

**Return of Organization Exempt From Income Tax**

**2004**

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

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

**A** For the 2004 calendar year, or tax year beginning July, 2004, and ending June, 2005

Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input checked="" type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	<b>C</b> Name of organization <u>MA of the Neighborhood School Inc</u>	<b>D</b> Employer identification number <u>13-4033837</u>
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite <u>121 E 30th Street</u>	<b>E</b> Telephone number <u>(212) 387-0195</u>
		City or town, state or country, and ZIP + 4 <u>NY, NY 10009-7322</u>	<b>F</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)

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

H and I are not applicable to section 527 organizations.

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

H(b) If "Yes," enter number of affiliates 0

H(c) Are all affiliates included?  Yes  No (If "No," attach a list. See instructions.)

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

**G** Website:

**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 74818.93

**I** Group Exemption Number

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

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See page 18 of the instructions.)

Revenue	<b>1</b> Contributions, gifts, grants, and similar amounts received:			
	<b>a</b> Direct public support	1a	<u>39,585.07</u>	
	<b>b</b> Indirect public support	1b	<u>—</u>	
	<b>c</b> Government contributions (grants)	1c	<u>—</u>	
	<b>d</b> Total (add lines 1a through 1c) (cash \$ <u>39,585.07</u> noncash \$ <u>—</u> )	1d		<u>39,585.07</u>
	<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)	2		<u>—</u>
	<b>3</b> Membership dues and assessments	3		<u>—</u>
	<b>4</b> Interest on savings and temporary cash investments	4		<u>309.08 interest</u>
	<b>5</b> Dividends and interest from securities	5		<u>—</u>
	<b>6a</b> Gross rents	6a		
	<b>b</b> Less: rental expenses	6b		
	<b>c</b> Net rental income or (loss) (subtract line 6b from line 6a)	6c		<u>—</u>
<b>7</b> Other investment income (describe <u></u> )	7		<u>—</u>	
	<b>8a</b> Gross amount from sales of assets other than inventory	(A) Securities	8a	
	<b>b</b> Less: cost or other basis and sales expenses		8b	
	<b>c</b> Gain or (loss) (attach schedule)		8c	
	<b>d</b> Net gain or (loss) (combine line 8c, columns (A) and (B))		8d	
	<b>9</b> Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>			
	<b>a</b> Gross revenue (not including \$ <u>—</u> of contributions reported on line 1a)	9a	<u>34924.78</u>	
	<b>b</b> Less: direct expenses other than fundraising expenses	9b	<u>3538.00</u>	
	<b>c</b> Net income or (loss) from special events (subtract line 9b from line 9a)	9c		<u>31,386.78</u>
	<b>10a</b> Gross sales of inventory, less returns and allowances	10a	<u>—</u>	
	<b>b</b> Less: cost of goods sold	10b	<u>—</u>	
	<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c		<u>—</u>
	<b>11</b> Other revenue (from Part VII, lines 10a, 10b, 10c, and 11)	11		<u>—</u>
	<b>12</b> Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		<u>71,280.93</u>
Expenses	<b>13</b> Program services (from line 44, column (B))	13		<u>63,411.03</u>
	<b>14</b> Management and general (from line 44, column (C))	14		<u>5,560.67</u>
	<b>15</b> Fundraising (from line 44, column (D))	15		<u>—</u>
	<b>16</b> Payments to affiliates (attach schedule)	16		<u>—</u>
	<b>17</b> Total expenses (add lines 13 and 14, column (A))	17		<u>68,971.70</u>
Net Assets	<b>18</b> Excess or (deficit) for the year (subtract line 17 from line 12)	18		<u>2,309.23</u>
	<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))	19		<u>35,344.88</u>
	<b>20</b> Other changes in net assets or fund balances (attach explanation)	20		<u>—</u>
	<b>21</b> Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		<u>37,654.11</u>

RECEIVED  
FEB 1 2006

ENVELOPE  
POSTMARK DATE FEB 13 2006

SCANNED MAR 01 2006

✓ 8 A/E 8

**Part II Statement of Functional Expenses** All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 22 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)	—	—	—	—
23	Specific assistance to individuals (attach schedule)	—	—	—	—
24	Benefits paid to or for members (attach schedule)	—	—	—	—
25	Compensation of officers, directors, etc.	—	—	—	—
26	Other salaries and wages	—	—	—	—
27	Pension plan contributions	—	—	—	—
28	Other employee benefits	—	—	—	—
29	Payroll taxes	—	—	—	—
30	Professional fundraising fees	—	—	—	—
31	Accounting fees	—	—	—	—
32	Legal fees	—	—	—	—
33	Supplies	3747.18	—	3747.18	—
34	Telephone	409.49	—	409.49	—
35	Postage and shipping	—	—	—	—
36	Occupancy	—	—	—	—
37	Equipment rental and maintenance	—	—	—	—
38	Printing and publications	342—	—	342	—
39	Travel	—	—	—	—
40	Conferences, conventions, and meetings	1062	—	1062	—
41	Interest	—	—	—	—
42	Depreciation, depletion, etc. (attach schedule)	—	—	—	—
43a	Other expenses not covered above (itemize): a <u>Camp</u>	13512.00	13512—	—	—
43b	b <u>Art 8575 Music 7600</u>	16175.00	16175—	—	—
43c	c <u>TEACH. REIM. 8769.58 Lib. 6890</u>	15659.58	15659.58	—	—
43d	d <u>Science 5198.56, Col. Rec. 2676.08</u>	7264.64	7264.64	—	—
43e	e <u>All Others</u>	10799.81	10799.81	—	—
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15.	68971.70	63411.03	556062	—

**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 those joint costs \$ \_\_\_\_\_, (ii) the amount allocated to Program services \$ \_\_\_\_\_, (iii) the amount allocated to Management and general \$ \_\_\_\_\_, and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_.

