EXTENSION ATTACHED

Form **990** Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 **2004** Open to Public Inspection

A For the 2004 calendar year, or tax year beginning JUL 1, 2004 and ending JUN 30, 2005

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: LENOX HILL NEIGHBORHOOD HOUSE, INC.

Number and street (or P.O. box if mail is not delivered to street address): 331 EAST 70TH STREET — Room/suite:

City or town, state or country, and ZIP + 4: NEW YORK, NY 10021

D Employer identification number: 13-1628180

E Telephone number: (212) 744-5022

F Accounting method [ ] Cash [X] Accrual [ ] Other (specify) ▶

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

H and I are not applicable to section 527 organizations.

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

G Website: ▶ WWW.LENOXHILL.ORG

J Organization type (check only one) ▶ [X] 501(c) (3) ◀ (insert no) [ ] 4947(a)(1) or [ ] 527

I Group Exemption Number ▶

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.**

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

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 14,645,730.

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

Revenue

1	Contributions, gifts, grants, and similar amounts received:				
a	Direct public support	1a	3,056,452.		
b	Indirect public support	1b			
c	Government contributions (grants)	1c	8,795,198.		
d	**Total** (add lines 1a through 1c) (cash $ 11,828,150. noncash $ 23,500.)			1d	11,851,650.
2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	
3	Membership dues and assessments			3	1,310,736.
4	Interest on savings and temporary cash investments			4	21,991.
5	Dividends and interest from securities			5	63,211.
6 a	Gross rents	6a			
b	Less: rental expenses	6b			
c	Net rental income or (loss) (subtract line 6b from line 6a)			6c	
7	Other investment income (describe ▶)			7	

		(A) Securities		(B) Other		
8 a	Gross amount from sales of assets other than inventory	981,523.	8a			
b	Less: cost or other basis and sales expenses	905,209.	8b			
c	Gain or (loss) (attach schedule)	76,314.	8c			
d	Net gain or (loss) (combine line 8c, columns (A) and (B)) STMT 1				8d	76,314.

9	Special events and activities (attach schedule). If any amount is from **gaming**, check here ▶ [ ]				
a	Gross revenue (not including $ 1,326,207. of contributions reported on line 1a)	9a	156,345.		
b	Less: direct expenses other than fundraising expenses	9b	161,805.		
c	Net income or (loss) from special events (subtract line 9b from line 9a) SEE STATEMENT 2			9c	<5,460.>
10 a	Gross sales of inventory, less returns and allowances	10a			
b	Less: cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)			10c	
11	Other revenue (from Part VII, line 103)			11	260,274.
12	**Total revenue** (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			12	13,578,716.

Expenses

13	Program services (from line 44, column (B))	13	10,773,565.
14	Management and general (from line 44, column (C))	14	1,213,995.
15	Fundraising (from line 44, column (D))	15	734,669.
16	Payments to affiliates (attach schedule)	16	
17	**Total expenses** (add lines 16 and 44, column (A))	17	12,722,229.

Net Assets

18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	856,487.
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	6,045,742.
20	Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 3	20	128,240.
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	7,030,469.

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SCANNED JUL 14 2006

423001 01-13-05 LHA **For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.** Form 990 (2004)

P3

Part II Statement of Functional Expenses

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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash $ ___ 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	251,906.	49,303.	202,603.	0.
26 Other salaries and wages	26	6,126,530.	5,312,180.	483,861.	330,489.
27 Pension plan contributions	27				
28 Other employee benefits	28				
29 Payroll taxes	29	1,710,584.	1,444,980.	183,190.	82,414.
30 Professional fundraising fees	30				
31 Accounting fees	31				
32 Legal fees	32				
33 Supplies	33	190,892.	113,062.	17,907.	59,923.
34 Telephone	34	126,964.	106,756.	15,292.	4,916.
35 Postage and shipping	35				
36 Occupancy	36	805,609.	764,739.	31,080.	9,790.
37 Equipment rental and maintenance	37	122,109.	99,716.	17,522.	4,871.
38 Printing and publications	38				
39 Travel	39	75,995.	69,284.	6,662.	49.
40 Conferences, conventions, and meetings	40				
41 Interest	41				
42 Depreciation, depletion, etc. (attach schedule)	42	586,966.	494,343.	70,436.	22,187.
43 Other expenses not covered above (itemize):					
a	43a				
b	43b				
c	43c				
d	43d				
e SEE STATEMENT 4	43e	2,724,674.	2,319,202.	185,442.	220,030.
44 Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13 15	44	12,722,229.	10,773,565.	1,213,995.	734,669.

