

Return of Organization Exempt From Income Tax

2003

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

Department of the Treasury
Internal Revenue Service

▶ 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 **August 13**, 2003, and ending **June 30**, 20 04

- B** Check if applicable
- Address change
 - Name change
 - Initial return
 - Final return
 - Amended return
 - Application pending

C Name of organization
Bergen Performing Arts Center, Inc.

Number and street (or P O box if mail is not delivered to street address) Room/suite
30 North Van Brunt Street

City or town, state or country, and ZIP + 4
Englewood, NJ 07631

D Employer identification number
30 ; 0194642

E Telephone number
(201) 816-8160

F Accounting method: Cash Accrual
 Other (specify) ▶

G Website: ▶ **www.bergenpac.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.**

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? Yes No
(If "No," attach a list. See instructions.)

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

I Group Exemption Number ▶

L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ▶

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 (See page 18 of the instructions.)

Revenue	1 Contributions, gifts, grants, and similar amounts received:				
	a Direct public support	1a	727,758		
	b Indirect public support	1b			
	c Government contributions (grants)	1c	75,000		
	d Total (add lines 1a through 1c) (cash \$ 527,076 noncash \$ 275,682)	1d			802,758
	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			139
	5 Dividends and interest from securities	5			
	6a 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				
	8a Gross amount from sales of assets other than inventory	(A) Securities	(B) Other		
	b Less: cost or other basis and sales expenses	8a	8b		
	c Gain or (loss) (attach schedule)	8a	8b		
	d Net gain or (loss) (combine line 8c, columns (A) and (B))	8c	8c		
Expenses	9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>				
	a Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a			
	b Less: direct expenses other than fundraising expenses	9b			
	c Net income or (loss) from special events (subtract line 9b from line 9a)	9c			
	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			
	12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12			802,897
	13 Program services (from line 44, column (B))	13			33,167
14 Management and general (from line 44, column (C))	14			392,372	
15 Fundraising (from line 44, column (D))	15			2,045	
16 Payments to affiliates (attach schedule)	16			-0-	
17 Total expenses (add lines 16 and 44, column (A))	17			427,585	
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18			375,312
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19			-0-
	20 Other changes in net assets or fund balances (attach explanation)	20			-0-
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21			375,312

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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. (See page 22 of the instructions.)

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 \$ _____ noncash \$ _____)	-0-	-0-		
23	Specific assistance to individuals (attach schedule)	-0-	-0-		
24	Benefits paid to or for members (attach schedule).	-0-	-0-		
25	Compensation of officers, directors, etc.	-0-	-0-	-0-	-0-
26	Other salaries and wages	52,689	-0-	50,644	2,045
27	Pension plan contributions	-0-	-0-	-0-	-0-
28	Other employee benefits	1,753	-0-	1,753	-0-
29	Payroll taxes	5,928	-0-	5,928	-0-
30	Professional fundraising fees	-0-	-0-	-0-	-0-
31	Accounting fees	12,529	-0-	12,529	-0-
32	Legal fees	69,980	-0-	69,980	-0-
33	Supplies	8,043	-0-	8,043	-0-
34	Telephone	2,119	-0-	2,119	-0-
35	Postage and shipping	210	-0-	210	-0-
36	Occupancy	57,965	-0-	57,965	-0-
37	Equipment rental and maintenance	10,867	-0-	10,867	-0-
38	Printing and publications	17,786	17,786	-0-	-0-
39	Travel	-0-	-0-	-0-	-0-
40	Conferences, conventions, and meetings	2,114	-0-	2,114	-0-
41	Interest	68,838	-0-	68,578	-0-
42	Depreciation, depletion, etc. (attach schedule)	44,038	-0-	44,038	-0-
43	Other expenses not covered above (itemize). a b see attached statement 1 c d e	43a 43b 43c 43d 43e	 15,381 	 57,605 	 -0-
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15 .	427,585	33,167	392,373	2,045

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 (See page 25 of the instructions)

What is the organization's primary exempt purpose? ▶ see statement 2	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others)
a No such activities occurred in this year as 2003-2004 fiscal year was initial start-up year. No programs or performances were conducted in the 2003-2004 fiscal year. (Grants and allocations \$ _____)	28,167
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) ▶	

Part IV Balance Sheets (See page 25 of the instructions)

