

Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

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 **JUL 1, 2003** and ending **JUN 30, 2004**

B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending

Please use IRS label or print or type See Specific Instructions

C Name of organization: **COUNCIL OF SENIOR CENTERS AND SERVICES OF NEW YORK CITY, INC.**

Number and street (or P O box if mail is not delivered to street address): **49 WEST 45TH STREET**

Room/suite: _____

City or town, state or country, and ZIP + 4: **NEW YORK, NY 10036**

D Employer identification number: **13-2967277**

E Telephone number: **(212) 398-6565**

F Accounting method: Cash Accrual

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

I Group Exemption Number: _____

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

G Website: **WWW.CSCS-NY.ORG**

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.

Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12: **1,250,243.**

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

Revenue	1	Contributions, gifts, and similar amounts received					
	a	Direct public support	1a	607,699.			
	b	Indirect public support	1b				
	c	Government contributions (grants)	1c	209,278.			
	d	Total (add lines 1a through 1c) (cash \$ 816,977. noncash \$ _____)	1d			816,977.	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2				
	3	Membership dues and assessments	3			104,228.	
	4	Interest on savings and temporary cash investments	4				
	5	Dividends and interest from securities	5			4,553.	
	6a	Gross rents	6a	SEE STATEMENT 1	43,374.		
	b	Less rental expenses	6b				
	c	Net rental income or (loss) (subtract line 6b from line 6a)	6c			43,374.	
7	Other investment income (describe _____)	7					
Revenue	8a	Gross amount from sales of assets other than inventory	(A) Securities	156,539.	8a	(B) Other	
	b	Less cost or other basis and sales expenses		156,381.	8b		
	c	Gain or (loss) (attach schedule)		158.	8c		
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))	STMT 2			8d	158.
Revenue	9	Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>					
	a	Gross revenue (not including \$ 151,944. of contributions reported on line 1a)	9a	16,387.			
	b	Less direct expenses other than fundraising expenses	9b	16,387.			
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c	SEE STATEMENT 3			0.	
Revenue	10a	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			108,185.		
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12			1,077,475.		
Expenses	13	Program services (from line 44, column (B))	13			874,091.	
	14	Management and general (from line 44, column (C))	14			111,431.	
	15	Fundraising (from line 44, column (D))	15			100,878.	
	16	Payments to affiliates (attach schedule)	16				
	17	Total expenses (add lines 13 and 14, column (A))	17			1,086,400.	
18	Excess or (deficit) for the year (subtract line 17 from line 12)	18			-8,925.		
Net Assets	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19			91,393.	
	20	Other changes in net assets or fund balances (attach explanation)	20	SEE STATEMENT 4		931.	
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21			83,399.	

323001 12-17-03

LHA For Paperwork Reduction Act Notice, see the separate instructions

Form 990 (2003)

**COUNCIL OF SENIOR CENTERS AND SERVICES
OF NEW YORK CITY, INC.**

13-2967277

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 Page 2

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule)					
cash \$ _____ noncash \$ _____	22				
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				
25 Compensation of officers, directors, etc	25	105,397.	80,102.	11,594.	13,701.
26 Other salaries and wages	26	278,135.	210,807.	32,282.	35,046.
27 Pension plan contributions	27	21,942.	16,676.	2,414.	2,852.
28 Other employee benefits	28	76,244.	57,945.	8,387.	9,912.
29 Payroll taxes	29	27,852.	20,979.	3,618.	3,255.
30 Professional fundraising fees	30				
31 Accounting fees	31	38,059.	28,880.	4,353.	4,826.
32 Legal fees	32				
33 Supplies	33				
34 Telephone	34	17,422.	13,215.	1,993.	2,214.
35 Postage and shipping	35	12,284.	9,318.	1,405.	1,561.
36 Occupancy	36	107,468.	81,515.	12,294.	13,659.
37 Equipment rental and maintenance	37	19,931.	15,118.	2,280.	2,533.
38 Printing and publications	38	22,799.	16,000.	3,400.	3,399.
39 Travel	39	9,879.	7,493.	1,130.	1,256.
40 Conferences, conventions, and meetings	40	108,868.	101,661.	6,142.	1,065.
41 Interest	41	12,012.	9,111.	1,374.	1,527.
42 Depreciation, depletion, etc (attach schedule)	42	4,012.	3,043.	459.	510.
43 Other expenses not covered above (itemize)					
a _____	43a				
b _____	43b				
c _____	43c				
d _____	43d				
e SEE STATEMENT 5	43e	224,096.	202,228.	18,306.	3,562.
44 <small>Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D) carry these totals to lines 13-15</small>	44	1,086,400.	874,091.	111,431.	100,878.