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? ▶ STATEMENT 11

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

	Program Service Expenses (Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others)
a YOUTH AND FAMILY SERVICES- STATEMENT 11 (Grants and allocations $)	3,366,748.
b OLDER ADULT SERVICES- STATEMENT 11 (Grants and allocations $)	2,205,788.
c COMMUNITY SERVICES AND EDUCATION- STATEMENT 11 (Grants and allocations $)	391,094.
d HOMELESS SERVICES- STATEMENT 11 (Grants and allocations $)	3,607,106.
e Other program services (attach schedule) STATEMENT 5 (Grants and allocations $)	1,202,829.
f **Total of Program Service Expenses** (should equal line 44, column (B), Program services) ▶	10,773,565.

423011 01-13-05

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			1,313,112.	45	1,724,914.
46 Savings and temporary cash investments				46	
47 a Accounts receivable	47a	1,368,917.			
b Less: allowance for doubtful accounts	47b	47,832.	1,407,661.	47c	1,321,085.
48 a Pledges receivable	48a	202,435.			
b Less: allowance for doubtful accounts	48b		233,500.	48c	202,435.
49 Grants receivable				49	
50 Receivables from officers, directors, trustees, and key employees				50	
51 a Other notes and loans receivable	51a				
b Less: allowance for doubtful accounts	51b			51c	
52 Inventories for sale or use				52	
53 Prepaid expenses and deferred charges			93,876.	53	123,842.
54 Investments - securities STMT 7 ▶ ☐ Cost ☒ FMV			2,252,962.	54	2,682,869.
55 a Investments - land, buildings, and equipment: basis	55a				
b Less: accumulated depreciation	55b			55c	
56 Investments - other				56	
57 a Land, buildings, and equipment: basis	57a	4,952,066.			
b Less: accumulated depreciation STMT 6	57b	2,594,803.	2,366,439.	57c	2,357,263.
58 Other assets (describe ▶)				58	
59 **Total assets** (add lines 45 through 58) (must equal line 74)			7,667,550.	59	8,412,408.
Liabilities					
60 Accounts payable and accrued expenses			1,299,682.	60	1,168,400.
61 Grants payable				61	
62 Deferred revenue			322,126.	62	213,539.
63 Loans from officers, directors, trustees, and key employees				63	
64 a Tax-exempt bond liabilities				64a	
b Mortgages and other notes payable				64b	
65 Other liabilities (describe ▶)				65	
66 **Total liabilities** (add lines 60 through 65)			1,621,808.	66	1,381,939.
Net Assets or Fund Balances					
Organizations that follow SFAS 117, check here ▶ ☒ and complete lines 67 through 69 and lines 73 and 74.					
67 Unrestricted			5,342,531.	67	6,148,151.
68 Temporarily restricted			655,811.	68	793,458.
69 Permanently restricted			47,400.	69	88,860.
Organizations that do not follow SFAS 117, check here ▶ ☐ 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)			6,045,742.	73	7,030,469.
74 **Total liabilities and net assets / fund balances** (add lines 66 and 73)			7,667,550.	74	8,412,408.

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.

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Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return

a	Total revenue, gains, and other support per audited financial statements	a	13,645,540.
b	Amounts included on line a but not on line 12, Form 990:		
(1)	Net unrealized gains on investments $ 166,001.		
(2)	Donated services and use of facilities $ 111,332.		
(3)	Recoveries of prior year grants $		
(4)	Other (specify): STMT 8 $ <188,132.>		
	Add amounts on lines (1) through (4)	b	89,201.
c	Line a minus line b	c	13,556,339.
d	Amounts included on line 12, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 $ 22,377.		
(2)	Other (specify): $		
	Add amounts on lines (1) and (2)	d	22,377.
e	Total revenue per line 12, Form 990 (line c plus line d)	e	13,578,716.

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

a	Total expenses and losses per audited financial statements	a	12,623,052.
b	Amounts included on line a but not on line 17, Form 990:		
(1)	Donated services and use of facilities $ 111,332.		
(2)	Prior year adjustments reported on line 20, Form 990 $		
(3)	Losses reported on line 20, Form 990 $		
(4)	Other (specify): $		
	Add amounts on lines (1) through (4)	b	111,332.
c	Line a minus line b	c	12,511,720.
d	Amounts included on line 17, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 $ 22,377.		
(2)	Other (specify): STMT 9 $ 188,132.		
	Add amounts on lines (1) and (2)	d	210,509.
e	Total expenses per line 17, Form 990 (line c plus line d)	e	12,722,229.

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated.)

(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
SEE STATEMENT 10		251,906.	21,719.	0.