**Part III Statement of Program Service Accomplishments** (See page 25 of the instructions.)

What is the organization's primary exempt purpose? <u>SEE SCHEDULE IV</u>	Program Service Expenses (Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts, but optional for others.)
a <u>CAMP - TO PROVIDE INNER CITY CHILDREN THE OPPORTUNITY TO ATTEND 2 NIGHT SLAMP CAMP AND LEARN ABOUT NATURE WILD LIFE ETC</u> (Grants and allocations \$ _____)	13,512
b <u>ART/MUSIC PROGRAMS - TO TEACH CHILDREN ABOUT PERFORMING ARTS AND ENHANCE THEIR TALENTS &amp; OTHER LEARNING EXPENSES</u> (Grants and allocations \$ _____)	16,175 —
c <u>TEACHER'S REIMBURSEMENT - TO REFUND TEACHERS' FOR OUT OF POCKET EXPENSES FOR CLASSROOM SUPPLIES, SUCH AS PENICIL, PAPER, TAPE ETC</u> (Grants and allocations \$ _____)	8,769.58
d <u>LIBRARY - AIMED TO ASSIST THE CHILDREN BECOME BETTER READERS &amp; WRITING THROUGH BOOKS &amp; SMALL GROUP GATHERING</u> (Grants and allocations \$ _____)	6,890 —
e Other program services (attach schedule) <input checked="" type="checkbox"/> (Grants and allocations \$ _____)	18,064.45
<b>f Total of Program Service Expenses</b> (should equal line 44, column (B), Program services)	<b>63,411.03</b>

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

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year	(B) End of year
<b>Assets</b>	45 Cash—non-interest-bearing	15,657.69	17,657.84
	46 Savings and temporary cash investments	19,687.19	19,996.27
	47a Accounts receivable	—	—
	b Less: allowance for doubtful accounts	—	—
	48a Pledges receivable	—	—
	b Less: allowance for doubtful accounts	—	—
	49 Grants receivable	—	—
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)	—	—
	51a Other notes and loans receivable (attach schedule)	—	—
	b Less: allowance for doubtful accounts	—	—
	52 Inventories for sale or use	—	—
	53 Prepaid expenses and deferred charges	—	—
	54 Investments—securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV	—	—
	55a Investments—land, buildings, and equipment: basis	—	—
	b Less: accumulated depreciation (attach schedule)	—	—
56 Investments—other (attach schedule)	—	—	
57a Land, buildings, and equipment: basis	—	—	
b Less: accumulated depreciation (attach schedule)	—	—	
58 Other assets (describe _____)	—	—	
<b>59 Total assets (add lines 45 through 58) (must equal line 74)</b>	<b>35,344.88</b>	<b>37,654.11</b>	
<b>Liabilities</b>	60 Accounts payable and accrued expenses	—	—
	61 Grants payable	—	—
	62 Deferred revenue	—	—
	63 Loans from officers, directors, trustees, and key employees (attach schedule)	—	—
	64a Tax-exempt bond liabilities (attach schedule)	—	—
	b Mortgages and other notes payable (attach schedule)	—	—
	65 Other liabilities (describe _____)	—	—
<b>66 Total liabilities (add lines 60 through 65)</b>	<b>0-</b>	<b>0-</b>	
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.	—	—
	67 Unrestricted	—	—
	68 Temporarily restricted	—	—
	69 Permanently restricted	—	—
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.	35,344.88	37,654.11
	70 Capital stock, trust principal, or current funds	—	—
	71 Paid-in or capital surplus, or land, building, and equipment fund	—	—
	72 Retained earnings, endowment, accumulated income, or other funds	—	—
<b>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)</b>	<b>35,344.88</b>	<b>37,654.11</b>	
<b>74 Total liabilities and net assets / fund balances (add lines 66 and 73)</b>	<b>35,344.88</b>	<b>37,654.11</b>	