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? SEE ATTACHED STATEMENT 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 <small>(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others.)</small>
a SEE ATTACHED STATEMENT	
(Grants and allocations \$ _____)	874,091.
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)	874,091.

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	35,123.	45 6,989.
	46 Savings and temporary cash investments		46
	47 a Accounts receivable	139,950.	
	47 b Less allowance for doubtful accounts		47c 139,950.
	48 a Pledges receivable		
	48 b Less allowance for doubtful accounts		48c
	49 Grants receivable		49
	50 Receivables from officers, directors, trustees, and key employees		50
	51 a Other notes and loans receivable		
	51 b Less allowance for doubtful accounts		51c
	52 Inventories for sale or use		52
	53 Prepaid expenses and deferred charges	3,534.	53 9,840.
	54 Investments - securities STMT 6 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	186,543.	54 190,753.
	55 a Investments - land, buildings, and equipment basis		
	55 b Less accumulated depreciation		55c
56 Investments - other	0.	56 0.	
57 a Land, buildings, and equipment basis	134,410.		
57 b Less accumulated depreciation STMT 7	131,958.	57c 2,452.	
58 Other assets (describe ► SECURITY DEPOSIT)	22,389.	58 22,389.	
59 Total assets (add lines 45 through 58) (must equal line 74)	338,802.	59 372,373.	
Liabilities	60 Accounts payable and accrued expenses	102,414.	60 53,904.
	61 Grants payable		61
	62 Deferred revenue		62 1,150.
	63 Loans from officers, directors, trustees, and key employees		63
	64 a Tax-exempt bond liabilities		64a
	64 b Mortgages and other notes payable STMT 8	144,995.	64b 227,896.
	65 Other liabilities (describe ► SECURITY DEPOSIT PAYABLE)		65 6,024.
66 Total liabilities (add lines 60 through 65)	247,409.	66 288,974.	
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	-273,449.	67 -366,043.
	68 Temporarily restricted	160,400.	68 245,000.
	69 Permanently restricted	204,442.	69 204,442.
	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)	91,393.	73 83,399.
	74 Total liabilities and net assets / fund balances (add lines 66 and 73)	338,802.	74 372,373.

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.

COUNCIL OF SENIOR CENTERS AND SERVICES
OF NEW YORK CITY, INC.

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Part VI Other Information		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	76	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	77	X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	78b	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
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?	80a	X
b	If "Yes," enter the name of the organization and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81 a	Enter direct or indirect political expenditures See line 81 instructions 81a 0.		
b	Did the organization file Form 1120-POL for this year?	81b	X
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?	82a	X
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) 82b 94,754.		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible? N/A	84a	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A	84b	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A	85a	
b	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	85b	
c	Dues, assessments, and similar amounts from members 85c N/A		
d	Section 162(e) lobbying and political expenditures 85d N/A		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	85g	
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? N/A	85h	
86	501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12 86a N/A		
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A		
87	501(c)(12) organizations Enter a Gross income from members or shareholders 87a N/A		
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 301.7701-3? If "Yes," complete Part IX	88	X
89 a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 0. , section 4912 0. , section 4955 0.		
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? If "Yes," attach a statement explaining each transaction	89b	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 on line 89c, above, reimbursed by the organization 0.		
90 a	List the states with which a copy of this return is filed NEW YORK	90b	14
b	Number of employees employed in the pay period that includes March 12, 2003		
91	The books are in care of THE ORGANIZATION Telephone no (212) 398-6565		
Located at 49 WEST 45TH STREET NEW YORK, NY ZIP + 4 10036			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here N/A and enter the amount of tax-exempt interest received or accrued during the tax year 92		