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

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 ▶ THE CARING NEIGHBOR, INC & CASA MUTUA, INC. and check whether it is [X] exempt or [ ] 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 111,332.			
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?		84a		X
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?	N/A	85b		
	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.				
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				
b	Number of employees employed in the pay period that includes March 12, 2004	90b 201			
91	The books are in care of ▶ JOSEPH GIRVEN Telephone no ▶ (212)744-5022				
	Located at ▶ 331 EAST 70TH STREET, NEW YORK, NY ZIP + 4 ▶ 10021				
92	*Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of* **Form 1041** - Check here ▶ [ ] and enter the amount of tax-exempt interest received or accrued during the tax year ▶	92 N/A			

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

Note: *Enter gross amounts unless otherwise indicated.*	Unrelated business income (A) Business code	(B) Amount	Excluded by section 512, 513, or 514 (C) Exclusion code	(D) Amount	(E) Related or exempt function income
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					1,310,736.
95 Interest on savings and temporary cash investments			14	21,991.	
96 Dividends and interest from securities			14	63,211.	
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			16	76,314.	
101 Net income or (loss) from special events			18	<5,460.>	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a INSURANCE PROCEEDS			01	260,274.	
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		416,330.	1,310,736.
105 Total (add line 104, columns (B), (D), and (E))				▶	1,727,066.

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	FEES CHARGED TO INDIVIDUALS PARTICIPATING IN THE ORGANIZATION'S PROGRAM

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).*

Please Sign Here 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

▶ Signature of officer: [signature] Date: 5/11/06 ▶ Type or print name and title: MAX L BARASCH TREASURER

Paid Preparer's Use Only

Preparer's signature ▶ [signature] CPA	Date 5/10/06	Check if self-employed ▶ ☐	Preparer's SSN or PTIN
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ MARKS PANETH & SHRON LLP, 622 THIRD AVENUE, NEW YORK, NEW YORK 10017		EIN ▶	
		Phone no. ▶ 212 503-8800	

423161 01-13-05

Form 990 (2004)

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(f), 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

2004

Name of the organization: LENOX HILL NEIGHBORHOOD HOUSE, INC.

Employer identification number: 13 1628180

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
LYNN APPELBAUM 331 EAST 70TH STREET, NEW YORK, NY 10021	DEP. ED. PROG 35HRS/WK	90,263.	6,687.	
LUCIA DE RESPINIS 331 EAST 70TH STREET, NEW YORK, NY 10021	ASSOC. DIR. 35HRS/WK	89,846.	12,906.	
CLARA DORDULAW 331 EAST 70TH STREET, NEW YORK, NY 10021	CONTROLLER 35HRS/WK	81,825.	11,445.	
MARK ANDERMANIS 331 EAST 70TH STREET, NEW YORK, NY 10021	DIR. FAC. 35HRS/WK	79,750.	12,119.	
MARIAN DETELJ 331 EAST 70TH STREET, NEW YORK, NY 10021	DIR. Y.F.S. 35HRS/WK	77,424.	0.	
Total number of other employees paid over $50,000 ▶	9			

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.)	1		X
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		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 a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4a		X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b		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 5 of the instructions.)

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

Calendar year (or fiscal year beginning in) ▶	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	11,287,260.	11,294,479.	11,193,077.	10,208,330.	43,983,146.
16 Membership fees received	690,557.	916,020.	1,144,415.	982,768.	3,733,760.
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	141,399.	181,703.	249,163.	110,168.	682,433.
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	139,950.	235,460.	155,509.	330,738.	861,657.
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	12,259,166.	12,627,662.	12,742,164.	11,632,004.	49,260,996.
24 Line 23 minus line 17	12,117,767.	12,445,959.	12,493,001.	11,521,836.	48,578,563.
25 Enter 1% of line 23	122,592.	126,277.	127,422.	116,320.	

26 **Organizations described on lines 10 or 11:** a Enter 2% of amount in column (e), line 24 ▶ 26a N/A

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 2000 through 2003 exceeded the amount shown in line 26a. **Do not file this list with your return.** Enter the total of all these excess amounts ▶ 26b N/A

c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶ 26c N/A

d Add: Amounts from column (e) for lines: 18 ______ 19 ______ 22 ______ 26b ______ ▶ 26d N/A

e Public support (line 26c minus line 26d total) ▶ 26e N/A

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** ▶ 26f N/A %

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:

(2003) 706,085. (2002) 591,480. (2001) 763,441. (2000) 918,683.

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:

(2003) 0. (2002) 0. (2001) 0. (2000) 0.

c Add: Amounts from column (e) for lines: 15 43,983,146. 16 3,733,760. 17 682,433. 20 ______ 21 ______ ▶ 27c 48,399,339.

d Add: Line 27a total 2,979,689. and line 27b total 0. ▶ 27d 2,979,689.

e Public support (line 27c total minus line 27d total) ▶ 27e 45,419,650.

f Total support for section 509(a)(2) test: Enter amount on line 23, column (e) ▶ 27f 49,260,996.