		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			-0-	45	191,329
	46 Savings and temporary cash investments			-0-	46	147,542
	47a Accounts receivable	47a	-0-			
	b Less: allowance for doubtful accounts	47b	-0-	-0-	47c	-0-
	48a Pledges receivable	48a	58,333			
	b Less: allowance for doubtful accounts	48b	-0-	-0-	48c	58,333
	49 Grants receivable			-0-	49	-0-
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)			-0-	50	-0-
	51a Other notes and loans receivable (attach schedule).	51a	-0-			
	b Less: allowance for doubtful accounts	51b	-0-	-0-	51c	-0-
	52 Inventories for sale or use			-0-	52	-0-
	53 Prepaid expenses and deferred charges			-0-	53	14,975
	54 Investments—securities (attach schedule).			-0-	54	-0-
	<input type="checkbox"/> Cost <input type="checkbox"/> FMV					
	55a Investments—land, buildings, and equipment: basis	55a	-0-			
	b Less: accumulated depreciation (attach schedule).	55b	-0-	-0-	55c	-0-
	56 Investments—other (attach schedule)			-0-	56	-0-
	57a Land, buildings, and equipment: basis	57a	1,946,841			
b Less: accumulated depreciation (attach schedule).	57b	39,489	-0-	57c	1,907,352	
58 Other assets (describe ► Bond Costs)			-0-	58	86,426	
59 Total assets (add lines 45 through 58) (must equal line 74)			-0-	59	2,405,957	
Liabilities	60 Accounts payable and accrued expenses			-0-	60	130,645
	61 Grants payable			-0-	61	-0-
	62 Deferred revenue			-0-	62	-0-
	63 Loans from officers, directors, trustees, and key employees (attach schedule).			-0-	63	-0-
	64a Tax-exempt bond liabilities (attach schedule)			-0-	64a	-0-
	b Mortgages and other notes payable (attach schedule)			-0-	64b	1,900,000
	65 Other liabilities (describe ►)			-0-	65	-0-
66 Total liabilities (add lines 60 through 65)			-0-	66	2,030,645	
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			-0-	67	375,312
	68 Temporarily restricted			-0-	68	-0-
	69 Permanently restricted			-0-	69	-0-
	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).			-0-	73	375,312	
74 Total liabilities and net assets / fund balances (add lines 66 and 73)			-0-	74	2,405,957	

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

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 27 of the instructions.)	Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return
<p>a Total revenue, gains, and other support per audited financial statements . . . ▶</p> <p>b Amounts included on line a but not on line 12, Form 990:</p> <p>(1) Net unrealized gains on investments . . . \$ -0-</p> <p>(2) Donated services and use of facilities \$ -0-</p> <p>(3) Recoveries of prior year grants . . . \$ -0-</p> <p>(4) Other (specify): \$ -0-</p> <p>Add amounts on lines (1) through (4) ▶</p> <p>c Line a minus line b ▶</p> <p>d Amounts included on line 12, Form 990 but not on line a:</p> <p>(1) Investment expenses not included on line 6b, Form 990 . . . \$ -0-</p> <p>(2) Other (specify): \$ -0-</p> <p>Add amounts on lines (1) and (2) ▶</p> <p>e Total revenue per line 12, Form 990 (line c plus line d) ▶</p>	<p>a Total expenses and losses per audited financial statements . . . ▶</p> <p>b Amounts included on line a but not on line 17, Form 990:</p> <p>(1) Donated services and use of facilities \$ -0-</p> <p>(2) Prior year adjustments reported on line 20, Form 990 \$ -0-</p> <p>(3) Losses reported on line 20, Form 990 . . . \$ -0-</p> <p>(4) Other (specify): \$ -0-</p> <p>Add amounts on lines (1) through (4) ▶</p> <p>c Line a minus line b ▶</p> <p>d Amounts included on line 17, Form 990 but not on line a:</p> <p>(1) Investment expenses not included on line 6b, Form 990 . . . \$ -0-</p> <p>(2) Other (specify): \$ -0-</p> <p>Add amounts on lines (1) and (2) ▶</p> <p>e Total expenses per line 17, Form 990 (line c plus line d) ▶</p>

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see page 27 of the instructions)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Frank Huttell, III 485 Highview Rd. Englewood, NJ 07631	President 30 hrs	-0-	-0-	-0-
Edmondo Schwartz 361 Highview Rd. Englewood, NJ 07631	VP/Treasurer 10 hrs	-0-	-0-	-0-
Chris Yegen 270 Devon Rd Tenafly, NJ 07670	VP/Secretary 5 hrs	-0-	-0-	-0-
Donald Aronson 77 Brayton Englewood, NJ 07631	Trustee 1 hr	-0-	-0-	-0-
Robert Cook 165 N. Dean St. Englewood, NJ 07631	Trustee 5 hrs	-0-	-0-	-0-
Andrew Durkin 106 Grand Ave Englewood, NJ 07631	Trustee 1 hr	-0-	-0-	-0-
Samuel Mann 350 E. Palisades Ave Englewood, NJ 07631	Trustee 5 hrs	-0-	-0-	-0-
Dennis McNerney One Bergen County Plaza Hackensack, NJ 07601	Trustee 1 hr	-0-	-0-	-0-
Eva Bornstein 180 Second Ave NY, NY 10003	Exec Director 40 hrs	38,500	-0-	-0-

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? Yes No
If "Yes," attach schedule—see page 28 of the instructions.

