

Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2004

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

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

A For the 2004 calendar year, or tax year beginning **SEP 1, 2004** and ending **AUG 31, 2005**

- 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
THE ELAINE KAUFMAN CULTURAL CENTER/LUCY MOSES SCHOOL FOR MUSIC AND DANCE

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
129 WEST 67TH STREET

City or town, state or country, and ZIP + 4
NEW YORK, NY 10023

D Employer identification number
13-1991118

E Telephone number
212-501-3303

F Accounting method: Cash 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 No

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

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

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

I Group Exemption Number _____

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

G Website: **N/A**

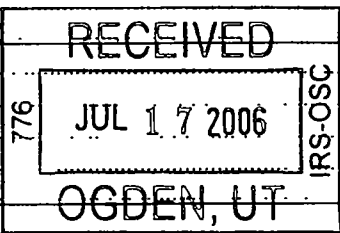
J Organization type (check only one) 501(c) (3) (insert no) 4947(a)(1) or 527

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

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **7,891,719.**

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	2,152,276.		
	b	Indirect public support	1b			
	c	Government contributions (grants)	1c	94,650.		
	d	Total (add lines 1a through 1c) (cash \$ 2,246,926. noncash \$)	1d	2,246,926.		
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	2,883,245.		
	3	Membership dues and assessments	3			
	4	Interest on savings and temporary cash investments	4	1,231.		
	5	Dividends and interest from securities	5	220,720.		
	6a	Gross rents SEE STATEMENT 1	6a	488,499.		
	b	Less rental expenses	6b			
	c	Net rental income or (loss) (subtract line 6b from line 6a)	6c	488,499.		
7	Other investment income (describe _____)	7				
Revenue	8a	Gross amount from sales of assets other than inventory	(A) Securities	1,979,458.	8a	
	b	Less cost or other basis and sales expenses		1,732,088.	8b	
	c	Gain or (loss) (attach schedule)		247,370.	8c	
	d	Net gain or (loss) (combine line 8c, columns (A) and (B) STMT 2			8d	247,370.
	9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>				
	a	Gross revenue (not including \$ 396,906. of contributions reported on line 1a)	9a	71,640.		
	b	Less direct expenses other than fundraising expenses	9b	117,016.		
	c	Net income or (loss) from special events (subtract line 9b from line 9a) SEE STATEMENT 3	9c	<45,376.>		
	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	6,042,615.			
Expenses	13	Program services (from line 44, column (B))	13	4,699,004.		
	14	Management and general (from line 44, column (C))	14	270,469.		
	15	Fundraising (from line 44, column (D))	15	608,336.		
	16	Payments to affiliates (attach schedule)	16			
	17	Total expenses (add lines 16 and 44, column (A))	17	5,577,809.		
18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	464,806.			
Net Assets	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	12,738,106.		
	20	Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 4	20	74,627.		
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	13,277,539.		



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LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2004)

22

**THE ELAINE KAUFMAN CULTURAL CENTER/LUCY
MOSES SCHOOL FOR MUSIC AND DANCE**

13-1991118

Part II Statement of Functional Expenses

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

Page 2

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 \$ 146,750. noncash \$ _____)	146,750.	146,750.	STATEMENT 7	
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc.	142,782.	119,937.	7,139.	15,706.
26	Other salaries and wages	2,794,262.	2,415,488.	74,940.	303,834.
27	Pension plan contributions		0.	0.	0.
28	Other employee benefits	253,566.	189,841.	35,031.	28,694.
29	Payroll taxes	228,699.	193,282.	6,202.	29,215.
30	Professional fundraising fees	103,025.			103,025.
31	Accounting fees	19,012.		19,012.	
32	Legal fees	49,735.		49,735.	
33	Supplies	196,060.	159,522.	1,817.	34,721.
34	Telephone	21,949.	15,610.	2,063.	4,276.
35	Postage and shipping	93,850.	72,319.	4,940.	16,591.
36	Occupancy	343,997.	326,797.	10,320.	6,880.
37	Equipment rental and maintenance	108,262.	99,227.	3,305.	5,730.
38	Printing and publications	12,051.	6,443.	4,824.	784.
39	Travel				
40	Conferences, conventions, and meetings				
41	Interest				
42	Depreciation, depletion, etc (attach schedule)	308,204.	292,794.	9,246.	6,164.
43	Other expenses not covered above (itemize):				
a	_____				
b	_____				
c	_____				
d	_____				
e	SEE STATEMENT 5	755,605.	660,994.	41,895.	52,716.
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	5,577,809.	4,699,004.	270,469.	608,336.