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** ▶ 27g 92.2021%

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** ▶ 27h 1.7492%

28 **Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, 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

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?	29		
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?	30		
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?	31		
	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?	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?	32d		
	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?	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?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
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?	34b		
	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	35		

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

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

Check ▶ a ☐ if the organization belongs to an affiliated group. Check ▶ b ☐ if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount. Enter the amount from the following table -			
If the amount on line 40 is - / **The lobbying nontaxable amount is -**			
Not over $500,000 / 20% of the amount on line 40			
Over $500,000 but not over $1,000,000 / $100,000 plus 15% of the excess over $500,000			
Over $1,000,000 but not over $1,500,000 / $175,000 plus 10% of the excess over $1,000,000	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.)

	Lobbying Expenditures During 4-Year Averaging Period				N/A
Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(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 11 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.

Part VII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations** (See page 11 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

		Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of:			
(i) Cash	51a(i)		X
(ii) Other assets	a(ii)		X
b Other transactions:			
(i) Sales or exchanges of assets with a noncharitable exempt organization	b(i)		X
(ii) Purchases of assets from a noncharitable exempt organization	b(ii)		X
(iii) Rental of facilities, equipment, or other assets	b(iii)		X
(iv) Reimbursement arrangements	b(iv)		X
(v) Loans or loan guarantees	b(v)		X
(vi) Performance of services or membership or fundraising solicitations	b(vi)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c		X

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received: N/A

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶ ☐ Yes ☒ No

b If "Yes," complete the following schedule: N/A

(a) Name of organization	(b) Type of organization	(c) Description of relationship

2004 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 2 990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
1	LAND		SL	.000	16	164,999.			164,999.			0.
2	BUILDING -SL		SL	.000	16	499,481.			499,481.	499,481.		0.
3	BUILDING IMPROVEMENTS-SL		SL	.000	16	3642032.			3642032.	1566269.		495,411.
4	FURNITURE AND EQUIPMENT- SL		SL	.000	16	645,554.			645,554.	529,053.		91,555.
	* TOTAL 990 PAGE 2 DEPR					4952066.		0.	4952066.	2594803.	0.	586,966.

428102
10-08-04

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

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

DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
REALIZED GAIN ON INVESTMENT	981,523.	905,209.	0.	76,314.
TO FORM 990, PART I, LINE 8	981,523.	905,209.	0.	76,314.

FORM 990 SPECIAL EVENTS AND ACTIVITIES STATEMENT 2

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
SPRING GALA	792,788.	704,513.	88,275.	82,880.	5,395.
HOLIDAY BAZAAR	459,957.	439,707.	20,250.	29,447.	<9,197.>
ASSOCIATE'S EVENTS	110,939.	70,804.	40,135.	43,514.	<3,379.>
OTHER EVENTS	118,868.	111,183.	7,685.	5,964.	1,721.
TO FM 990, PART I, LINE 9	1,482,552.	1,326,207.	156,345.	161,805.	<5,460.>

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

DESCRIPTION	AMOUNT
UNREALIZED GAIN ON INVESTMENTS	166,001.
RECOGNITION OF MINIMUM PENSION LIABILITY	<37,761.>
TOTAL TO FORM 990, PART I, LINE 20	128,240.

FORM 990 OTHER EXPENSES STATEMENT 4

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
PROFESSIONAL FEES	63,996.	20,326.	43,670.	
SERVICES PROVIDED BY NON-AGENCY PERSONNEL	320,724.	284,815.	29,985.	5,924.
INSURANCE	130,063.	107,104.	16,999.	5,960.
PROGRAM ACTIVITIES	208,403.	195,109.	10,893.	2,401.
REPAIRS AND MATERIALS	877,983.	843,785.	25,804.	8,394.

FOOD	695,343.	685,165.	5,527.	4,651.
PAYMENT TO SUBGRANTEES	123,321.	123,321.	0.	0.
BAD DEBT EXPENSE	20,163.	20,163.	0.	0.
OTHER	74,169.	39,414.	30,187.	4,568.
INVESTMENT EXPENSES	22,377.		22,377.	
INDIRECT SPECIAL EVENT EXPENSES	188,132.			188,132.
TOTAL TO FM 990, LN 43	2,724,674.	2,319,202.	185,442.	220,030.

FORM 990 OTHER PROGRAM SERVICES STATEMENT 5

DESCRIPTION	GRANTS AND ALLOCATIONS	EXPENSES
SEE STATEMENT 11 DETAIL		1,202,829.
TOTAL TO FORM 990, PART III, LINE E		1,202,829.

FORM 990 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 6

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
LAND	164,999.	0.	164,999.
BUILDING -SL	499,481.	499,481.	0.
BUILDING IMPROVEMENTS- SL	3,642,032.	1,566,269.	2,075,763.
FURNITURE AND EQUIPMENT- SL	645,554.	529,053.	116,501.
TOTAL TO FORM 990, PART IV, LN 57	4,952,066.	2,594,803.	2,357,263.

