

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)

2004

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 07/01/04 and ending 06/30/05

- 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
MARY CARIOLA CHILDRENS CENTER INC

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
1000 Elmwood Avenue

City or town, state or country, and ZIP + 4
Rochester, NY 14620

D Employer identification number
16 : 0771078

E Telephone number
(585) 271-2897

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? 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 Web site: ▶ **www.marycariola.org**

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

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

I Group Exemption Number ▶

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **23,418,073**

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.)

SCANNED DEC 01 2005 759

1 Contributions, gifts, grants, and similar amounts received:					
a Direct public support	1a	846,950			
b Indirect public support	1b	185,920			
c Government contributions (grants)	1c	263,906			
d Total (add lines 1a through 1c) (cash \$ 1,296,776 noncash \$ 0)	1d				1,296,776
2 Program service revenue including government fees and contracts (from Part VII, line 93)	2				18,208,896
3 Membership dues and assessments	3				0
4 Interest on savings and temporary cash investments	4				9,985
5 Dividends and interest from securities	5				90,191
6a Gross rents	6a	0			
6b Less: rental expenses	6b	0			
6c Net rental income or (loss) (subtract line 6b from line 6a)	6c				0
7 Other investment income (describe ▶)	7				0
8a Gross amount from sales of assets other than inventory	(A) Securities	3,765,281	8a	0	
b Less: cost or other basis and sales expenses		3,574,083	8b	0	
c Gain or (loss) (attach schedule) Stmt 1		191,198	8c	0	
d Net gain or (loss) (combine line 8c, columns (A) and (B))			8d		191,198
9 Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>					See Statement 2
a Gross revenue (not including \$ 61,452 of contributions reported on line 1a)	9a	35,991			
b Less: direct expenses other than fundraising expenses	9b	22,806			
c Net income or (loss) from special events (subtract line 9b from line 9a)	9c				13,185
10a Gross sales of inventory, less returns and allowances	10a	0			
b Less: cost of goods sold	10b	0			
c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c				0
11 Other revenue (from Part VII, line 103)	11				10,953
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12				19,821,184
13 Program services (from line 44, column (B))	13				17,547,176
14 Management and general (from line 44, column (C))	14				1,274,478
15 Fundraising (from line 44, column (D))	15				226,238
16 Payments to affiliates (attach schedule)	16				0
17 Total expenses (add lines 16 and 44, column (A))	17				19,047,892
18 Excess or (deficit) for the year (subtract line 17 from line 12)	18				773,292
19 Net assets or fund balances at beginning of year (from line 73, column (A))	19				8,390,919
20 Other changes in net assets or fund balances (attach explanation) Stmt 3	20				5,629
21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21				9,169,840

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 21 of the instructions)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)	0	0		
23	Specific assistance to individuals (schedule)	0	0		
24	Benefits paid to or for members (schedule)	0	0		
25	Compensation of officers, directors, etc.	367,359	165,071	202,288	0
26	Other salaries and wages	12,181,189	11,554,164	529,975	97,050
27	Pension plan contributions	588,553	543,644	40,208	4,701
28	Other employee benefits	1,458,496	1,399,882	53,737	4,877
29	Payroll taxes	922,885	860,363	53,100	9,422
30	Professional fundraising fees	0	0	0	0
31	Accounting fees	26,207	0	26,207	0
32	Legal fees	9,000	0	9,000	0
33	Supplies	346,606	343,317	0	3,289
34	Telephone	41,000	29,547	11,077	376
35	Postage and shipping	24,306	5,991	7,850	10,465
36	Occupancy	1,221,426	1,118,472	102,154	800
37	Equipment rental and maintenance	250,784	234,964	11,490	4,330
38	Printing and publications	0	0	0	0
39	Travel	25,257	24,086	489	682
40	Conferences, conventions, and meetings	13,292	2,811	3,008	7,473
41	Interest	41,423	14,006	27,417	0
42	Depreciation, depletion, etc. (schedule) Stmt 4	200,537	175,572	24,398	567
43	Other expenses not covered above (itemize): a	1,329,572	1,075,286	172,080	82,206
	b See Statement 5				
	c				
	d				
	e				
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15	19,047,892	17,547,176	1,274,478	226,238

Joint Costs. Check if you are following SOP 98-2.
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____; (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See page 24 of the instructions.)