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

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____;

(iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? **SEE STATEMENT 6**

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	CLASSES AND PRIVATE LESSONS IN MUSIC, DANCE, AND THEATER FOR OVER 2,000 CHILDREN AND ADULTS AT THE LUCY MOSES SCHOOL, TAUGHT BY AN EXPERT FACULTY OF OVER 100. (Grants and allocations \$ 146,750.)	2,218,545.
b	CONCERTS IN MERKIN CONCERT HALL PRESENTED BY THE CENTER AS WELL AS BY INDEPENDENT ARTISTS AND ORGANIZATIONS AND STUDENTS FROM THE CENTER'S SCHOOLS. (Grants and allocations \$ _____)	1,300,797.
c	PRE-PROFESSIONAL MUSIC TRAINING PROGRAM FOR THE 140 STUDENTS AT THE SPECIAL MUSIC SCHOOL (PS 859), WHICH IS A PARTNERSHIP BETWEEN THE KAUFMAN CENTER AND THE NYC DEPARTMENT OF EDUCATION. (Grants and allocations \$ _____)	1,074,086.
d	ARTS OUTREACH PROGRAMS IN PUBLIC SCHOOLS AND COMMUNITY CENTERS. (Grants and allocations \$ _____)	77,849.
e	Other program services (attach schedule) STATEMENT 8 (Grants and allocations \$ _____)	27,727.
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)	4,699,004.

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	295,459.	45	503,483.
	46 Savings and temporary cash investments	1,143,001.	46	1,098,841.
	47 a Accounts receivable	17,192.		
	b Less allowance for doubtful accounts	6,413.	9,271.	47c 10,779.
	48 a Pledges receivable	670,713.		
	b Less allowance for doubtful accounts		887,967.	48c 670,713.
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees		50	
	51 a Other notes and loans receivable			
	b Less allowance for doubtful accounts			51c
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	381,210.	53	476,254.
	54 Investments - securities STMT 9 STMT 10 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	5,529,333.	54	6,310,516.
	55 a Investments - land, buildings, and equipment: basis			
	b Less accumulated depreciation			55c
56 Investments - other		56		
57 a Land, buildings, and equipment: basis	9,242,237.			
b Less accumulated depreciation STMT 11	3,979,974.	5,387,270.	57c 5,262,263.	
58 Other assets (describe <input type="checkbox"/> SEE STATEMENT 12)	60,394.	58	43,245.	
59 Total assets (add lines 45 through 58) (must equal line 74)	13,693,905.	59	14,376,094.	
Liabilities	60 Accounts payable and accrued expenses	157,737.	60	156,065.
	61 Grants payable		61	
	62 Deferred revenue	598,633.	62	750,122.
	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 <input type="checkbox"/> SEE STATEMENT 13)	199,429.	65	192,368.	
66 Total liabilities (add lines 60 through 65)	955,799.	66	1,098,555.	
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	6,248,490.	67	6,667,385.
	68 Temporarily restricted	788,229.	68	867,469.
	69 Permanently restricted	5,701,387.	69	5,742,685.
	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)	12,738,106.	73	13,277,539.	
74 Total liabilities and net assets / fund balances (add lines 66 and 73)	13,693,905.	74	14,376,094.	

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

**THE ELAINE KAUFMAN CULTURAL CENTER/LUCY
MOSES SCHOOL FOR MUSIC AND DANCE**

Form 990 (2004)

13-1991118

Page 5

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		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.		X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		X
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?		X
b	If "Yes," enter the name of the organization and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81 a	Enter direct or indirect political expenditures. See line 81 instructions 81a 0.		
b	Did the organization file Form 1120-POL for this year?		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?		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 N/A		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		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		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A 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		
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		
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		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		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 171		
91	The books are in care of SUSAN COHEN Telephone no 212-501-3303		
	Located at 129 WEST 67TH STREET NY, NY ZIP + 4 10023		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A		

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Form 990 (2004)

THE ELAINE KAUFMAN CULTURAL CENTER/LUCY
MOSES SCHOOL FOR MUSIC AND DANCE

Form 990 (2004)

13-1991118

Page 6

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

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a TUITION					1,894,343.
b CONCERT DIVISION					988,902.
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			14	1,231.	
96 Dividends and interest from securities			14	220,720.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property			16	488,499.	
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	247,370.	
101 Net income or (loss) from special events			01	<45,376.>	
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))		0.		912,444.	2,883,245.
105 Total (add line 104, columns (B), (D), and (E))					3,795,689.