FORM 990 OTHER SECURITIES STATEMENT 7

SECURITY DESCRIPTION	COST/FMV	OTHER SECURITIES
FIXED INCOME	FMV	886,139.
EQUITIES	FMV	1,796,730.
TO FORM 990, LINE 54, COL B		2,682,869.

FORM 990 OTHER REVENUE NOT INCLUDED ON FORM 990 STATEMENT 8

DESCRIPTION	AMOUNT
INDIRECT SPECIAL EVENT EXPENSE	<188,132.>
TOTAL TO FORM 990, PART IV-A	<188,132.>

FORM 990 OTHER EXPENSES INCLUDED ON FORM 990 STATEMENT 9

DESCRIPTION	AMOUNT
INDIRECT SPECIAL EVENT EXPENSE	188,132.
TOTAL TO FORM 990, PART IV-B	188,132.

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

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN-SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
WARREN SCHARF 331 EAST 70TH STREET NEW YORK. NY 10021	EXECUTIVE DIRECTOR 35HRS/WK	147,060.	13,786.	0.
JOSEPH GIRVEN 331 EAST 70TH STREET NEW YORK. NY 10021	DEPUTY EXE. DIR. FIN./CFO 35HRS/WK	104,846.	7,933.	0.
SYDNEY ROBERTS SHUMAN 331 EAST 70TH STREET NEW YORK. NY 10021	CHAIR 1HR/WK	0.	0.	0.
DIANA RONAN QUASHA 331 EAST 70TH STREET NEW YORK. NY 10021	PRESIDENT 1HR/WK	0.	0.	0.
RENEE LANDEGGER 331 EAST 70TH STREET NEW YORK. NY 10021	FIRST VICE PRESIDENT 1HR/WK	0.	0.	0.

ALLEN ADLER 331 EAST 70TH STREET NEW YORK. NY 10021	VICE PRESIDENT 1HR/WK	0.	0.	0.
GARY A. BELLER 331 EAST 70TH STREET NEW YORK. NY 10021	VICE PRESIDENT 1HR/WK	0.	0.	0.
CHRISTINA PENNOYER 331 EAST 70TH STREET NEW YORK. NY 10021	VICE PRESIDENT 1HR/WK	0.	0.	0.
JOHN ROSSELLI 331 EAST 70TH STREET NEW YORK. NY 10021	VICE PRESIDET 1HR/WK	0.	0.	0.
DAVID M. WIRTZ 331 EAST 70TH STREET NEW YORK. NY 10021	VICE PRESIDENT 1HR/WK	0.	0.	0.
HELENE H. TILNEY 331 EAST 70TH STREET NEW YORK. NY 10021	SECRETARY 1HR/WK	0.	0.	0.
MAL L. BARASCH 331 EAST 70TH STREET NEW YORK. NY 10021	TREASURER 1HR/WK	0.	0.	0.
MARK J. KIMSEY 331 EAST 70TH STREET NEW YORK. NY 10021	ASSISTANT TREASURER 1HR/WK	0.	0.	0.
CHARLES AYRES 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
RAJ ALVA 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
HAROLD D'O. BAKER 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
MARGERY BAKER-RIKER 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
THOMPSON DEAN 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.

THOMAS J. EDELMAN 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
JONATHAN GARGIULO 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
HELEN D. GOLDFARB 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
DR. ROGER L. GREIF 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
MRS. JAY V. GRIMM 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
MRS. MARTIN GRUSS 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
JANE S. HOFFMAN 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
AMABEL B. JAMES 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
KATHERINE KAHAN 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
JOHN H. MANICE 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
JOAN G. MASKET 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
MRS. GORDON B. PATTEE 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
MARTIN D. RAAB 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.

PHYLLIS C. ROBINNSON 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
GUY G. RUTHERFURD JR. 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
JUAN A. SABATER 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
PAMELA DAVIS VAN INGEN 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
CHARLES S. WARREN 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
HEDI H. WHITE 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
BUNNY WILLIAMS 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
MRS STANLEY ZABAR 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
EVA DILLON 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
ALEXANDRA KRAMER 331 EAST 70TH STREET NEW YORK. NY 10021	DIRECTOR 1HR/WK	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V		251,906.	21,719.	0.

Lenox Hill Neighborhood House, Inc.

Lenox Hill Neighborhood House (the "Neighborhood House") is a 112 year-old settlement house providing community-based social and educational services to 20,000 people in need every year on the East Side of Manhattan in New York City. The Neighborhood House is the oldest and largest social services organization on the Upper East Side with eight departments (Youth and Family Services, Older Adult Services, Homeless and Housing Services, Homecare (through our affiliate The Caring Neighbor), Legal Advocacy & Organizing, Visual and Performing Arts, Adult Education, Fitness & Recreation), more than 20 different programs, 210 staff and over 500 volunteers. Our mission is to help those in need who live, work, or go to school on Manhattan's East Side, primarily the Upper East Side, and to improve the quality of life for all individuals and families in our community. We define need broadly to include economic, social, emotional, and physical need, but give priority to those in economic need.