What is the organization's primary exempt purpose? Provide educ & residence to dev dis children.	Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
a See Statement 6	
(Grants and allocations \$ _____)	
b	
(Grants and allocations \$ _____)	
c	
(Grants and allocations \$ _____)	
d	
(Grants and allocations \$ _____)	
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	17,547,176

Part IV Balance Sheets (See page 24 of the instructions.)

		(A) Beginning of year		(B) End of year	
Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.					
Assets	45	Cash- non-interest-bearing	241,689	45	511,592
	46	Savings and temporary cash investments	609,350	46	684,624
	47a	Accounts receivable	4,570,400		
	b	Less: allowance for doubtful accounts	0	47c	4,570,400
	48a	Pledges receivable	0		
	b	Less: allowance for doubtful accounts	0	48c	0
	49	Grants receivable	0	49	39,828
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)	0	50	0
	51a	Other notes and loans receivable (attach schedule).	0		
	b	Less: allowance for doubtful accounts	0	51c	0
	52	Inventories for sale or use	0	52	0
	53	Prepaid expenses and deferred charges	114,505	53	119,065
	54	Investments- securities (schedule) Stmt 7. <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	5,032,011	54	5,419,778
	55a	Investments- land, buildings, and equipment: basis	0		
b	Less: accumulated depreciation (attach schedule).	0	55c	0	
56	Investments- other (attach schedule)	0	56	0	
57a	Land, buildings, and equipment: basis	3,683,623			
b	Less: accumulated depreciation (attach schedule) Stmt 8	1,916,062	57c	1,767,561	
58	Other assets (describe ► See Statement 9)	57,164	58	120,777	
59	Total assets (add lines 45 through 58) (must equal line 74)	11,812,652	59	13,233,625	
Liabilities	60	Accounts payable and accrued expenses	1,340,953	60	2,150,608
	61	Grants payable	0	61	0
	62	Deferred revenue	0	62	0
	63	Loans from officers, directors, trustees, and key employees (attach schedule).	0	63	0
	64a	Tax-exempt bond liabilities (attach schedule)	0	64a	0
	b	Mortgages and other notes payable (attach schedule) Stmt 10	916,147	64b	1,152,028
	65	Other liabilities (describe ► See Statement 11)	1,164,633	65	761,149
66	Total liabilities (add lines 60 through 65)	3,421,733	66	4,063,785	
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	6,452,831	67	7,303,874
	68	Temporarily restricted	208,367	68	92,923
	69	Permanently restricted	1,729,721	69	1,773,043
	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).	8,390,919	73	9,169,840
	74	Total liabilities and net assets / fund balances (add lines 66 and 73)	11,812,652	74	13,233,625

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 27 of the instructions.)		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a description of each activity		✓
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.		✓
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		✓
78b	b If "Yes," has it filed a tax return on Form 990-T for this year?		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," 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?		✓
81a	b If "Yes," enter the name of the organization _____ and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt.		
81a	Enter direct or indirect political expenditures. See line 81 instructions	0	
81b	b Did the organization file Form 1120-POL for this year?		✓
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	✓	
82b	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.)	0	
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	✓	
83b	b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	✓	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		✓
84b	b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
85a	85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		
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.		
85c	c Dues, assessments, and similar amounts from members		
85d	d Section 162(e) lobbying and political expenditures		
85e	e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		
85f	f Taxable amount of lobbying and political expenditures (line 85d less 85e)		
85g	g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		
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?		
86a	86 501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12		
86b	b Gross receipts, included on line 12, for public use of club facilities		
87a	87 501(c)(12) orgs. Enter: a Gross income from members or shareholders	0	
87b	b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	0	
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		✓
89a	89a 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	0	
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.		✓
	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
90a	90a List the states with which a copy of this return is filed	NY	
90b	b Number of employees employed in the pay period that includes March 12, 2004 (See instructions.)	481	
91	91 The books are in care of Irene Magee Telephone no. () 585-271-2987 Located at 1000 Elmwood Avenue, Rochester, NY ZIP + 4 14620		
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