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)
93A	TUITION FOR EDUCATION IN THE ARTS AND JEWISH CULTURE
93B	INCOME FROM CONCERT PRESENTATIONS AND PRODUCTIONS FOR PROFESSIONALS AND STUDENTS

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: 7/11/06 Type or print name and title: Lydie Kontos - Executive Director

Paid Preparer's Use Only

Preparer's signature: *[Signature]* Date: 7/6/06 Check if self-employed: Preparer's SSN or PTIN: _____

Firm's name (or yours if self-employed), address, and ZIP + 4: LOEB & TROPER, 655 THIRD AVENUE, NEW YORK, NY 10017

EIN: _____ Phone no.: 212-867-4000

Form 990 (2004)

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

OMB No 1545-0047

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

2004

Department of the Treasury
Internal Revenue Service

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

Name of the organization **THE ELAINE KAUFMAN CULTURAL CENTER/LUCY MOSES SCHOOL FOR MUSIC AND DANCE** Employer identification number **13 1991118**

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
KAREN CHESTER ----- 129 WEST 67TH ST., NEW YORK, NY 10023	CNCRT DIV DIR 40	81,539.	8,171.	
ALLISON BALL ----- 129 WEST 67TH ST., NEW YORK, NY 10023	DIRECTOR 40	55,674.	3,839.	
KATHY HUBBARD ----- 129 WEST 67TH ST., NEW YORK, NY 10023	DIR. ADMIN 40	71,695.	9,253.	
FAYE SCHEINER ----- 129 WEST 67TH ST., NEW YORK, NY 10023	DIR. OF EDU 40	52,680.	2,449.	
JUDY RINGER ----- 129 WEST 67TH ST., NEW YORK, NY 10023	DIR. DEVELOP 40	112,539.	9,281.	
Total number of other employees paid over \$50,000	▶ 0			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None ")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
SUSAN J. COHEN ----- 140 STANMORE PLACE WESTFIELD NJ 07090	ACCOUNTING	52,548.
GOODALE ASSOCIATES ----- 63 GREENE ST NY NY 10012	FUNDRAISING	103,025.
HOLLAND AND KNIGHT, LLP ----- PO BOX 32092 LAKELENAD, FL 33802	LEGAL	55,232.
----- ----- -----		
Total number of others receiving over \$50,000 for professional services	▶ 0	

THE ELAINE KAUFMAN CULTURAL CENTER/LUCY

Part III Statements About Activities (See page 2 of the instructions.)

	Yes	No
<p>1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)</p> <p>Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.</p>		X
<p>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.)</p>		
<p>a Sale, exchange, or leasing of property?</p>		X
<p>b Lending of money or other extension of credit?</p>		X
<p>c Furnishing of goods, services, or facilities?</p>		X
<p>d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V, FORM 990.</p>	X	
<p>e Transfer of any part of its income or assets?</p>		X
<p>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) SEE STATEMENT 18</p>	X	
<p>b Do you have a section 403(b) annuity plan for your employees?</p>	X	
<p>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?</p>		X
<p>b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?</p>		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.)

THE ELAINE KAUFMAN CULTURAL CENTER/LUCY

Schedule A (Form 990 or 990-EZ) 2004 MOSES SCHOOL FOR MUSIC AND DANCE

13-1991118 Page 3

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. N/A
 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.)					
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	0.	0.	0.	0.	0.
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 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) _____ (2002) _____ (2001) _____ (2000) _____					
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) _____ (2002) _____ (2001) _____ (2000) _____					
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					27c N/A
d Add: Line 27a total _____ and line 27b total _____					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					27f N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 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.					

THE ELAINE KAUFMAN CULTURAL CENTER/LUCY

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?	X	
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?	X	
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.) SEE STATEMENT 19	X	
32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	X	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	X	
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)	X	
33	Does the organization discriminate by race in any way with respect to.		
a	Students' rights or privileges?		X
b	Admissions policies?		X
c	Employment of faculty or administrative staff?		X
d	Scholarships or other financial assistance?		X
e	Educational policies?		X
f	Use of facilities?		X
g	Athletic programs?		X
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		X
34 a	Does the organization receive any financial aid or assistance from a governmental agency?		X
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.		X
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	X	

THE ELAINE KAUFMAN CULTURAL CENTER/LUCY

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.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(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.