**COUNCIL OF SENIOR CENTERS, AND SERVICES
OF NEW YORK CITY, INC.**

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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					104,228.
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	4,553.	
97 Net rental income or (loss) from real estate					
a debt-financed property			14	43,374.	
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					158.
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a ANNUAL CONFERENCE			14	108,185.	
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		156,112.	104,386.
105 Total (add line 104, columns (B), (D), and (E))					260,498.

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)
94	MEMBERSHIP FEES HELP SUPPORT THE PROGRAMS PROVIDED TO ALL MEMBERS AND IS DIRECTLY RELATED TO THE ORGANIZATION'S TAX EXEMPT PURPOSE.

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)

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

Date 05.11.05 Type or print name and title WANDA HUSTEN, PRESIDENT

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

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

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

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

OMB No 1545-0047

2003

Name of the organization **COUNCIL OF SENIOR CENTERS AND SERVICES OF NEW YORK CITY, INC.** Employer identification number **13 2967277**

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
ROBERTA SACHMAN ----- C/O THE COUNCIL	PROGRAM DIR. 35 HRS.	70,660.	6,323.	0.
NIKKI SMITH ----- C/O THE COUNCIL	DIR. OF DEV. 35 HRS.	52,000.	0.	0.

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	

COUNCIL OF SENIOR CENTERS AND SERVICES

Schedule A (Form 990 or 990-EZ) 2003 OF NEW YORK CITY, INC.

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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	1	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?	2a	X
b Lending of money or other extension of credit?	2b	X
c Furnishing of goods, services, or facilities?	2c	X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	X
e Transfer of any part of its income or assets?	2e	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)	3a	X
b Do you have a section 403(b) annuity plan for your employees?	3b	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?	4	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)

Schedule A (Form 990 or 990-EZ) 2003

COUNCIL OF SENIOR CENTERS AND SERVICES

Schedule A (Form 990 or 990-EZ) 2003 OF NEW YORK CITY, INC.

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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)	565,416.	890,913.	750,220.	492,915.	2,699,464.
16 Membership fees received	100,967.	107,217.	103,582.	83,546.	395,312.
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					
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	43,865.	4,533.	6,713.	9,940.	65,051.
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	261,768.	2,941.	SEE STATEMENT 9 576.	31.	265,316.
23 Total of lines 15 through 22	972,016.	1,005,604.	861,091.	586,432.	3,425,143.
24 Line 23 minus line 17	972,016.	1,005,604.	861,091.	586,432.	3,425,143.
25 Enter 1% of line 23	9,720.	10,056.	8,611.	5,864.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 68,503.
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 964,553.
c Total support for section 509(a)(1) test Enter line 24, column (e)					26c 3,425,143.
d Add Amounts from column (e) for lines 18 <u>65,051.</u> 19 _____ 22 <u>265,316.</u> 26b <u>964,553.</u>					26d 1,294,920.
e Public support (line 26c minus line 26d total)					26e 2,130,223.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 62.1937%
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 (e) 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

NONE

COUNCIL OF SENIOR CENTERS AND SERVICES

Schedule A (Form 990 or 990-EZ) 2003 OF NEW YORK CITY, INC.

13-2967277 Page 4

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/> <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/> <hr/> <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/> <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	

Schedule A (Form 990 or 990-EZ) 2003

COUNCIL OF SENIOR CENTERS AND SERVICES

Schedule A (Form 990 or 990-EZ) 2003 OF NEW YORK CITY, INC.