Part VII Analysis of Income-Producing Activities (See page 31 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) Exclusion code	(D) Amount	
93 Program service revenue:					
a Tuition					11,927,794
b IDEA contracts for service					1,322,858
c Waiver Case Management					258,533
d Private Pay and Prior Period Adjts					242,857
e Interdepartmental					64,999
f Medicare/Medicaid payments					4,391,855
g Fees and contracts from government agencies					
94 Membership dues and assessments					9,985
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	90,191	
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			18	191,198	
101 Net income or (loss) from special events					17,598
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a Miscellaneous					10,953
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0		281,389	18,247,432
105 Total (add line 104, columns (B), (D), and (E))					18,524,408

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 32 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).
▼	See Statement 15

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 32 of the instructions.)

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

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 33 of the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

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

Please Sign: Paul Scott Date: 11/9/05

Date	Check if self-	Preparer's SSN or PTIN (See Gen. Inst. W)
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SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

OMB No 1545-0047

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
MARY CARIOLA CHILDRENS CENTER INC

Employer identification number
16 : 0771078

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
Teresa Chapin 1000 Elmwood Avenue, Rochester, NY 14620, US	Teacher Coordinator 40	72,037	7,971	0
Laurie Goeggelman 1000 Elmwood Avenue, Rochester, NY 14620, US	Teacher Coordinator 40	70,007	7,894	0
James Riley 1000 Elmwood Avenue, Rochester, NY 14620, US	IT Manager 40	68,584	7,826	0
Bradley Schreiber 1000 Elmwood Avenue, Rochester, NY 14620, US	Agency Advmt Dir 40	65,620	3,337	0
Martha Lansberry 1000 Elmwood Avenue, Rochester, NY 14620, US	Educn Coordinator 40	63,255	6,978	0
Total number of other employees paid over \$50,000 ▶	21			

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 Yes No

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.) See Statement 16

2a Yes No

2b Yes No

2c Yes No

2d Yes No

2e Yes No

3a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)

3a Yes No

b Do you have a section 403(b) annuity plan for your employees?

3b Yes No

4a 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 Yes No

b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?

4b Yes No

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.)

Table with 2 columns: (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).	1,108,219	2,049,895	1,824,569	1,858,792	6,841,475
16 Membership fees received	0	0	0	0	0
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	16,557,352	15,235,943	14,562,212	14,000,103	60,355,610
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	98,779	109,908	123,182	144,705	476,574
19 Net income from unrelated business activities not included in line 18	0	0	0	0	0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	0	0	0	0	0
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.	0	0	0	0	0
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	11,768	10,145	15,068	36,599	73,580
23 Total of lines 15 through 22.	17,776,118	17,405,891	16,525,031	16,040,199	67,747,239
24 Line 23 minus line 17.	1,218,766	2,169,948	1,962,819	2,040,096	7,391,629
25 Enter 1% of line 23	177,761	174,059	165,250	160,402	

Stmnt 17

26 Organizations described on lines 10 or 11:	a Enter 2% of amount in column (e), line 24.	26a	147,833
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	82,915
c Total support for section 509(a)(1) test: Enter line 24, column (e)		26c	7,391,629
d Add. Amounts from column (e) for lines:	18 476,574 19 0	26d	633,069
	22 73,580 26b 82,915	26e	6,758,560
e Public support (line 26c minus line 26d total)		26f	91.44 %
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))			

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 pers on." 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 _____	27c	
	17 _____ 20 _____ 21 _____	27d	
d Add: Line 27a total _____ and line 27b total _____		27e	
e Public support (line 27c total minus line 27d total).		27f	
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e).		27g	%
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)).		27h	%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)).			