Part VI Other Information (See page 28 of the instructions)

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? If "Yes," attach a conformed copy of the changes
78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?
78b 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? If "Yes," attach a statement
80a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?
80b If "Yes," enter the name of the organization and check whether it is exempt or nonexempt.
81a Enter direct and indirect political expenditures. See line 81 instructions
81b Did the organization file Form 1120-POL for this year?
82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?
82b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)
83a Did the organization comply with the public inspection requirements for returns and exemption applications?
83b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?
84a Did the organization solicit any contributions or gifts that were not tax deductible?
84b 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?
85b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.
85c Dues, assessments, and similar amounts from members
85d Section 162(e) lobbying and political expenditures
85e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices
85f Taxable amount of lobbying and political expenditures (line 85d less 85e)
85g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?
85h 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) orgs. Enter: a Initiation fees and capital contributions included on line 12
86b Gross receipts, included on line 12, for public use of club facilities.
87 501(c)(12) orgs. Enter: a Gross income from members or shareholders.
87b 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? If "Yes," complete Part IX
89a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under section 4911; section 4912; section 4955
89b 501(c)(3) and 501(c)(4) orgs. 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.
89c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.
89d Enter: Amount of tax on line 89c, above, reimbursed by the organization.
90a List the states with which a copy of this return is filed
90b Number of employees employed in the pay period that includes March 12, 2003 (See instructions)
91 The books are in care of; Telephone no.; Located at; ZIP + 4
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.)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
Note: Enter gross amounts unless otherwise indicated					
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					139
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))					139
105 Total (add line 104, columns (B), (D), and (E)).					139

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	interest earned on cash balances received from contributions

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
	%			
	%			
	%			
	%			

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)

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Please Sign: _____ Date: **5/16/05**

Date	Check if self-	Preparer's SSN or PTIN (See Gen Inst W)
	<input type="checkbox"/>	

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information—(See separate instructions.)

OMB No 1545-0047

2003

Department of the Treasury
Internal Revenue Service

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

Bergen Performing Arts Center, Inc.

Employer identification number

30 0194642

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 ▶				

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

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).					
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					
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					
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.					
23 Total of lines 15 through 22.					
24 Line 23 minus line 17.					
25 Enter 1% of line 23					
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24. . . . ▶					26a
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
c Total support for section 509(a)(1) test. Enter line 24, column (e) ▶					26c
d Add: Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____ ▶					26d
e Public support (line 26c minus line 26d total) ▶					26e
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶					26f %
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 (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 (2002) _____ (2001) _____ (2000) _____ (1999) _____					
c Add: Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____ ▶					27c
d Add: Line 27a total _____ and line 27b total _____ ▶					27d
e Public support (line 27c total minus line 27d total) ▶					27e
f Total support for section 509(a)(2) test. Enter amount from line 23, column (e). . . . ▶ 27f _____					27f
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)). ▶					27g %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)). ▶					27h %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 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)
(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)		
32 Does the organization maintain the following		
a Records indicating the racial composition of the student body, faculty, and administrative staff?		
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)		
33 Does the organization discriminate by race in any way with respect to		
a Students' rights or privileges?		
b Admissions policies?		
c Employment of faculty or administrative staff?		
d Scholarships or other financial assistance?		
e Educational policies?		
f Use of facilities?		
g Athletic programs?		
h Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)		
34a Does the organization receive any financial aid or assistance from a governmental agency?		
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement		
35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)
 (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		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred)			
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	41	
	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				
	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e)).					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

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

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

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box.
 - If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Note: Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

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

Note: Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only
 All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

Type or print	Name of Exempt Organization BERGEN PERFORMING ARTS CENTER, INC	Employer identification number 30-0194642
File by the due date for filing your return See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 30 N. VAN BRUNT STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ENGLEWOOD, NJ 07631	

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

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

1 I request an automatic 3-month (6-month, for 990-T corporation) extension of time until **FEBRUARY 15, 2005** to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year _____ or
 ▶ tax year beginning **JUL 1, 2003**, and ending **JUN 30, 2004**.

