	0.	0.	0.
VALERIE WOLFMAN 500 FIFTH AVENUE NEW YORK, NEW YORK 10020	DIRECTOR 2 HRS / MONTH	0.	0.	0.
ALBERTO ZONCA 500 FIFTH AVENUE NEW YORK , NEW YORK 10020	DIRECTOR 2 HRS / MONTH	0.	0.	0.
NINA FLORIEP 500 FIFTH AVENUE NEW YORK , NEW YORK 10020	DIRECTOR 3 HRS/MONTH	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V		<u>60,102.</u>	<u>4,131.</u>	<u>0.</u>

SCHEDULE A	OTHER INCOME			STATEMENT 11
DESCRIPTION	2002 AMOUNT	2001 AMOUNT	2000 AMOUNT	1999 AMOUNT
MISCELLANEOUS	5,734.	16,030.	9,720.	9,988.
TOTAL TO SCHEDULE A, LINE 22	5,734.	16,030.	9,720.	9,988.

21

AWARDS FOR ACADEMIC YEAR 03/04

last	first	street	city	state	zip	school	03/04
Antognini	Kathleen	1 Hinson Place	Park Ridge	NJ	07656	UNIVERSITY OF SCRANTON	\$850.00
Bazeley	Verona	P O Box 260, Route 381 N	Farmington	PA	15437	WEST VIRGINIA UNIVERSITY	\$2,200.00
Berger	Sara	341 West 24 Street 11-F	New York	NY	10011	SUNY ALBANY	\$700.00
Billing	Michael	5907 McPherson Avenue	Bethel Park	PA	15102	DUQUESNE UNIVERSITY	\$3,900.00
Bleickardt	Carina	16 Lionel Court	Middletown	NJ	07748	UNIVERSITY OF MASSACHU	\$2,400.00
Bosshard	Stephan	4 Rustic Road	Yaphank	NY	11980	MASSACHUSETTS INSTITUT	\$2,750.00
Brechbuehler	Stefanie	41 Spring Street 5	Princeton	NJ	08542	RHODE ISLAND SCHOOL OF	\$4,050.00
Burgi-Palomino	Daniela	6338 77th Street	Middle Village	NY	11379	TUFTS UNIVERSITY	\$525.00
Casagrande	James	RR 2, Box 2199	East Stroudsburg	PA	18301	NEW YORK UNIVERSITY	\$3,200.00
Dahinden	Marc	55 Tiemann Place 11	New York	NY	10027	MANHATTAN SCHOOL OF M	\$5,000.00
Del Vecchio	Catherine	736 Westcliff Road	Wilmington	DE	19803	BOSTON UNIVERSITY	\$700.00
Del Vecchio	Julia	736 Westcliff Road	Wilmington	DE	19803	UNIVERSITY OF DELAWARE	\$875.00
Dessibourg	Nicole	328 East 55 Street 8	New York	NY	10022	GEORGETOWN UNIVERSITY	\$2,200.00
Di Nicola	Annemarie	16 Beach Avenue	Port Jefferson Station	NY	11776	BINGHAMTON UNIVERSITY	\$2,050.00
Di Nicola	Christopher	16 Beach Avenue	Port Jefferson Station	NY	11776	CARNEGIE MELLON UNIVER	\$1,200.00
Ducruet	Andrew	100 Haven Avenue 20-C	New York	NY	10032	COLUMBIA UNIVERSITY COL	\$3,250.00
Eppner	Vincent	35 Rick Lane	Cortlandt Manor	NY	10567	PACE UNIVERSITY	\$3,750.00
Frei-Obert	Caroline	28 Birch Place	Milford	CT	06460	YALE UNIVERSITY	\$2,750.00
Fuglistaller	Ruth	58-A Mercer Street	Jersey City	NJ	07302	THE CITY COLLEGE OF NEW	\$4,750.00
Gantenbein	Donan	513 East 83 Street 1-R	New York	NY	10028	SUNY PURCHASE	\$600.00
Goodman	Ench	253 Arbor Road	Franklin Lakes	NJ	07417	THE OHIO STATE UNIVERSIT	\$925.00
Goodman	Ryan	253 Arbor Road	Franklin Lakes	NJ	07417	BUCKNELL UNIVERSITY	\$2,900.00
Graf	Benedikt	24 High Point Road	Lincroft	NJ	07738	UNIVERSITY OF ILLINOIS -U	\$1,200.00
Grebert	Lionel F	24 Jog Hill Road	Trumbull	CT	06611	THE CITADEL	\$500.00
Gromosak	Danielle	109 John Street	South Plainfield	NJ	07080	VIRGINIA COMMONWEALTH	\$3,900.00
Haller	Laune-Anne	348 Nassau Avenue	Manhasset	NY	11030	McGILL UNIVERSITY	\$1,875.00