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.

Part V Private School Questionnaire (See page 7 of the instructions.) NOT APPLICABLE
 (To be completed ONLY by schools that checked the box on line 6 in Part IV)

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)		
32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?		
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d Copies of all material used by the organization or on its behalf to solicit contributions?		
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement)		
33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?		
b Admissions policies?		
c Employment of faculty or administrative staff?		
d Scholarships or other financial assistance?		
e Educational policies?		
f Use of facilities?		
g Athletic programs?		
h Other extracurricular activities?		
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement)		
34a Does the organization receive any financial aid or assistance from a governmental agency?		
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4.05 of Rev. Proc. 75-50, 1975-2 C B. 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.) (To be completed ONLY by an eligible organization that filed Form 5768) NOT APPLICABLE

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 table with columns for (a) Affiliated group totals and (b) To be completed for ALL electing organizations. Rows include Total lobbying expenditures, Total exempt purpose expenditures, and Lobbying nontaxable amount.

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 table with columns for 2004, 2003, 2002, 2001, and Total. Rows include Lobbying nontaxable amount, Lobbying ceiling amount, Total lobbying expenditures, Grassroots nontaxable amount, Grassroots ceiling amount, and Grassroots lobbying expenditures.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

Table for reporting lobbying activity with columns for Yes, No, and Amount. Rows list activities such as Volunteers, Paid staff or management, Media advertisements, Mailings to members, Publications, Grants to other organizations, Direct contact with legislators, and Rallies/demonstrations.

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 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?

a Transfers from the reporting organization to a noncharitable exempt organization of:

- (i) Cash
(ii) Other assets

Table with columns Yes, No and rows 51a(i), a(ii), b(i), b(ii), b(iii), b(iv), b(v), b(vi), c

b Other transactions:

- (i) Sales or exchanges of assets with a noncharitable exempt organization
(ii) Purchases of assets from a noncharitable exempt organization
(iii) Rental of facilities, equipment, or other assets
(iv) Reimbursement arrangements
(v) Loans or loan guarantees
(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

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:

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

52a 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:

Table with columns (a) Name of organization, (b) Type of organization, (c) Description of relationship



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MARY CARIOLA CHILDRENS CENTER INC
16-0771078

Sales of Assets Other than Inventory

Publicly Traded Securities

Description:

Sold To:

Sales Price: \$3,765,281.00

Date Sold:

Expense of Sale: \$0.00

Date acquired:

Cost or value when acquired: \$3,574,083.00

How acquired:

Depreciation since acquisition: \$0.00

Net Sale: \$191,198.00

Statement 2

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MARY CARIOLA CHILDRENS CENTER INC

16-0771078

Schedule of Special Events

Description	Gross Receipts	Contributions	Gross Revenue	Direct Costs	Net Income (Loss)
Womens Golf Tournament	\$69,335.00	\$47,356.00	\$21,979.00	\$8,771.00	\$13,208.00
Mens Golf Tournament	\$18,765.00	\$7,334.00	\$11,431.00	\$11,381.00	\$50.00
Card Party	\$7,520.00	\$4,939.00	\$2,581.00	\$2,654.00	-\$73.00
Garden Tour	\$1,823.00	\$1,823.00	\$0.00	\$0.00	\$0.00
Total:	\$97,443.00	\$61,452.00	\$35,991.00	\$22,806.00	\$13,185.00

