

Form **990-EZ**

Department of the Treasury
Internal Revenue Service

Short Form

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)

► For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year

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

OMB No 1545-1150

2005

Open to Public Inspection

A For the 2005 calendar year, or tax year beginning July 1, 2005, and ending June 30, 2006

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
PTA of the Neighborhood School
Number and street (or P O box, if mail is not delivered to street address) Room/suite
121 E. 3rd St. 102
City or town, state or country, and ZIP + 4
NY NY 10009

D Employer identification number
13-4033837
E Telephone number
(212) 387-0195
F Group Exemption Number . . . ▶

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

G Accounting method. Cash Accrual
Other (specify) ▶

I Website: ▶ N/A

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

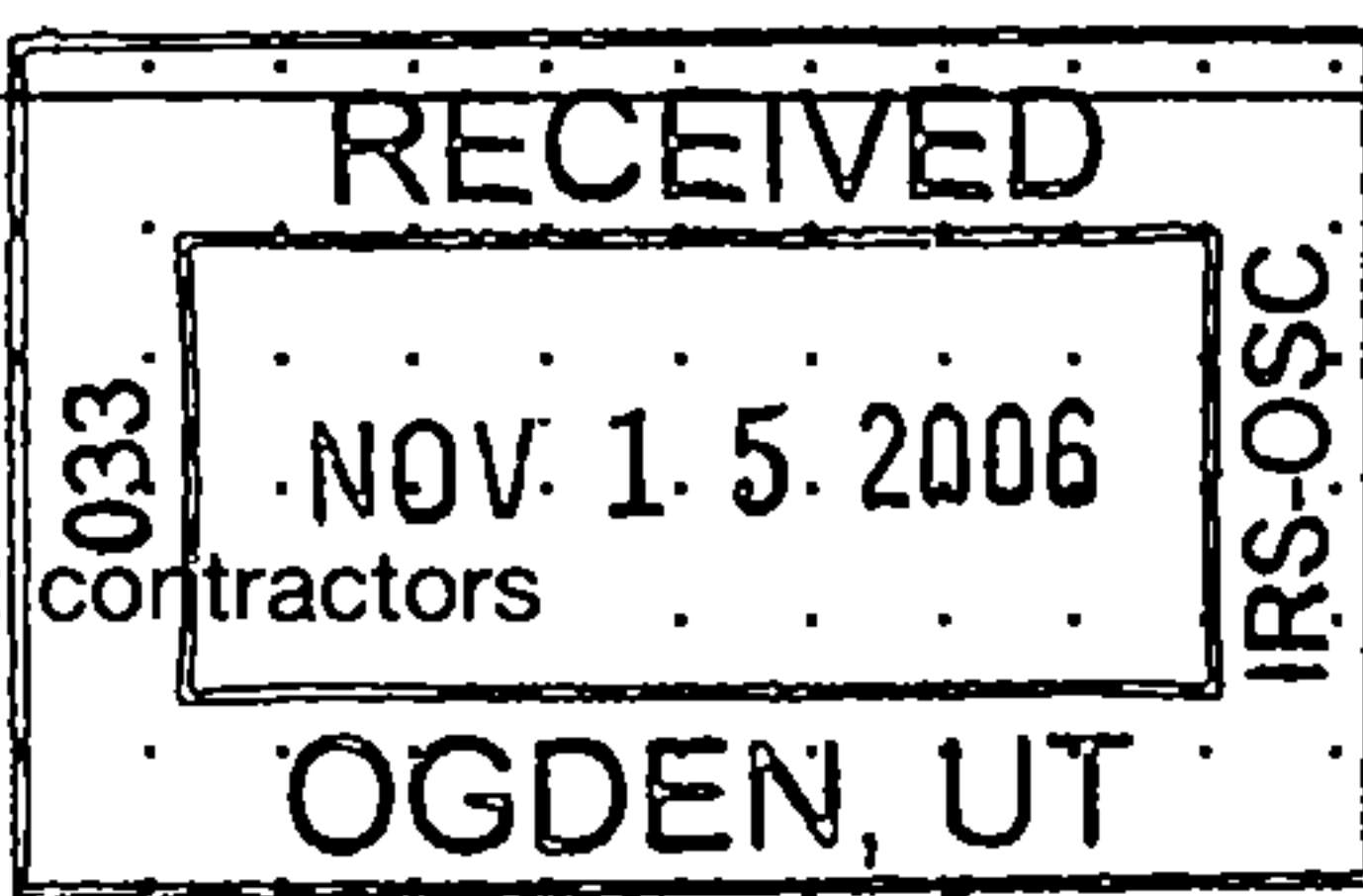
J Organization type (check only one) — 501(c) (3) (insert no) 4947(a)(1) or 527