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)		
37	Total lobbying expenditures to influence a legislative body (direct lobbying)		
38	Total lobbying expenditures (add lines 36 and 37)		
39	Other exempt purpose expenditures		
40	Total exempt purpose expenditures (add lines 38 and 39)		
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)		
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36		
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38		

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

(For reporting only by organizations that did not complete Part VI-A) (See page 12 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	Yes	No	Amount
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)			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 Or Depreciation
1	EQUIPMENT AND LEASEHOLD IMPROVEMENTS * TOTAL 990 PAGE 2 DEPR			.000	16	134,410.		0.	134,410.	127,946.	0.	4,012.
						134,410.			134,410.	127,946.		4,012.

0406

Form 8868 (12-2000)

Page 2

ENVELOPE FEB 14 2005

- 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	Name of Exempt Organization COUNCIL OF SENIOR CENTERS AND SERVICES OF NEW YORK CITY, INC.	Employer identification number 13-2967277
File by the extended due date for filing the return See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 49 WEST 45TH STREET	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10036	

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

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 5227	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> 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 MAY 16, 2005

5 For calendar year _____, or other tax year beginning JUL 1, 2003 and ending JUN 30, 2004

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
INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN IS NOT YET AVAILABLE.

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 \$ N/A

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 E. L... Title CPA Date 2/11/05

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 the 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 O'CONNOR DAVIES MUNNS & DOBBINS, LLP
	Number and street (include suite, room, or apt. no.) Or a P.O. box number 500 MAMARONECK AVENUE- SUITE 104
	City or town, province or state, and country (including postal or ZIP code) HARRISON, NY 10528

EXTENSION APPROVED
MAR 10 2005

IRS-06C
12-2000

FIELD DIRECTOR, SUBMISSION PROCESSING, OGDEN,

FORM 990 RENTAL INCOME STATEMENT 1

KIND AND LOCATION OF PROPERTY	ACTIVITY NUMBER	GROSS RENTAL INCOME
	1	43,374.
TOTAL TO FORM 990, PART I, LINE 6A		43,374.

FORM 990 GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES STATEMENT 2

DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
	156,539.	156,381.	0.	158.
TO FORM 990, PART I, LINE 8	156,539.	156,381.	0.	158.

FORM 990 SPECIAL EVENTS AND ACTIVITIES STATEMENT 3

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
FUNDRAISING EVENTS	168,331.	151,944.	16,387.	16,387.	0.
TO FM 990, PART I, LINE 9	168,331.	151,944.	16,387.	16,387.	0.

FORM 990 OTHER CHANGES IN NET ASSETS OR FUND BALANCES STATEMENT 4

DESCRIPTION	AMOUNT
UNREALIZED GAIN ON INVESTMENT	931.
TOTAL TO FORM 990, PART I, LINE 20	931.

FORM 990 OTHER EXPENSES STATEMENT 5

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
CONSULTANTS	182,640.	171,869.	10,771.	
DUES AND SUBSCRIPTIONS	6,475.		6,475.	
INSURANCE	2,734.	2,074.	313.	347.
DEVELOPMENT AND FUNDRAISING	3,029.			3,029.
PROGRAM EXPNSE	27,257.	27,257.		
OTHER	588.		588.	
INVESTMENT MANAGMENT FEES	1,373.	1,028.	159.	186.
TOTAL TO FM 990, LN 43	224,096.	202,228.	18,306.	3,562.

FORM 990 NON-GOVERNMENT SECURITIES STATEMENT 6

SECURITY DESCRIPTION	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	OTHER SECURITIES	TOTAL NON-GOV'T SECURITIES
MUTUAL FUNDS				20,854.	20,854.
EQUITIES	159,637.				159,637.
MONEY MARKETS				10,262.	10,262.
TO 990, LN 54 COL B	159,637.			31,116.	190,753.