Statement 3
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Question: 20

MARY CARIOLA CHILDRENS CENTER INC
16-0771078

Other changes in Net Assets or Fund Balances

Explanation	Amount
Additional Minimum Pension Liability	-\$2,315.00
Change in Value of Beneficial Interest in Perpetual Trust	\$1,855.00
Unrealized Gain on Investments	\$74,396.00
Pre-opening Costs of New Residence	-\$68,307.00
Total:	\$5,629.00

Statement 4

Form 990

Page: 2

Part II

Question 42

MARY CARIOLA CHILDRENS CENTER INC

16-0771078

Depreciation and Depletion

Asset	Current Deprec.
Equipment	\$65,576 00
Building/improv	\$80,805 00
Vehicles	\$54,156.00
Total	\$200,537.00

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Part II
Question: 43

MARY CARIOLA CHILDRENS CENTER INC
16-0771078

Attachment listing other expenses for Part II

Description	Total:	Pgm Services	Mgt and General	Fundraising
Facility Assessment	\$336,339.00	\$336,339.00	\$0.00	\$0.00
Office Expense	\$131,629.00	\$67,532.00	\$43,711.00	\$20,386.00
Professional Dues and Conferences	\$13,663.00	\$7,626.00	\$1,266.00	\$4,771.00
Purchase of Health Services	\$73,785.00	\$73,785.00	\$0.00	\$0.00
Other	\$85,201.00	\$42,896.00	\$15,161.00	\$27,144.00
Children's Activities	\$49,621.00	\$46,700.00	\$0.00	\$2,921.00
Clinic Supplies	\$19,021.00	\$18,997.00	\$0.00	\$24.00
Food	\$90,542.00	\$89,824.00	\$0.00	\$718.00
Insurance	\$82,336.00	\$74,940.00	\$7,396.00	\$0.00
Purchased Services	\$167,936.00	\$70,660.00	\$92,506.00	\$4,770.00
Recruitment	\$59,378.00	\$57,851.00	\$1,527.00	\$0.00
Staff development	\$39,151.00	\$25,320.00	\$1,613.00	\$12,218.00
Equipment	\$177,381.00	\$162,816.00	\$5,311.00	\$9,254.00
Rent--vehicles	\$3,589.00	\$0.00	\$3,589.00	\$0.00
Total:	\$1,329,572.00	\$1,075,286.00	\$172,080.00	\$82,206.00

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Part III

Question:

MARY CARIOLA CHILDRENS CENTER INC

16-0771078

Program Services

Achievement	Pgm. Svc. Exp.
Children & Youth Services: Preschool--Provides in-home and center-based services to developmentally disabled children from birth to five years old. (123 children)	\$2,148,609.00
Grants and Allocations:	\$0.00
Children & Youth Services: Medicaid Service Coordination Program--Coordinates the delivery of services to increase each child's individualization, independence, integration and productivity. (100 children)	\$254,611.00
Grants and Allocations:	\$0.00
Children & Youth Services: Evaluations--A screening program for high risk infants and children. (144 clients)	\$87,475.00
Grants and Allocations:	\$0.00
Children & Youth Services: School Age Education--Provides habilitative training for mentally retarded, multiply handicapped children in a classroom environment. (331 children)	\$10,670,164.00
Grants and Allocations:	\$0.00
Children & Youth Services: ICF/DD--Operates residential facilities for developmentally disabled children attempting to establish a family-like environment. (36 children)	\$4,231,196.00
Grants and Allocations:	\$0.00
Children & Youth Services: Clinic--Primarily designs, constructs, and repairs customized therapeutic seating/positioning equipment and other therapeutic equipment for the classrooms. (490 clients)	\$155,121.00
Grants and Allocations:	\$0.00
Total:	\$17,547,176.00

Statement 7

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Part: IV

Question: 54

MARY CARIOLA CHILDRENS CENTER INC

16-0771078

Investments - Securities

Security	Valuation Type	Amount
Equity mutual fund	FMV	\$327,394.00
Government securities	FMV	\$1,344,092.00
Cash and equivalents	FMV	\$130,034.00
Corporate bonds	FMV	\$639,580.00
Equity securities	FMV	\$2,978,678.00
Total:		\$5,419,778.00