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
	BUILDINGS											
2	BUILDING		SL	40.000	16	3799308.			3799308.	2445811.		94,983.
3	BUILDING IMPROVEMENTS		SL	.000	16	3488968.			3488968.	712,793.		153,386.
	* 990 PAGE 2 TOTAL											
	BUILDINGS					7288276.		0.	7288276.	3158604.	0.	248,369.
	FURNITURE & FIXTURES											
	FURNITURE AND											
4	EQUIPMENT		SL	.000	16	778,632.			778,632.	513,166.		59,835.
	* 990 PAGE 2 TOTAL											
	FURNITURE & FIXTURES					778,632.		0.	778,632.	513,166.	0.	59,835.
	LAND											
1	LAND			.000	16	993,154.			993,154.			0.
	CONSTRUCTION IN											
5	PROGRESS			.000	16	182,175.			182,175.			0.
	* 990 PAGE 2 TOTAL											
	LAND					1175329.		0.	1175329.	0.	0.	0.
	* GRAND TOTAL 990 PAGE											
2	DEPR					9242237.		0.	9242237.	3671770.	0.	308,204.

428102 10-08-04 (D) - Asset disposed * ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction 16

FORM 990 RENTAL INCOME STATEMENT 1

KIND AND LOCATION OF PROPERTY	ACTIVITY NUMBER	GROSS RENTAL INCOME
NYC DEPT OF EDUCATION - MUSIC EDUC. PRGM.	1	488,499.
TOTAL TO FORM 990, PART I, LINE 6A		488,499.

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

DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
	1,979,458.	1,732,088.	0.	247,370.
TO FORM 990, PART I, LINE 8	1,979,458.	1,732,088.	0.	247,370.

FORM 990 SPECIAL EVENTS AND ACTIVITIES STATEMENT 3

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
HONORS GALA	468,546.	396,906.	71,640.	117,016.	<45,376.>
TO FM 990, PART I, LINE 9	468,546.	396,906.	71,640.	117,016.	<45,376.>

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

DESCRIPTION	AMOUNT
UNREALIZED GAIN ON INVESTMENTS	74,627.
TOTAL TO FORM 990, PART I, LINE 20	74,627.

FORM 990 OTHER EXPENSES STATEMENT 5

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
SERVICE CHARGE/BANK CHARGES	37,157.	36,324.		833.
OUTSIDE SERVICES	260,133.	226,966.	16,983.	16,184.
ADVERTISING	84,512.	83,226.	98.	1,188.
CULTIVATION EXPENSE	22,007.	10,184.	4,276.	7,547.
MARKETING DIVISION	60,053.	45,040.		15,013.
SUNDRY	446.	415.	25.	6.
ARTIST FEES	166,660.	166,660.		
COMPUTERIZATION	12,013.	6,916.	3,084.	2,013.
PROMOTIONAL MATERIALS	37,206.	33,310.		3,896.
INVESTMENTS ADVISORY FEES	25,323.	7,894.	17,429.	
GRAPHIC ARTIST ADVERTISING OTHER	34,547.	28,511.		6,036.
CONCERTS	12,140.	12,140.		
CONCESSION EXPENSE	3,408.	3,408.		
TOTAL TO FM 990, LN 43	755,605.	660,994.	41,895.	52,716.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 6
PART III

EXPLANATION

A MULTI-ARTS ORGANIZATION COMPRISING THE RENOWNED MERKIN CONCERT HALL, THE LUCY MOSES SCHOOL (A COMMUNITY ARTS SCHOOL) AND THE SPECIAL MUSIC SCHOOL P.S. 859, A NEW YORK CITY PUBLIC SCHOOL FOR MUSICALLY-GIFTED CHILDREN). DEDICATED TO ARTS EDUCATION AND PERFORMANCE, THE KAUFMAN CENTER IS A UNIQUE RESOURCE IN A CITY FILLED WITH OPTIONS FOR BOTH. THROUGH ITS THREE DIVISIONS THE CENTER IS COMMITTED TO PROVIDING EXCELLENCE IN TEACHING AND INNOVATION IN PROGRAMMING.