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

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ _____

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

c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ **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 ▶ *Brian T. Klog* Title ▶ *CA* Date ▶ *11/8/04*
 LHA For Paperwork Reduction Act Notice, see instruction Form 8868 (12-2000)

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	Name of Exempt Organization BERGEN PERFORMING ARTS CENTER, INC	Employer identification number 30-0194642
	Number, street, and room or suite no. If a P.O. box, see instructions. 30 N. VAN BRUNT STREET	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ENGLEWOOD, NJ 07631	

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 TO COMPLETE ACCURATE RETURN IS NOT PRESENTLY 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 Brian T. Abge Title CFA 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 WISS & COMPANY, LLP
	Number and street (include suite, room, or apt. no.) Or a P.O. box number 354 EISENHOWER PARKWAY
	City or town, province or state, and country (including postal or ZIP code) LIVINGSTON, NJ, 07039

323832 05-01-03

Bergen Performing Arts Center, Inc.

Statement 2

Form 990

FYE June 30, 2004

EIN 30-0194642

Organization's primary exempt purpose:

1. To enhance the performing arts in Bergen County, New Jersey.
2. To aid, produce, present, and to make any and all arrangements necessary or desirable in connection therewith, musical concerts, recitals, and productions of every kind and nature, including, but not limited to, vocal and instrumental concerts, recitals, operas, and ballets.
3. To solicit, accept, administer, and disburse gifts, grants, and bequests of property of every kind or to hold said property in trust in such manner as the Corporation deems appropriate for the furthering of the purposes of the Corporation.
4. To make distributions to the performing arts or any other organization organized to support the performing arts that is exempt from federal income tax under Section 501(c)(3) of the Code (or any corresponding provision of any further United States Internal Revenue law).

Bergen Performing Arts Center, Inc.
Form 990
FYE June 30, 2004
EIN 30-0194642

Statement 3

Part IV-A

Support Schedule is not completed because this is the first year that the Bergen Performing Arts Center is filing Form 990. For the fiscal year ended June 30, 2004, it received funds from a governmental agency.

NP FILED

CERTIFICATE OF INCORPORATION
OF
BERGEN PERFORMING ARTS CENTER, INC.

APR 30 2003

~~State Treasurer~~

The undersigned, being over the age of 18 years, in order to form a nonprofit corporation pursuant to the provisions of the Title 15A of the New Jersey Nonprofit Corporation Act ("Act") hereby certifies:

SECTION 1. The name of the corporation is BERGEN PERFORMING ARTS CENTER, INC. (the "Corporation").

SECTION 2. The purposes for which the Corporation is organized are:

1. To enhance the performing arts in Bergen County, New Jersey;
2. To aid, produce, present, and to make any and all arrangements necessary or desirable in connection therewith, musical concerts, recitals, and productions of every kind and nature, including, but not limited to, vocal and instrumental concerts and recitals, operas, and ballets;
3. To solicit, accept, administer, and disburse gifts, grants, and bequests of property of every kind or to hold said property in trust in such manner as the Corporation deems appropriate for the furthering of the purposes of the Corporation.
4. To make distributions to the performing arts or any organization organized to support the performing arts that is exempt from federal income tax under Section 501(c)(3) of the Code (or any corresponding provision of any further United States Internal Revenue law).

SECTION 3. The corporation is organized exclusively for charitable and educational purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (the "Code"). The corporation shall receive and disburse funds, property and gifts of any kind exclusively for the benefit of the performing arts and for its purposes of the corporation shall have the power to acquire in its corporate name and all property necessary to accomplish the objectives of this corporation and this corporation shall have all the powers of corporations not for pecuniary profits as set forth in the New Jersey Nonprofit Corporation Act, as amended, not inconsistent with Section 501(c)(3) of the Code.

SECTION 4. The Corporation shall have no members.

SECTION 5. The method of electing trustees shall set forth in the By-Laws.

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SECTION 6. The address of the Corporation's initial registered office is 500 Frank W. Burr Boulevard, Glenpointe Centre West, Teaneck, New Jersey 07666 and the name of the Corporation's initial registered agent at such address is Frank Huttie III.

SECTION 7. The Corporation shall indemnify every corporate agent, as defined in, and to the full extent permitted by Section 15A:5-4 of the Act, and to the full extent otherwise permitted by law. The Corporation may purchase insurance for indemnification.