Statement 8

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Part: IV

Question: 57

MARY CARIOLA CHILDRENS CENTER INC

16-0771078

Schedule of Land, Buildings and Equipment

Description	Cost	Depreciation	Book Value
Buildings and improvement	\$1,648,268.00	\$905,631.00	\$742,637.00
Construction in process	\$658,977.00	\$0.00	\$658,977.00
Land	\$103,513.00	\$0.00	\$103,513.00
Furniture	\$994,510.00	\$806,513.00	\$187,997.00
Vehicles	\$278,355.00	\$203,918.00	\$74,437.00
Total:	\$3,683,623.00	\$1,916,062.00	\$1,767,561.00

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MARY CARIOLA CHILDRENS CENTER INC
16-0771078

Other Assets

Asset Description	BOY Amount	EOY Amount
Beneficial interest in perpetual trust	\$57,164.00	\$59,019.00
Intangible pension asset	\$0.00	\$61,758.00
Total:	\$57,164.00	\$120,777.00

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Part: IV

Question: 64b

MARY CARIOLA CHILDRENS CENTER INC

16-0771078

Mortgages and Other Notes Payable

Type:	Non-Mortgage
Lender's Name:	JPMorgan Chase
Original Amount:	\$1,000,000.00
Balance Due:	\$233,333.00
Date of Note:	09/01/2001
Maturity Date:	08/01/2006
Repayment Terms:	\$16,667 per month
Interest Rate:	3.34
Security Provided by Borrower:	investments
Purpose of Loan:	term loan
Description of Consideration:	cash
FMV of Consideration:	\$1,000,000.00
Relationship:	none
Type:	Mortgage
Lender's Name:	
Original Amount:	\$811,150.00
Balance Due:	\$689,137.00
Date of Note:	
Maturity Date:	
Repayment Terms:	
Interest Rate:	
Security Provided by Borrower:	
Purpose of Loan:	
Description of Consideration:	
FMV of Consideration:	
Relationship:	
Type:	Non-Mortgage
Lender's Name:	NYS OMRDD
Original Amount:	\$709,311.00
Balance Due:	\$193,139.00
Date of Note:	08/15/1992
Maturity Date:	01/01/2010
Repayment Terms:	\$2,600 per month
Interest Rate:	7.34
Security Provided by Borrower:	monthly remittances
Purpose of Loan:	facilities improvements
Description of Consideration:	cash
FMV of Consideration:	\$709,311.00
Relationship:	none
Type:	Non-Mortgage
Lender's Name:	Chase Equipment Leasing
Original Amount:	\$35,745.00
Balance Due:	\$1,744.00
Date of Note:	09/01/2001
Maturity Date:	09/01/2005
Repayment Terms:	\$881 per month
Interest Rate:	8.5
Security Provided by Borrower:	related vehicle
Purpose of Loan:	finance vehicle purchase

Description of Consideration: cash
FMV of Consideration: \$35,745.00
Relationship: none

Type: Non-Mortgage
Lender's Name: JPMorgan Chase
Original Amount: \$75,654.00
Balance Due: \$34,675 00
Date of Note: 05/07/2003
Maturity Date: 05/01/2007
Repayment Terms: \$1,576 per month
Interest Rate: 5.75
Security Provided by Borrower: related vehicle
Purpose of Loan: finance vehicle purchase
Description of Consideration: cash
FMV of Consideration: \$75,654.00
Relationship: none

Total Due: \$1,152,028.00

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Part IV

Question: 65

MARY CARIOLA CHILDRENS CENTER INC**16-0771078****Other Liabilities**

Liability Description	BOY Amount	EOY Amount
Cash overdraft	\$66,126.00	\$193,569.00
Line of credit	\$1,000,000.00	\$405,000.00
Unemployment reserve	\$98,507.00	\$98,507.00
Minimum Pension Liability	\$0.00	\$64,073.00
Total:	\$1,164,633.00	\$761,149.00