New Yorkers of all different cultures, ethnic groups, generations, and economic means who live, work, or attend school in the Neighborhood House's catchment area (East 14th Street to East 110th Street between Fifth Avenue and the East River as well as Roosevelt Island) come to us for our award-winning programs including an Early Childhood Center for 150 low-income children, an After School program, summer camp, support services for children and families, two senior centers, transportation services for older adults, financial and case management for homebound seniors, two social day programs for physically and cognitively frail older adults, a caregiver support program, permanent supportive housing for 54 formerly homeless adults, a 100-bed mental health shelter for homeless women, a street outreach program for homeless adults, homecare for 650 disabled adults and children, civil legal services, visual and performing arts, English language and computer classes, a Fitness and Aquatics Center, and more.

The Neighborhood House remains true to our tradition of offering to all those who come to us for help – from the very young to the very old – a seamless set of services to meet a multiplicity of needs. On any given day, a visitor might find our attorneys offering legal services to an older adult at risk of eviction from her home, or helping a homeless man receive his government benefits, or advocating for an abused child or victim of domestic violence. Or they may see our staff artists working together with case workers from our Women's Shelter in the Park Avenue Armory to develop arts projects for Shelter residents that support their goal of moving into their own apartments, such as making new placemats and tablecloths for their future homes. Lenox Hill Neighborhood House's expert professional staff work together tirelessly across our programs to meet the myriad, interrelated needs that arise when individuals live in poverty.

History

The Neighborhood House was founded in 1894 as a free kindergarten for the children of immigrants living and working on the Upper East Side of Manhattan. As the community has grown and diversified over the last 112 years so has the Neighborhood House. We have long been a center of community activism and leadership addressing such issues as affordable housing, poor working conditions, health care, hunger, childcare, poverty, unemployment, homelessness, juvenile delinquency, crime prevention, and long-term care for older adults. In addition to creating New York City's first tenants' rights group, the Neighborhood House helped organize New York City's first "Meals on Wheels" program, first government-funded social adult day care program, and helped create a continuum of care for homeless people in New York City.

Leadership

A skilled, active and established 38-member Board of Directors comprised of some of New York City's most prominent citizens leads the Neighborhood House. The Board's main responsibilities include strategic planning, financial support and organizational oversight. It recruits, establishes performance criteria and evaluates the Neighborhood House's Executive Director, who is an attorney with more than 20 years of successful experience leading programs for the indigent. He is a frequent speaker, educator and trainer on issues affecting unrepresented and underserved New Yorkers and was awarded the 1999 Legal Services Award from the Association of the Bar of the City of New York.

Programs

Youth & Family Services (YAFS): Lenox Hill Neighborhood House's YAFS Program offers approximately 400 low-income families each year a comprehensive educational experience where children learn, grow and develop in a nurturing environment. Our year-round program ensures that children can attend the Neighborhood House from 8 a.m. to 6 p.m., five days a week, 12 months a year. From their enrollment at age 3 in our full-day Early Childhood Center, to our After School and Summer Day Camp Programs, children age 3-12 are offered a seamless, developmentally appropriate curriculum designed to instill, support and stimulate a love of learning and to provide insight and understanding about the world in which they live. Services include counseling and other mental health supports, social service interventions for families, health services, civil legal services, visual and performing arts in our newly renovated art room and auditorium, swimming instruction in our pool, playtime in our gymnasium and outdoor playroof and classes in our computer lab. All children eat freshly prepared meals directed by a staff nutritionist, and we supervise transportation for our After School youngsters each day from their neighborhood schools.

The Early Childhood Center (ECC) is an award-winning, nationally recognized program for pre-schoolers (ages 3 to 6) accredited by The National Association for the Education of Young Children, a distinction given to fewer than 10 percent of early childhood programs nationwide. A pioneer in blending Federal, State and City funding, we offer a combined Head Start, Day Care, and Universal Pre-Kindergarten program to 148 low-income children from all five boroughs of New York City who reflect the City's amazing diversity. The New York City Administration for Children's Services has recognized the quality of the ECC with their "Exemplary Program Award." In January 2006, the Early Childhood Center was one of only two sites selected by Early Childhood Education leaders from the United Kingdom for a site visit as part of a Pew Charitable Trust initiative: Advancing Quality Pre-Kindergarten for All.