K Check 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 chooses to file a return, be sure to file a complete return. Some states require a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$100,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 38 of the instructions.)

		1	2	3	4	5a	5b	5c	6a	6b	6c	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21								
Revenue	1	Contributions, gifts, grants, and similar amounts received														39932.																				
	2	Program service revenue including government fees and contracts														-0-																				
	3	Membership dues and assessments														-0-																				
	4	Investment income														608.																				
	5a	Gross amount from sale of assets other than inventory														N/A																				
	b	Less: cost or other basis and sales expenses														N/A																				
	5c	Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule).														-0-																				
	6	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>																																		
	a	Gross revenue (not including \$ <u>39932</u> of contributions reported on line 1)														31957																				
	b	Less: direct expenses other than fundraising expenses																																		
	6c	Net income or (loss) from special events and activities (line 6a less line 6b)														31957-																				
	7a	Gross sales of inventory, less returns and allowances														2012.76																				
	b	Less: cost of goods sold														1400-																				
	7c	Gross profit or (loss) from sales of inventory (line 7a less line 7b)														613-																				
	8	Other revenue (describe ▶)														-0-																				
	9	Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)														73110-																				
	Expenses	10	Grants and similar amounts paid (attach schedule)														0																			
11		Benefits paid to or for members														0																				
12		Salaries, other compensation, and employee benefits														0																				
13		Professional fees and other payments to independent contractors														0																				
14		Occupancy, rent, utilities, and maintenance														0																				
15		Printing, publications, postage, and shipping														225-																				
16		Other expenses (describe ▶ <u>Program, Office, Admin</u>)														97111-																				
17	Total expenses (add lines 10 through 16)														97336-																					
18	Excess or (deficit) for the year (line 9 less line 17)														(24226)																					
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)														37654-																					
20	Other changes in net assets or fund balances (attach explanation)														-0-																					
21	Net assets or fund balances at end of year (combine lines 18 through 20)														13428-																					



Part II Balance Sheets—If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ.

(See page 41 of the instructions.)

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	37654	13428-
23	Land and buildings	-	-
24	Other assets (describe ▶)	-	-
25	Total assets	37654	13428-
26	Total liabilities (describe ▶)	-	-
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	37654	13428-

Part III Statement of Program Service Accomplishments (See page 42 of the instructions.)

What is the organization's primary exempt purpose? Education, Child's Programs

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

		Expenses
		(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others.)
28	<u>Community Enrichment @ 250 families, workshops, Parade, Garden Up-Kamp Multi Cultural of TOWN, Mtg EVENTS</u>	13,592.
(Grants \$ <u>-0-</u>)	If this amount includes foreign grants, check here <input type="checkbox"/>	28a
29	<u>Parent Support - Monthly mtgs, child care, Office Supplies again 250 Families</u>	4255.
(Grants \$ <u>-0-</u>)	If this amount includes foreign grants, check here <input type="checkbox"/>	29a
30	<u>School Programming, Science & Art Program, TRIP & CAMPS FOR CHILDREN music Program For all STUDENTS, SUPPLIES</u>	78448.
(Grants \$ <u>12,716.00</u>)	If this amount includes foreign grants, check here <input type="checkbox"/>	30a
31	Other program services (attach schedule)	
(Grants \$)	If this amount includes foreign grants, check here <input type="checkbox"/>	31a
32	Total program service expenses (add lines 28a through 31a)	96295-