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Part: IV-A

Question: b(4)

MARY CARIOLA CHILDRENS CENTER INC

16-0771078

Revenue Audit Line b(4)

Description	Amount
Change in value of beneficial interest in perpetual trust	\$1,855.00
Special Events expense	\$22,806.00
Total:	\$24,661.00

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Part: IV-B

Question: b(4)

MARY CARIOLA CHILDRENS CENTER INC

16-0771078

Expense Audit Line b(4)

Description	Amount
Fundraising expenses	\$22,806.00
Additional minimum pension expense	\$2,315.00
Preopening costs of new residence	\$68,307.00
Total:	\$93,428.00

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Part V

Question:

MARY CARIOLA CHILDRENS CENTER INC

16-0771078

Officers, Directors, Trustees, and Key Employees

Name and Address	Title	Hrs	Comp.	Benefits	Expenses
Paul C. Scott 1000 Elmwood Avenue Rochester, NY 14620 United States	President	40	\$113,802.00	\$10,707.00	\$9,257.00
Denise O'Brien-Miller 1000 Elmwood Avenue Rochester, NY 14620 United States	Director of Day Prog	40	\$103,149.00	\$10,504.00	\$0.00
Irene Magee 1000 Elmwood Avenue Rochester, NY 14620 United States	Dir of Financial Ser	40	\$88,486.00	\$9,600.00	\$0.00
Anna-Lynn Brink 1000 Elmwood Avenue Rochester, NY 14620 United States	Dir of Community Ser	40	\$61,922.00	\$8,117.00	\$0.00
Michael Osborn 1000 Elmwood Avenue Rochester, NY 14620 United States	Chairman	1	\$0.00	\$0.00	\$0.00
Ben Giambrone 1000 Elmwood Avenue Rochester, NY 14620 United States	Vice Chairman	1	\$0.00	\$0.00	\$0.00
John Nichols 1000 Elmwood Avenue Rochester, NY 14620 United States	Vice Chairman	1	\$0.00	\$0.00	\$0.00
Tom Strassenburgh 1000 Elmwood Avenue Rochester, NY 14620 United States	Vice Chairman	1	\$0.00	\$0.00	\$0.00
Edward Knauf 1000 Elmwood Avenue Rochester, NY 14620 United States	Treasurer	1	\$0.00	\$0.00	\$0.00
Diane Syta 1000 Elmwood Avenue	Assistant Treasurer	1	\$0.00	\$0.00	\$0.00

Name and Address	Title	Hrs	Comp.	Benefits	Expenses
Rochester, NY 14620 United States					
William Bachman 1000 Elmwood Avenue Rochester, NY 14620 United States	Secretary	1	\$0.00	\$0 00	\$0 00
Donald Booker 1000 Elmwood Avenue Rochester, NY 14620 United States	Board Member	1	\$0.00	\$0 00	\$0.00
Kathleen Buckley 1000 Elmwood Avenue Rochester, NY 14620 United States	Board Member	1	\$0.00	\$0 00	\$0.00
James DeVoe 1000 Elmwood Avenue Rochester, NY 14620 United States	Board Member	1	\$0 00	\$0 00	\$0 00
William Ely 1000 Elmwood Avenue Rochester, NY 14620 United States	Board Member	1	\$0 00	\$0 00	\$0 00
James Hammer 1000 Elmwood Avenue Rochester, NY 14620 United States	Board Member	1	\$0.00	\$0 00	\$0.00
Deborah Lattime 1000 Elmwood Avenue Rochester, NY 14620 United States	Board Member	1	\$0 00	\$0.00	\$0 00
Kate Lyon 1000 Elmwood Avenue Rochester, NY 14620 United States	Board Member	1	\$0.00	\$0.00	\$0.00
Dave McGeough 1000 Elmwood Avenue Rochester, NY 14620 United States	Board Member	1	\$0.00	\$0 00	\$0.00
Marlyn Means 1000 Elmwood Avenue Rochester, NY 14620 United States	Board Member	1	\$0 00	\$0.00	\$0 00
Lisa Norwood 1000 Elmwood Avenue	Board Member	1	\$0 00	\$0.00	\$0.00