The After School Program serves 110 children ages 5 to 12, operating from 3:00pm to 6:00pm, Monday through Friday, and all day on school holidays. During the summer months, the program transforms into a day camp. The mission of our After School Program is to give young people the tools to strengthen their academic, social and emotional development and to improve their performance in school. Our curriculum provides academic remediation, support and enhancement to better enable children to develop and provides literacy and numeracy education; visual and performing arts education; recreational instruction and activities (including fitness and aquatics), and life skills workshops. All children receive a nutritious dinner every evening prepared by our Food Services staff.

Family Services and Supports: Our YAFS programs, integrated within our settlement house model of holistic services, address the whole family, offering our parents a wealth of services and supports including individual and group counseling, health services, visual and performing arts, fitness and aquatics and civil legal services. We also partner with many other neighborhood organizations, such as healthcare providers, to ensure that our families have access to critical services that we do not provide (e.g., medical and dental screenings, immunizations, therapy, etc.).

The Neighborhood House's Director of Youth and Family Services holds a Masters of Science degree in early childhood education, and has been with the Neighborhood House for more than 20 years. The Director is a sought-after speaker on the subject of early childhood education and is a member of the Education Advisory Board of the City University of New York's Hunter College and the Head Start Committee of the New York City Administration for Children's Services.

Older Adult Services: The Neighborhood House's Older Adult Services Department serves more than 10,000 senior citizens throughout New York City each year. The majority of these older adults are low-income individuals on fixed incomes. Our programs currently include two filled-to-capacity senior centers, seven-day-a-week transportation services, support for family caregivers and their frail elderly loved ones through Project STAR, financial and case management services through Project SCOPE, social day care for physically and cognitively frail elders through the HEP and CARE Programs, legal advocacy, visual and performing arts and computer education.

The Neighborhood House's Director of Older Adult Services has worked in the field of aging since 1988. She received her MSW from Yeshiva University in 1983 and is on the faculty of the Ehrenkranz School of Social Work at New York University and the Aging Advisory Committee at Columbia University School of Social Work.

Homeless and Housing Services: The Neighborhood House's Homeless Services Department serves approximately 2,000 homeless men and women each year. The Department's programs include: a Homeless Outreach Project; a 100-bed women's shelter serving women age 45 and over who are mentally ill; a supportive housing residence with apartments for 54 formerly homeless adults who are mentally ill; a transitional housing program which prepares homeless individuals for permanent housing; a Homeless Outreach Project for people living on the streets and in other public places, with special services for older adults suffering from undiagnosed mental illness; and the East Side Homeless Network, a collaboration with two other New York City non-profits, which coordinates services from outreach to transitional housing to employment for homeless men and women. Director of Homeless Services is an MSW with more than ten years of experience overseeing and creating programs for homeless people.

Legal Advocacy and Organizing Department: Our Legal Advocacy and Organizing Department provides direct legal assistance and representation to hundreds of Neighborhood House clients in multiple legal areas including housing, family law, government benefits and health insurance and integrates civil legal representation and education into the continuum of services and care for all our clients in need. This integration of general legal services into social service and educational programs is the first of its kind in a New York City community-based, multiservice organization. The Legal Department utilizes a model multidisciplinary approach with lawyers, social workers, educators and advocates working together to meet the diverse legal and social service needs of clients. The Department consists of four attorneys and three non-attorney advocates. The Department also works with several *pro bono* attorneys (including members of our Board of Directors) and law school interns.

The Director of our Legal Department is a graduate of Tufts University and a graduate of the University of Pennsylvania Law School (Order of the Coif; Senior Editor, *University of Pennsylvania Law Review*; Chair, Equal Justice Foundation). She is an experienced attorney who represented persons with AIDS in housing matters and employees in discrimination litigation before joining the Neighborhood House.

Visual & Performing Arts: The Neighborhood House's Visual and Performing Arts Department provides an arts education curriculum and activities to clients in all of the organization's programs. The arts curriculum includes instruction in basic techniques with a variety of media and a range of disciplines including visual arts, creative movement, music and drama. Under the leadership of the Director of Visual and Performing Arts, the program is carried out by a team of five Visual and Performing Arts Specialists, all of whom are themselves working artists. The Department also offers a community arts program through a monthly entertainment series, *Second Sundays* and a Community Theatre, which stages readings and plays by established playwrights as well as by aspiring writers throughout New York City.

The Director of Visual and Performing Arts is a graduate of the Tisch School of the Arts at New York University and has been with the Neighborhood House for 11 years.

Adult Education: The Adult Education Department offers English for Speakers of Other Languages classes and computer training. The Neighborhood House's Computer Learning Center serves approximately 800 individuals each year including low-income, underemployed individuals and welfare recipients who want to improve their skills or re-enter the work force.