FORM 990 CASH GRANTS AND ALLOCATIONS STATEMENT 7

CLASSIFICATION	DONEE'S NAME	DONEE'S ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
NEED & MERIT BASED SCHOLARSHIPS	135 AWARDS GIVEN		NONE	146,750.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22				146,750.

FORM 990 OTHER PROGRAM SERVICES STATEMENT 8

DESCRIPTION	GRANTS AND ALLOCATIONS	EXPENSES
LIBRARY OF MUSCIC BOOKS AND SCORES, WITH A SPECIAL COLLECTION OF ISRAELI AND JEWISH MUSIC.		27,727.
TOTAL TO FORM 990, PART III, LINE E		27,727.

FORM 990 NON-GOVERNMENT SECURITIES STATEMENT 9

SECURITY DESCRIPTION	COST/FMV	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	TOTAL NON-GOV'T SECURITIES
INDEX FUND	FMV	190,400.			190,400.
CORPORATE BONDS	FMV		1,600,160.		1,600,160.
COMMON STOCKS	FMV	3,210,279.			3,210,279.
TO FORM 990, LINE 54, COL B		3,400,679.	1,600,160.		5,000,839.

FORM 990 GOVERNMENT SECURITIES STATEMENT 10

DESCRIPTION	COST/FMV	U.S. GOVERNMENT	STATE AND LOCAL GOV'T	TOTAL GOV'T SECURITIES
US GOVERNMENT OBLIGATIONS	FMV	1,309,677.		1,309,677.
TOTAL TO FORM 990, LINE 54, COL B		1,309,677.		1,309,677.

FORM 990 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 11

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
LAND	993,154.	0.	993,154.
BUILDING	3,799,308.	2,540,794.	1,258,514.
BUILDING IMPROVEMENTS	3,488,968.	866,179.	2,622,789.
FURNITURE AND EQUIPMENT	778,632.	573,001.	205,631.
CONSTRUCTION IN PROGRESS	182,175.	0.	182,175.
TOTAL TO FORM 990, PART IV, LN 57	9,242,237.	3,979,974.	5,262,263.

FORM 990 OTHER ASSETS STATEMENT 12

DESCRIPTION	AMOUNT
ACCRUED INTEREST AND OTHER RECEIVABLES	43,245.
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B	43,245.

FORM 990 OTHER LIABILITIES STATEMENT 13

DESCRIPTION	AMOUNT
ACCRUED RETIREMENT BENEFITS	192,368.
TOTAL TO FORM 990, PART IV, LINE 65, COLUMN B	192,368.

FORM 990	OTHER EXPENSES NOT INCLUDED ON FORM 990	STATEMENT	14
DESCRIPTION		AMOUNT	
	SPECIAL EVENTS		117,016.
TOTAL TO FORM 990, PART IV-B			117,016.

FORM 990	OTHER REVENUE INCLUDED ON FORM 990	STATEMENT	15
DESCRIPTION		AMOUNT	
	SCHOLARSHIP BENEFITS		146,750.
	SPECIAL EVENTS		<117,016.>
TOTAL TO FORM 990, PART IV-A			29,734.

FORM 990	OTHER EXPENSES INCLUDED ON FORM 990	STATEMENT	16
DESCRIPTION		AMOUNT	
	SCHOLARSHIP BENEFITS		146,750.
TOTAL TO FORM 990, PART IV-B			146,750.