FORM 990 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 7

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
EQUIPMENT AND LEASEHOLD IMPROVEMENTS	134,410.	131,958.	2,452.
TOTAL TO FORM 990, PART IV, LN 57	134,410.	131,958.	2,452.

FORM 990 OTHER NOTES AND LOANS PAYABLE STATEMENT 8

LENDER'S NAME TERMS OF REPAYMENT

LINE OF CREDIT

DATE OF NOTE	MATURITY DATE	ORIGINAL LOAN AMOUNT	INTEREST RATE
		150,000.	.00%

SECURITY PROVIDED BY BORROWER PURPOSE OF LOAN

RELATIONSHIP OF LENDER

DESCRIPTION OF CONSIDERATION	FMV OF CONSIDERATION	BALANCE DUE
	0.	127,896.

LENDER'S NAME TERMS OF REPAYMENT

PROMISSORY NOTE PAYABLE

DATE OF NOTE	MATURITY DATE	ORIGINAL LOAN AMOUNT	INTEREST RATE
		100,000.	.00%

SECURITY PROVIDED BY BORROWER PURPOSE OF LOAN

RELATIONSHIP OF LENDER

DESCRIPTION OF CONSIDERATION	FMV OF CONSIDERATION	BALANCE DUE
	0.	100,000.

TOTAL INCLUDED ON FORM 990, PART IV, LINE 64, COLUMN B 227,896.

SCHEDULE A OTHER INCOME STATEMENT 9

DESCRIPTION	2002 AMOUNT	2001 AMOUNT	2000 AMOUNT	1999 AMOUNT
MISCELLANEOUS REVENUE	0.	2,941.	576.	31.
SPECIAL EVENTS	261,768.	0.	0.	0.
TOTAL TO SCHEDULE A, LINE 22	261,768.	2,941.	576.	31.

COUNCIL OF SENIOR CENTERS AND SERVICES OF NEW YORK CITY, INC.

BOARD OF DIRECTORS

2004

Mark E. Brossman, Esq. Schulte Roth & Zabel LLP	Aileen Gitelson JASA	Steven Newman Medical and Health Research Assoc of NYC
Dawn Brown Visiting Nurse Service Meals-On-Wheels	O. Lewis Harris Forest Hills Community House	Thomas O'Brien Family Home Care Services of Brooklyn and Queens
Marjorie H. Cantor Fordham University	Nancy Harvey Service Program for Older People	Janet S. Samer Brookdale Foundation
Donna Corrado Catholic Charities of Brooklyn and Queens	Sydelle Knepper SKA/Marin Rehab	Marvin Tolkin
William J. Dionne The Burden Center for the Aging	Dr. Linda Leest Services Now for Adult Persons	Lorraine B. Tsavaris U.S Trust
H. Elaine Dovas GreenPoint Bank	John M. Leonard	Judy Willig Heights & Hill Community Council
Suleika Cabrera Drinane Institute for the Puerto Rican/ Hispanic Elderly	Michael I. Markowitz Institute for Retired Professionals	Wanda Wooten CSCS President Stanley Isaacs Neighborhood Center
Jeanne Dutton-Sinrich, Esq.	Marcella Maxwell Miracle Makers, Inc	Judy Zangwill Sunnyside Community Services
Robert M. Freedman, Esq. Freedman & Fish	Nancy D. Miller VISIONS	Emilie Roy Corey Immediate Past President
Elnor C. Guggenheimer Founding President	The Reverend Robert V. Lott Honorary President In Memoriam	

Time Devoted	1 - 3 hours/week
Address	c/o Council
Expense Allowance	None
Compensation	None
Contribution to Employee Benefit Plan	None