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



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

		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.		<input checked="" type="checkbox"/>
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.		
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		<input checked="" type="checkbox"/>
78b	If "Yes," has it filed a tax return on Form 990-T for this year?		<input checked="" type="checkbox"/>
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? If "Yes," enter the name of the organization and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		<input checked="" type="checkbox"/>
81a	Enter direct and indirect political expenditures. See line 81 instructions	81a	
81b	Did the organization file Form 1120-POL for this year?		<input checked="" type="checkbox"/>
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? 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.)	82a	<input checked="" type="checkbox"/>
82b		82b	
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	
83b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	
84a	Did the organization solicit any contributions or gifts that were not tax deductible? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84a	<input checked="" type="checkbox"/>
84b		84b	
85a	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	N/A
85b	b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85b	N/A
85c	c Dues, assessments, and similar amounts from members	85c	
85d	d Section 162(e) lobbying and political expenditures	85d	
85e	e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
85f	f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
85g	g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
85h	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?	85h	<input checked="" type="checkbox"/>
86a	86 501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a	
86b	b Gross receipts, included on line 12, for public use of club facilities	86b	
87a	87 501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a	
87b	b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	
88	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	<input checked="" type="checkbox"/>
89a	89a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911, section 4912, section 4955		
89b	b 501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	<input checked="" type="checkbox"/>
89c	c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
89d	d Enter: Amount of tax on line 89c, above, reimbursed by the organization		
90a	90a List the states with which a copy of this return is filed		
90b	b Number of employees employed in the pay period that includes March 12, 2004 (See instructions.)	90b	
91	91 The books are in care of Mr. Michael Pussan Telephone no. 212-387-0195 Located at 121 E. 3rd St. NY, NY ZIP + 4 10009-7322		
92	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	<input type="checkbox"/>

14-4033837

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

Note: Enter gross amounts unless otherwise indicated.

Table with 5 columns: (A) Business code, (B) Amount, (C) Exclusion code, (D) Amount, (E) Related or exempt function income. Rows include 93 Program service revenue, 94 Membership dues and assessments, 95 Interest on savings and temporary cash investments, 96 Dividends and interest from securities, 97 Net rental income or (loss) from real estate, 98 Net rental income or (loss) from personal property, 99 Other investment income, 100 Gain or (loss) from sales of assets other than inventory, 101 Net income or (loss) from special events, 102 Gross profit or (loss) from sales of inventory, 103 Other revenue, 104 Subtotal, 105 Total.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions.)

Table with 2 columns: Line No., Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).

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

Table with 5 columns: (A) Name, address, and EIN of corporation, partnership, or disregarded entity, (B) Percentage of ownership interest, (C) Nature of activities, (D) Total income, (E) End-of-year assets.

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?
(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?
Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

Please Sign Here: Under penalty 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: Nancy Montu... Date: 12/10/06
Type or print name and title: Nancy Montu... - TREASURER 917-533-1750

Paid Preparer's Use Only: Preparer's signature, Date, Check if self-employed, Preparer's SSN or PTIN (See Gen. Inst. W), EIN, Phone no.

**PTA of the Neighborhood School 13-4033837**

**Form 990, Part 1 – Direct Public Support**  
**(Not open to Public Inspection)**

All Contributors – Direct Public Support

\$39,585 07

**PTA of the Neighborhood School 13-4033837**

**Form 990, Part 1 – Interest on Savings**

Interest Income

\$309 08

---

PTA of the Neighborhood School 13-4033837

Form 990, Part 1 - Special Events and Activities

Description	Gross Revenue	Direct Expenses	Net Income
After School	0	1348.83	-1348.83
Donation Mailings	29930.74	111	29,820
Holiday Fair	18014.8	351.8	17663
Read-a-thon	3654	282.37	3371.63
Yearbook	1771	\$ 1,444.00	\$ 327.00
Total	53370.54	3538	49832.54

*Schedule III*

PTA of the Neighborhood School

13-4033837

Form 990, Part III - Organization's Primary Exempt Purpose

**To promote cooperation between parents and teachers and to raise funds  
to promote education and provide additional resources for both teachers and students.**

**Schedule IV**

## Form 990, Part III - Other Program Services

**Description**

Art	8575 00
Camp	13512.00
Music	7600.00
Teacher Reimbursement	8769 58
<b>Four Highest Programs</b>	<b>38456.58</b>
Amy Waldman Lecture Series	250.00
Check Book Charges	123 54
Conflict Resolution	2076 08
Enrich-Trips/Materials	1916 05
Graduation	551 61
Halloween	300.00
Library	6,890 00
MultiCultural Event	697.51
Town Meeting/Retreat	771.83
Science Program	5188 56
Staff Recognition	2085.00
All Other	4104.27
<b>Other Program Services</b>	<b>24954 45</b>
<b>Grand Total</b>	<b>63411 03</b>

Form 990, Part V – List of Officers, Trustees & Key Employees

Name & Address	Title & Time	Compensation	Contributions & Benefit	Expense Account
Elena Feliciano 219 E. 4 <sup>th</sup> St. NY, NY 10009	Co-President As Needed	None	None	None
Harvey Epstein 172 E. 4 <sup>th</sup> St. NY, NY 10009	Co-President As Needed	None	None	None
Nancy Montanez 742 E. 6 <sup>th</sup> St NY, NY 10009	Treasurer As Needed	None	None	None
Valerie Knox 131 Allen St NY, NY 10002	Fundraiser As Needed	None	None	None
Michelle Handelman 99 East 4 <sup>th</sup> St. NY, NY 10002	Secretary As Needed	None	None	None