FORM 990

PART V - LIST OF OFFICERS, DIRECTORS,
TRUSTEES AND KEY EMPLOYEES

STATEMENT 17

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
MS. LYDIA KONTOS 129 WEST 67TH STREET NEW YORK, NY 10023	EXEC. DIRECTOR 40 +	142,782.	20,306.	0.
MRS. PHYLLIS FEDER 129 WEST 67TH STREET NEW YORK, NY 10023	CHAIRMAN 2	0.	0.	0.
MR. LEONARD GOODMAN 129 WEST 67TH STREET NEW YORK, NY 10023	HONORARY CHAIR 2	0.	0.	0.
MRS. ELAINE KAUFMAN 129 WEST 67TH STREET NEW YORK, NY 10023	HONORARY CHAIR 2	0.	0.	0.
MRS. LINDA SHAPIRO CHEMTOB 129 WEST 67TH STREET NEW YORK, NY 10023	VICE PRESIDENT 2	0.	0.	0.
MS. ROSALIND DEVON 129 WEST 67TH STREET NEW YORK, NY 10023	VICE PRESIDENT 2	0.	0.	0.
MR. CHARLES DIMSTON 129 WEST 67TH STREET NEW YORK, NY 10023	VICE PRESIDENT 2	0.	0.	0.
MS. BETHANY MILLARD 129 WEST 67TH STREET NEW YORK, NY 10023	VICE PRESIDENT 2	0.	0.	0.
MR. IRVING SITNICK 129 WEST 67TH STREET NEW YORK, NY 10023	VICE PRESIDENT 2	0.	0.	0.
MR. EMANUEL GENAUER 129 WEST 67TH STREET NEW YORK, NY 10023	TREASURER 2	0.	0.	0.
MRS. ETTA BRANDMAN 129 WEST 67TH STREET NEW YORK, NY 10023	ASSISTANT TREASURER 2	0.	0.	0.

MR. SOLOMON N. MERKIN 129 WEST 67TH STREET NEW YORK, NY 10023	SECRETARY 2	0.	0.	0.
MS. SALLY F. BROIDO 129 WEST 67TH STREET NEW YORK, NY 10023	TRUSTEE 2	0.	0.	0.
MS. ANDREA BROWN 129 WEST 67TH STREET NEW YORK, NY 10023	TRUSTEE 2	0.	0.	0.
MS. JULIANA CHEN 129 WEST 67TH STREET NEW YORK, NY 10023	TRUSTEE 2	0.	0.	0.
MS. PAULA DEL NUNZIO 129 WEST 67TH STREET NEW YORK, NY 10023	TRUSTEE 2	0.	0.	0.
MR. ADRIAN ELLIS 129 WEST 67TH STREET NEW YORK, NY 10023	TRUSTEE 2	0.	0.	0.
MRS. CONNIE GOODMAN 129 WEST 67TH STREET NEW YORK, NY 10023	TRUSTEE 2	0.	0.	0.
DR. TZIPORA H JOCHSBERGER 129 WEST 67TH STREET NEW YORK, NY 10023	TRUSTEE 2	0.	0.	0.
MR. DAVID KLAFTER 129 WEST 67TH STREET NEW YORK, NY 10023	TRUSTEE 2	0.	0.	0.
MRS. CHRISTINA M. MASON 129 WEST 67TH STREET NEW YORK, NY 10023	TRUSTEE 2	0.	0.	0.
MRS. URSULA MERKIN 129 WEST 67TH STREET NEW YORK, NY 10023	TRUSTEE 2	0.	0.	0.
MRS. WENDY MOSLER 129 WEST 67TH STREET NEW YORK, NY 10023	TRUSTEE 2	0.	0.	0.
MR. ROY NIEDERHOFFER 129 WEST 67TH STREET NEW YORK, NY 10023	TRUSTEE 2	0.	0.	0.

MS. CATHY WHITE O'ROURKE 129 WEST 67TH STREET NEW YORK, NY 10023	TRUSTEE 2	0.	0.	0.
MS. BROOKE ROSE 129 WEST 67TH STREET NEW YORK, NY 10023	TRUSTEE 2	0.	0.	0.
MR. MORTON G. SCHERAGA 129 WEST 67TH STREET NEW YORK, NY 10023	VICE PRESIDENT 2	0.	0.	0.
MRS. JAQUELINE B. SCHNEIDER 129 WEST 67TH STREET NEW YORK, NY 10023	TRUSTEE 2	0.	0.	0.
MS. KAREN SHERRY 129 WEST 67TH STREET NEW YORK, NY 10023	TRUSTEE 2	0.	0.	0.
MRS. BARBARA A. SLOAN 129 WEST 67TH STREET NEW YORK, NY 10023	TRUSTEE 2	0.	0.	0.
MS. DAVIA TEMIN 129 WEST 67TH STREET NEW YORK, NY 10023	TRUSTEE 2	0.	0.	0.
MR. JEFFREY WECKER 129 WEST 67TH STREET NEW YORK, NY 10023	TRUSTEE 2	0.	0.	0.
MS. ROSEMARIE WOLFE RUBENFELD 129 WEST 67TH STREET NEW YORK, NY 10023	TRUSTEE 2	0.	0.	0.
MS. JOY WYATT 129 WEST 67TH STREET NEW YORK, NY 10023	TRUSTEE 2	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V		<u>142,782.</u>	<u>20,306.</u>	<u>0.</u>