COUNCIL OF SENIOR CENTER & SERVICES OF NYC, INC
MELHADO, FLYNN & ASSOCIATES, INC
June 30, 2004

	BEGINNING INVENTORY June 30, 2003		PURCHASES		SALES		ENDING INVENTORY June 30, 2004		MARKET VALUE 6/30/2004		
	NO OF SHARES	MARKET VALUE	DATE BOUGHT	NO OF SHARES	COST VALUE	DATE SOLD	NO OF SHARES	GAIN (LOSS)		COST VALUE	NO OF SHARES
PREFERRED SECURITIES											
CITIGROUP CAPITAL TR IX 6.00%	500	12,905 00			12,500 00	7/24/2003	500	168 75	12,500 00		
MORGAN STANLEY CAPITAL TRUST	500	12,960 00			12,500 00	7/24/2003	500	105 10	12,500 00		
ROYCE FOCUS TRUST CUM PFR STOCK 6%, 10/17/08			10/17/2003	500	12,500 00					500	12,500 00
HOUSEHOLD FINANCE 6%, 11/30/03			11/26/2003	500	12,500 00					500	12,500 00
Mutual Funds											
M L US GOV T MTC FUND CLASS B	2 010 037	20 743 56	7/23/2003 DR PURCHASE	3 731	36 09					2 056 6320	19 834 68
			8/22/2003 DR PURCHASE	3 859	39 01						
			9/22/2003 DR PURCHASE	4 407	45 08						
			10/23/2003 DR PURCHASE	3 754	38 29						
			11/24/2003 DR PURCHASE	4 122	42 29						
			12/24/2004 DR PURCHASE	8 257	84 72						
			1/23/2004 DR PURCHASE	2 959	30 57						
			2/23/2004 DR PURCHASE	4 368	45 12						
			3/24/2004 DR PURCHASE	3 422	35 32						
			4/22/2004 DR PURCHASE	1 671	17 08						
			5/21/2004 DR PURCHASE	2 941	29 56						
			6/22/2004 DR PURCHASE	3 104	31 32						
US GOVT SECURITIES											
US T-NOTE 5.75% 8/15/03	10 000	10 062 50	8/15/2003	10 000	10 000 00						32 1 00
US T-NOTE 5.875% 2/15/04	10 000	10 306 30	2/17/2004	10 000	10 000 00						(18 65)
Equity											
AFLAC INC			8/14/2003	250	7 976 75	10/2/2003	250	9 034 12	7 978 75		57 37
AMGEN INC	150	9 851 00	10/24/2003	150	9 584 55						2 165 55
AMNHEUSER BUSCH COS INC	106	5 411 30	11/18/2003	106	5 539 00						1 024 00
APPLIED MATERIALS INC			2/24/2004	500	11 025 90						
BANK OF NY CO INC	250	7 167 50	2/23/2004	250	8 160 61						(1 063 64)
BRISTOL MYERS SQUIBB CO	150	4 072 50								150 0000	8 961 41
BROCADE COMMUNICATIONS SYSTEMS INC	150	6 420 00	9/30/2003	1 000	5 718 00	10/14/2003	1 000	6 290 90	5 718 00		572 90
CITIGROUP INC	500	3 950 00	12/31/2003	250	12 340 73	2/3/2004	250	12 785 40	12 340 73		444 67
COLGATE PALMOLIVE CO			8/8/2003	500	5 576 73	8/8/2003	500	5 576 73	3 903 00		1 973 73
CRAY INC			1/23/2004	500	5 156 50	1/30/2004	500	5 271 90	5 156 50		115 40
DEL MONTE FOODS CO			5/26/2004	1 000	10 581 50	6/30/2004	1 000	9 735 16	10 581 50		(846 34)
EQUITY OFFICE PROPERTIES	127	3 430 37								127	3 019 00

Form 990 Part III

ORGANIZATION'S PRIMARY EXEMPT PURPOSE

Council of Senior Centers and Services of New York City, Inc.'s (CSCS) mission is to promote the quality of life, independent living, productivity, and dignity of mature and older adults and their families principally in New York City.