Herger	Nadine	142 Commonwealth Drve	Newtown	PA	18940	LONGWOOD UNIVERSITY	\$1,700.00
Hermann	Anna	546 Stone Street	Oneida	NY	13421	ST JOHN FISHER COLLEGE	\$1,425.00
Hess	Kelly	25 McDowell Court	Brdgewater	NJ	08807	RUTGENS UNIVERSITY	\$1,750.00
Hess	Rita	25 McDowell Court	Brdgewater	NJ	08807	QUEEN'S UNIVERSITY	\$1,050.00
Heymann	Patrick	750 North Rush Street 2502	Chicago	IL	60611	NORTHWESTERN UNIVERSI	\$5,000.00
Hoffman	Daniel	111 Hoffman Road	Ellington	CT	06029	UNIVERSITY OF CONNECTIC	\$1,525.00
Hofmann	Christine	116 Telford Pike	Telford	PA	18969	UNIVERSITY OF PENNSYLVA	\$4,550.00
Hunziker	Yves	29 Keith Drive	Chestnut Ridge	NY	10952	BABSON COLLEGE	\$1,050.00
Kaplowitz	Kimberly Ann	34 Second Street	Hopewell	NJ	08526	MOORE COLLEGE OF ART &	\$3,550.00
Keller	Michael	9728 Horton Street	Livonia	MI	48150	GEORGETOWN UNIVERSITY	\$3,900.00
Keller	Monika	380 Mountain Road 22-B	Union City	NJ	07087	NEW YORK UNIVERSITY	\$2,900.00
Krauer	Michael	3184 43rd Street 3	Astoria	NY	10003	PRATT INSTITUTE	\$5,000.00
Kuhn	Pamela D	27 Old Farms Road	Cheshire	CT	06410	BRYANT COLLEGE	\$600.00
Kuhn	Sabrina	27 Old Farms Road	Cheshire	CT	06410	WAKE FOREST UNIVERSITY	\$4,050.00
Kull	Gian	101 Lockwood Road	Riverside	CT	06878	GEORGETOWN UNIVERSITY	\$1,375.00
Leuenberger	Andrea	345 Laurel Drve	Hershey	PA	17033	LAFAYETTE COLLEGE	\$1,900.00
Leuenberger	Ellen	345 Laurel Drve	Hershey	PA	17033	UNIVERSITY OF VIRGINIA	\$1,550.00
Luchsinger	Heidi	803A San Pedro Drve	College Station	TX	77845	TEXAS A & M UNIVERSITY	\$4,900.00
Messerli	Sarah	74 Dnftwood Road	Bristol	CT	06010	HAMPSHIRE COLLEGE	\$1,875.00
Messerli	Wendy	74 Dnftwood Road	Bristol	CT	06010	HAMPSHIRE COLLEGE	\$1,875.00
Naguaiat	Christina	2 Mattie Cooper Square	Beacon	NY	12508	WASHINGTON COLLEGE	\$1,950.00
Neuhaus	Kathy J.	404 Drury Lane	Wyckoff	NJ	07481	HARVARD BUSINESS SCHO	\$4,050.00
Neustein	Andrea	300 West 108 Street 10-C	New York	NY	10025	WESLEYAN UNIVERSITY	\$2,550.00
Nutt	Veronica	267 East 7 Street 4	New York	NY	10009	NEW YORK UNIVERSITY SC	\$5,000.00
Opisso	Christopher	27 Seafield Lane	Bay Shore	NY	11706	BROWN UNIVERSITY	\$1,875.00
Opisso	Daniel	27 Seafield Lane	Bay Shore	NY	11706	BINGHAMTON UNIVERSITY	\$1,325.00
Pahud	Dominique	200 Haven Avenue 5-N	New York	NY	10033	COLUMBIA BUSINESS SCHO	\$4,550.00
Riesen	Helen	256 Shady Brook Lane	Pomona	NY	10970	FORDHAM UNIVERSITY	\$5,250.00
Roake	Jennifer	5 Oak Knoll Road	Ocean	NJ	07712	ROWAN UNIVERSITY	\$500.00
Rochat	Rachel	2101 Chestnut Street 506	Philadelphia	PA	19103	THE WHARTON SCHOOL	\$4,900.00
Roth	Michael	166 Norfolk Street 4-C	New York	NY	10002	HUNTER COLLEGE	\$4,250.00
Salomon	Nadine	R D. 2, Box 177	Vandergrft	PA	15690	UNIVERSITY OF PENNSYLVA	\$4,900.00
Schaeffer	Liza	2600 Netherland Avenue 1511	Riverdale	NY	10463	BENJAMIN CARDOZO SCHO	\$2,900.00
Schmidt	Christopher	22 Westview Road	Northport	NY	11768	SUNY CORTLAND	\$3,200.00