Name and Address	Title	Hrs	Comp.	Benefits	Expenses
Rochester, NY 14620 United States					
Brian O'Sullivan 1000 Elmwood Avenue Rochester, NY 14620 United States	Board Member	1	\$0.00	\$0.00	\$0.00
Sally Quist 1000 Elmwood Avenue Rochester, NY 14620 United States	Board Member	1	\$0.00	\$0.00	\$0.00
Holly Salce 1000 Elmwood Avenue Rochester, NY 14620 United States	Board Member	1	\$0.00	\$0.00	\$0.00
Karl Salzer 1000 Elmwood Avenue Rochester, NY 14620 United States	Board Member	1	\$0.00	\$0.00	\$0.00
Robert Scarciotta 1000 Elmwood Avenue Rochester, NY 14620 United States	Board Member	1	\$0.00	\$0.00	\$0.00
Mark Siewert 1000 Elmwood Avenue Rochester, NY 14620 United States	Board Member	1	\$0.00	\$0.00	\$0.00
Sjoerd Stoffelsma 1000 Elmwood Avenue Rochester, NY 14620 United States	Board Member	1	\$0.00	\$0.00	\$0.00
Robert Vigdor 1000 Elmwood Avenue Rochester, NY 14620 United States	Board Member	1	\$0.00	\$0.00	\$0.00
Thomas Wolf 1000 Elmwood Avenue Rochester, NY 14620 United States	Board Member	1	\$0.00	\$0.00	\$0.00
Donna Fielding 1000 Elmwood Avenue Rochester, NY 14620 United States	Board Member	1	\$0.00	\$0.00	\$0.00
TOTALS			\$367,359.00	\$38,928.00	\$9,257.00

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Part: VIII

Question:

MARY CARIOLA CHILDRENS CENTER INC

16-0771078

Relationship of Activities

Line No	Relationship of Activities to the Accomplishment of Exempt Purposes
93 a	Education services are provided for physically and mentally handicapped children.
93 d	Provide education and residential facilities to developmentally disabled children.
93 c	Provide assistance to families in developing and carrying out a planned approach for accessing needed services for their child who has developmental disabilities.
93 e	Design and construct customized therapeutic seating/positioning equipment and other equipment
93 b	Provide education services for physically and mentally handicapped children; screening of high risk infants and children; and consultation services to their families.
93 f	Residential services are provided for children with developmental disabilities.
103 a	Provide for costs of education and residential services that exceed what is reimbursed from third parties.
95	Provide cost of education and residential services that exceed reimbursement available from third parties.
101	Provide for costs of education and residential services that exceed reimbursement available from third parties.

Transaction Explanations

Line	Explanation
2d	A board member is a partner in the law firm that serves as the Center's general counsel. The spouse of a key employee was paid for information technology consulting services
2c	The Center has hired a construction contracting firm, partially owned by a board member, for certain capital improvements. One board member is employed by a financial institution that the Center uses for general banking purposes. Two board members are employed by a local telecommunications company that provides communications services to the Center. A board member is vice president of a mailing services company that was utilized for a mailing during the reporting period.

Statement 17
Form: Schedule A
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Part: IV-A
Question: 22

MARY CARIOLA CHILDRENS CENTER INC
16-0771078

Other Income

Description	2003	2002	2001	2000
Miscellaneous	\$11,768.00	\$10,145.00	\$15,068.00	\$36,599.00
Total:	\$11,768.00	\$10,145.00	\$15,068.00	\$36,599.00