SCHEDULE A EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS STATEMENT 18
PART III, LINE 3

AS A COMMUNITY ARTS SCHOOL, LUCY MOSES WORKS WITH ALL FAMILIES TO ENSURE THEIR ABILITY TO ENROLL FOR LESSONS OR CLASSES REGARDLESS OF ABILITY TO PAY. FAMILIES MAY APPLY FOR TUITION ASSISTANCE BY COMPLETING AN APPLICATION AND SUPPLYING RELEVANT SUPPORTING MATERIALS INCLUDING TAX RETURNS, WAGE STATEMENTS, ETC. BASED ON THIS INFORMATION, AND COUPLED WITH THE PROPOSED PROGRAM REGISTRATION OF THE CHILD (OR CHILDREN) AND THE RELATED COSTS, THE APPLICATION IS REVIEWED BY THE DIRECTOR OF THE SCHOOL IN TANDEM WITH

CONVERSATIONS WITH RELEVANT FACULTY AND ADMINISTRATIVE COLLEAGUES. AWARDS ARE APPLIED FOR ON AN ANNUAL BASIS. RENEWAL OF AWARDS INVOLVE APPLICATION, REVIEW OF PROGRESS REPORTS AND EVALUATIONS COMPLETED BY OUR FACULTY, AND REFERENCES FROM TEACHERS. STUDENTS WHO RECEIVE AWARDS ARE ASKED TO SIGN A LETTER OF AGREEMENT REGARDING ATTENDANCE, ATTITUDE, AND COMMUNITY INVOLVEMENT AND PARTICIPATION WITHIN THE LUCY MOSES SCHOOL.

SCHEDULE A PRIVATE SCHOOL QUESTIONNAIRE - PART V, LINE 31 STATEMENT 19

THE KAUFMAN CENTER DOES NOT DISCRIMINATE ON THE BASIS OF SEX, RACE, RELIGION, COLOR, NATIONAL ORIGIN OR ANCESTRY, CITIZENSHIP STATUS, PREGNANCY, MARITAL STATUS, NON-JOB RELATED PHYSICAL HANDICAPS, AGE OR SEXUAL ORIENTATION IN EMPLOYMENT OR ADMINISTRATION OF ITS EDUCATIONAL POLICIES, ADMISSION POLICIES, SCHOLARSHIP PROGRAMS OR OTHER SCHOOL-ADMINISTERED PROGRAMS OR ACTIVITIES. THE CENTER IS AN EQUAL OPPORTUNITY EMPLOYER. THE CENTER PUBLISHES THIS STATEMENT IN VARIOUS PRINT MEDIA.

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

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

Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization Elaine Kaufman Cultural Ctr/ Lucy Moses School For	Employer identification number 13-1991118
	Number, street, and room or suite no. If a P.O. box, see instructions 129 West 67th Street	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions New York, NY 10023	

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

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

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 **Susan Cohen**
Telephone No. **212-501-3303** FAX No. _____
- 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 July 15, 2006

5 For calendar year _____, or other tax year beginning September 1, 2004, and ending August 31, 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 Certain information necessary to file a complete and accurate return is not yet available. it is anticipated that all data will be available prior to the extended due date.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ _____

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

c **Balance Due.** Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions. \$ **0.00**

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 **April 3, 2006**

Notice to Applicant—To Be Completed by the IRS

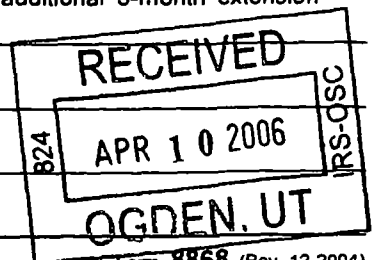
- We have approved this application. Please attach this form to the organization's return.
- We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This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

FIELD DIRECTOR,
SUBMISSION PROCESSING, OGDEN

Director _____ By _____ Date _____

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

Type or print	Name Loeb & Troper---Frederick H. Rothman
	Number and street (include suite, room, or apt. no.) or a P.O. box number 655 Third Avenue, 12th Floor
	City or town, province or state, and country (including postal or ZIP code) New York, NY 10017



ENVELOPE POSTMARK DATE APR 03 2006