Last	First	Street	City	State	Zip	School	03/04
Schneider	Claudio	13 Penn Commons	Yaphank	NY	11960	CORNELL UNIVERSITY	\$2,400 00
Spillmann	Andrea	11 Renfrew Avenue	Trenton	NJ	08618	HARVARD COLLEGE	\$1,625 00
Tagro	Lillian	185 Claremont Avenue 4-A	New York	NY	10027	EMERSON COLLEGE	\$1,775 00
Vuilleumier	Isabelle	21 Piermont Place	Piermont	NY	10968	UNIVERSITY OF MASSACHU	\$1,550 00
Weber	Alexandra	15 Pine Court	Bnarchiff Manor	NY	10510	VILLANOVA UNIVERSITY	\$1,025 00
Wilson	Peter	120 Scotch Plains Avenue	Westfield	NJ	07090	LEHIGH UNIVERSITY	\$1,050 00
Woldenberg	Nina	100 Lyman Road	Buffalo	NY	14226	UNIVERSITY OF WISCONSIN	\$1,050 00
Woldenberg	Stephanie	100 Lyman Road	Buffalo	NY	14226	NORTHEASTERN UNIVERSIT	\$3,050 00
Zemp	Andrea	104 Dorado Court South	Middle Island	NY	11953	American U	\$3,800 00

Tot.
ADJUSTMENT

175,150
(1,225)
173,925

- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** and check this box **Note: Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.**
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (not automatic) 3-Month Extension of Time — Must File Original and One Copy.

Type or print File by the extended due date for filing the return See instructions	SWISS BENEVOLENT SOCIETY OF NEW YORK 500 FIFTH AVENUE, RM 1800 NEW YORK NY 10110		Employer identification number 13-1624199 For IRS use only
	EIN: 13-1624199	YEAR END: 12/31/03	EXT1: 8/15/04
	FORMS: 990 497 990-T CT-13	EXT2: 11/15/04	

Check type of return to be filed (File a separate application for each return):

Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A Form 5227 Form 8870

Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720 Form 6069

STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- 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 is for

4 I request an additional 3-month extension of time until November 15, 20 04.

5 For calendar year 2003, or other tax year beginning _____, 20 ____ and ending _____, 20 ____.

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

7 State in detail why you need the extension Certain information necessary to file a complete and accurate return is not yet available. It is anticipated that all data will be available prior to the extended due date.

8a 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 \$ _____

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 \$ _____

c **Balance Due.** Subtract line 8b from line 8a. 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 \$ _____

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 ▶ *Frederick H. Rothman* Title ▶ CPA Date ▶ August 4, 2004

Notice to Applicant — To Be Completed by the IRS

- We have approved this application. Please attach this form to the organization's return.
- We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions) This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return.
- We have not approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.
- We cannot consider this application because it was filed after the due date of the return for which an extension was requested.
- Other _____

Director _____ By _____ Date _____

Alternate Mailing Address — Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.

Type or print	Name Loeb & Troper --- Frederick H. Rothman
	Number and street (include suite, room, or apt. no.) Or a P.O. box number 655 Third Avenue
	City or town, province or state, and country (including postal or ZIP code) New York, New York 10017

EXTENSION APPROVED
 AUG 11 2004
 MISSISSAUGA
 FIELD OFFICE
 ACCESS