The Adult Education Director is an experienced ESOL and computer education teacher and supervisor, with a Masters in Public Administration and International Affairs. Since 1988, he has taught, developed curricula for, and supervised adult education classes in New York, Washington DC, and Madrid, Spain.

Fitness and Aquatics: The Neighborhood House operates a Fitness Center with state-of-the-art equipment and an indoor heated swimming pool. Swimming instruction is part of the curriculum for all pre-school and school-age children. Special fitness activities are offered to seniors.

The Fitness Director is certified as a Water Safety Instructor and CPR Instructor. A masters-level professional, he has more than a decade of relevant experience.

Affiliated Program

The Caring Neighbor: The Caring Neighbor (TCN) was founded in 1981 as the home care affiliate of the Neighborhood House. TCN provides home care services, including assistance with bathing, grooming, dressing, walking, light housekeeping, shopping, and cooking, to approximately 650 low-income, frail, elderly and low-income disabled individuals in the New York City communities of the Upper and Lower East Side and Roosevelt Island. TCN employs more than 700 homecare attendants. The Director has almost 30 years of experience in home care, including several years as President and Chief Operating Officer of a $147 million, 25-branch, for-profit home health care agency.

Affiliations

Lenox Hill Neighborhood House is a member of United Neighborhood Houses of New York City, the Council of Senior Centers and Services of New York City, the Supportive Housing Network of New York City, the Day Care Council of New York City, the Council on Homeless Services and Policies of New York City, the Human Services Council of New York City, the Coalition of Voluntary Mental Health Agencies and the Federation of Protestant Welfare Agencies.

Form **8868** (Rev. December 2004)
Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

OMB No. 1545-1709

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

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)

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.

Electronic Filing (e-file). Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additional (not automatic) 3-month extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit *www.irs.gov/efile*.

Type or print	Name of Exempt Organization	**Employer identification number**
File by the due date for filing your return. See instructions.	LENOX HILL NEIGHBORHOOD HOUSE, INC	13-1628180
	Number, street, and room or suite no. If a P.O. box, see instructions. 1400 OLD COUNTRY ROAD, NO. 310	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WESTBURY, NY 11590	

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

[X] Form 990	[ ] Form 990-T (corporation)	[ ] Form 4720
[ ] Form 990-BL	[ ] Form 990-T (sec. 401(a) or 408(a) trust)	[ ] Form 5227
[ ] Form 990-EZ	[ ] Form 990-T (trust other than above)	[ ] Form 6069
[ ] Form 990-PF	[ ] Form 1041-A	[ ] Form 8870

- The books are in the care of ▶ JOE GIRVEN
  Telephone No. ▶ (212)744-5022 FAX No. ▶ (212)396-4838
- 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-months for a **Form 990-T corporation**) extension of time until FEBRUARY 15, 2006 .
to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ [ ] calendar year ______ or
▶ [X] tax year beginning JUL 1, 2004 , and ending JUN 30, 2005 .

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

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an **Additional (not automatic) 3-Month Extension, complete only Part II** and check this box ▶ [X]

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 LENOX HILL NEIGHBORHOOD HOUSE, INC	Employer identification number 13-1628180
	Number, street, and room or suite no. If a P.O. box, see instructions. 331 EAST 70TH STREET	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10021	

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

[X] Form 990 [ ] Form 990-EZ [ ] Form 990-T (sec. 401(a) or 408(a) trust) [ ] Form 1041-A [ ] Form 5227 [ ] Form 8870
[ ] Form 990-BL [ ] Form 990-PF [ ] Form 990-T (trust other than above) [ ] Form 4720 [ ] Form 6069

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

- The books are in the care of ▶ JOE GIRVEN
  Telephone No. ▶ (212)744-5022 FAX No. ▶ (212)396-4838
- 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 15, 2006 .

5 For calendar year ______ , or other tax year beginning JUL 1, 2004 and ending JUN 30, 2005 .

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 REQUESTED FROM THIRD PARTIES IN ORDER
TO COMPLETE THE RETURN IS STILL NOT 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 ▶ [signature] Title ▶ CPA Date ▶ 2/10/06

Notice to Applicant - To Be Completed by the IRS

[X] We **have** approved this application. Please attach this form to the organization's return.

[ ] We **have not** approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return.

[ ] We **have not** approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.

[ ] We **cannot consider** this application because it was filed after the extended due date of the return for which an extension was requested.

[ ] Other ______

______ By. ______ ______
Director 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** ATTN: SANDY PAILLERE, 12TH FL, MARKS PANETH & SHRON LLP
	Number and street (include suite, room, or apt. no.) or a P.O. box number 622 THIRD AVENUE
423832 01-10-05	**City or town, province or state, and country (including postal or ZIP code)** NEW YORK, NY 10017

EXTENSION APPROVED
FEB 22 2006
FIELD DIRECTOR, ... PROCESSING, OGDEN