SECTION 8. The number of trustees constituting the first Board is three (3), and the names and addresses of the persons who are to serve as such trustees are:

Frank Huttie III	485 Highview Road	Englewood, New Jersey 07666
Edmondo Schwartz	361 Highview Road	Englewood, New Jersey 07631
Roney J. G. Siegel	Highwood Place	Alpine, New Jersey 07620

The By-Laws shall provide the number (not less than 3) of trustees other than the first Board.

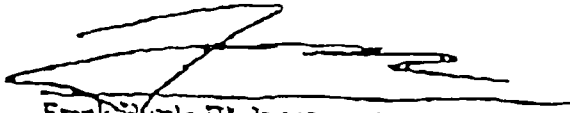
SECTION 9. The name and address of the incorporator is Frank Huttie III, 500 Frank Burr Boulevard, Teaneck, New Jersey 07666.

SECTION 10. The Corporation shall have all of the powers granted to nonprofit corporations by the laws of the State of New Jersey, as amended from time to time.

SECTION 11. The method of distribution of assets of the Corporation upon dissolution shall be as set forth in the By-Laws of the Corporation.

SECTION 12. Subject to the following and to the full extent from time to time permitted by the Act, as amended, a trustee or officer of the Corporation shall not be personally liable to the Corporation or its members for damages for breach of any duty owed to the Corporation or its members or the failure to perform in accordance with, or to comply with the terms and conditions of, the By-Laws of the Corporation, except for liability for any breach of duty based upon an act or omission (a) not in good faith or involving a knowing violation of law, or (b) resulting in receipt by such trustee or officer of an improper personal benefit. Neither the amendment or repeal of this Section 12, shall eliminate or reduce the protection afforded by this Section 12 to a trustee or an officer of the Corporation in respect to any matter which occurred, or any cause of action, suit or claim which but for this Section 12 would have accrued or arisen, prior to such amendment or repeal.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Incorporation this 30th day of April, 2003.


Frank Huttie III, Incorporator

CERTIFIED TO BE A TRUE COPY

[Handwritten signature]
By: Frank Huttie III, Esq.

FILED

**CERTIFICATE OF AMENDMENT
TO THE CERTIFICATE OF INCORPORATION
OF
BERGEN PERFORMING ARTS CENTER, INC.**

SEP 18 2003 *AMC*

State Treasurer

Pursuant to the provisions of Section 15A:9-2(c) and Section 15A:9-4(b) of the New Jersey Nonprofit Corporation Act (the "Act"), the undersigned nonprofit corporation of the State of New Jersey, executes the following Certificate of Amendment to the Corporation's Certificate of Incorporation:

1. The name of the Corporation is **BERGEN PERFORMING ARTS CENTER, INC.**
2. The Certificate of Incorporation was executed by the undersigned incorporator and was filed in the office of the New Jersey Secretary of State on April 30, 2003.
3. The Corporation has no members.
4. The amendments were adopted by the trustees on September 17, 2003, and the Certificate of Amendment shall become effective on the date of filing.
5. The Corporation has four (4) trustees. The following Amendments to the Certificate of Incorporation were approved by unanimous written consent of all four (4) trustees without a meeting:

SECTION 11 of the Certificate of Incorporation shall be amended to read as follows:

Upon dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not disposed of shall be disposed of by the Court of Common Pleas or general jurisdiction of the county in which the principal office of the organization is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

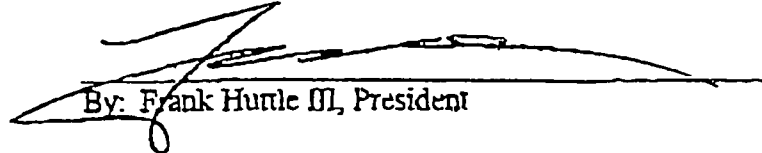
SECTION 14 of the Certificate of Incorporation shall be added to read as follows:

No part of the net earnings of the organization shall inure to the benefit of, or be distributable to its members, trustees, officers, or other private persons, except that the organization shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in the purpose clause hereof. No substantial part of the activities of the organization shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the organization shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of any candidate for public office. Notwithstanding any other provision of this document, the organization shall not carry on any other activities not permitted to be carried on (a)

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by an organization exempt from federal income tax under section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or (b) by an organization, contributions to which are deductible under section 170(c)(2) of the Internal Revenue Code, or corresponding section of any future federal tax code.

BERGEN PERFORMING ARTS CENTER, INC.



By: Frank Humle III, President

Dated: September 17, 2003