Recognized as the premier, professional organization for New York City's senior service providers, CSCS advances the general welfare of senior citizens and the broader New York City community by:

- representing the concerns of agency sponsors of senior citizens services in the City of New York for the promotion and enhancement of senior citizen programs;
- stimulating the development of increased resources for senior citizens;
- representing sponsoring agencies in consultations with government, with voluntary agencies and the community-at-large;
- building cooperation among its members, and between them and government agencies;
- fostering and promoting standards for agencies engaged in providing social services for the elderly and providing a forum for the exchange of ideas and information among such agencies and other persons and organizations interested in the welfare of senior citizens, and to inform the public; and
- promoting the general welfare of senior citizens by all appropriate means and instrumentalities, exclusive of providing direct services for senior citizens.

Founded in 1979, CSCS currently represents 265 senior service organizations, serving over 300,000 older New Yorker through 336 senior centers plus housing, in-home and congregate daily meals, home care, case management, legal services, adult day services, mental health, recreational and social activities, transportation, escort and shopping services, counseling, benefit assistance and community outreach. CSCS' members range from individual community-based centers to large multi-service, citywide organizations serving seniors from every community district and from virtually every socioeconomic background that comprise the population of New York City.

Form 990 Part III

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

MEMBER SERVICES CSCS serves its member organizations thorough advocacy on the city, state and federal levels; training programs; programmatic initiatives, publications and more. Under its Management Assistance Program (MAP), CSCS provides training and technical assistance at no cost to its members. Group trainings address fiscal soundness, compliance with local government regulations, good governance, marketing and fundraising. In response to requests by members, CSCS provides customized technical assistance on program evaluation/assessment; capacity building; strategic planning; fiscal consultation; advisory council development, tax reporting and filing requirements; and fundraising. CSCS' full-day Annual Conference on Aging offers general sessions and educational workshops with nationally recognized speakers on a wide range of timely topics plus a vendor exhibition show featuring products and services to enhance senior provider efficiencies and quality of life for seniors. Special initiatives and partnerships include:

Adopt-A-Senior-Center program is a public-private partnership linking member senior centers with corporations to provide non-financial assistance to the centers to help support capacity building and provide stability to the community based, non-profit senior service organizations.

Cornell Institute for Transactional Research on Aging (CITRA), a research project that will connect members' needs to the development and implementation of research projects.

CSCS ACCESS to BENE*FITS™ program assists seniors to learn about and qualify for 40 public and private benefits.

Decision Making Day in partnership with the New York State Bar Association (NYSBA) pairs volunteer attorneys with senior centers around the state to provide a workshop on health care proxies, wills, powers of attorney, living wills, and other vital directives.

Intergenerational Technology Project in partnership with Polytechnic University in Brooklyn to bring student interns into senior service programs citywide to assist with such technology issues as networking, training, website development, comparative shopping and troubleshooting.

Wave of the Future Initiative will help agencies reinvent themselves to better serve today's seniors while planning for the needs and interest of tomorrow's older population.

\$685,002

ADVOCACY CSCS represents the concerns of agency sponsors of senior service organizations in New York City for the promotion and enhancement of senior citizens programs. It promotes the general welfare of older New Yorkers by building cooperation between government and member agencies. CSCS public policy efforts seek to assure that city funds are made available so as to avoid serious threats to the well-being of older New Yorkers. CSCS focuses on issues of the aging services network including: funding to provide critical services such as meals and transportation necessary to deliver meals; weekend congregate meals; English as a Second Language; programs assisting seniors in getting benefits and more. CSCS maintains a leadership role in the housing needs of older people, working on the state and local levels to see affordable assisted living become a reality.

The Public Policy Department is enhanced by the work of the CSCS Legal Advocate Fellow, a two-year position awarded to an outstanding law school graduate with an interest in the field of public interest law.

\$189,089

Total Program Service Accomplishments

\$874,091