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See page 42 of the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
<u>Elana Falicano</u> <u>219 E. 4th St. #4A 10009</u>	<u>Co-Pres</u> <u>15 hrs</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>
<u>Harvey Epstein</u> <u>172 E. 4th St. #2F 10009</u>	<u>Co-Pres</u> <u>4 hrs</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>
<u>Nancy Montanez</u> <u>742 E. 6th St #6 10009</u>	<u>Treasurer</u> <u>6 hrs</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>
<u>Michelle Handalman</u> <u>99 E. 4th St. #6A 10009</u>	<u>Secretary</u> <u>4 hrs</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>

Part V Other Information (Note the attachment requirement in General Instruction V, page 14.)

	Yes	No
33 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"/>
34 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		<input checked="" type="checkbox"/>
35 If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?		<input checked="" type="checkbox"/>
b If "Yes," has it filed a tax return on Form 990-T for this year?		
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement.)		<input checked="" type="checkbox"/>
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. <u>37a</u> <u>N/A</u>		
b Did the organization file Form 1120-POL for this year?		<input checked="" type="checkbox"/>
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		<input checked="" type="checkbox"/>
b If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved	<u>38b</u>	
39 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9	<u>39a</u>	
b Gross receipts, included on line 9, for public use of club facilities	<u>39b</u>	
40a 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 <u> </u> ; section 4912 <u> </u> ; section 4955 <u> </u>		
b 501(c)(3) and (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 an explanation.	<u>40b</u>	<input checked="" type="checkbox"/>
c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		<u>-0-</u>
d Enter amount of tax on line 40c reimbursed by the organization		<u>-0-</u>

Part V Other Information (Note the attachment requirement in General Instruction V, page 14.) (Continued)

41 List the states with which a copy of this return is filed. ▶ Utah

42a The books are in care of ▶ Nancy Montanez Telephone no. ▶ (917) 533-1750
 Located at ▶ Neighborhood School 121 E. 3rd St ZIP + 4 ▶ 10009

b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?

	Yes	No
42b		<input checked="" type="checkbox"/>
42c		<input checked="" type="checkbox"/>

If "Yes," enter the name of the foreign country: ▶ _____
 See the instructions for exceptions and filing requirements for Form TD F 90-22.1.

c At any time during the calendar year, did the organization maintain an office outside of the U.S.?
 If "Yes," enter the name of the foreign country: ▶ _____

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here.
 and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43

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.

▶ Nancy Montanez Date 11/12/06
 Signature of officer

▶ Nancy Montanez Treasurer
 Type or print name and title.

Paid Preparer's Use Only

Preparer's signature ▶ Nancy Montanez Date 11/2/06 Check if self-employed Preparer's SSN or PTIN (See Gen. Inst. W) 206-48-8604

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ 742 E. 6th St #6 EIN ▶ _____
NY NY 10009 Phone no. ▶ (917) 533-1700

**Neighborhood School PTA
Special Events Activities Schedule**

Part 1 - #6

July 2005 through June 2006

Jui '05 - Jun 06

Fundraising Events

Avon	1,092.97
Bake Sales	753.00
Cherrydale Farms	2,276.79
Dance	727.30
Holiday Fair	
Auction	12,849.00
Books	415.00
Cafe	1,177.34
Rummage	1,967.00
Ticket Sales	1,920.10
Holiday Fair - Other	2,788.62
Total Holiday Fair	<u>21,117.06</u>
Movie Benefit	880.00
Read-a-thon	3,890.00
School Pictures	1,219.85
Total Fundraising Events	<u>31,956.97</u>

Shelter and Food for the Homeless/ Trinity Food Pantry

SCRAPE

Client Name	Address	Signature	Adults	Kids	Sen	Nov
Javier, Lucila	70 Baruch Dr		2	4		
Jenkins, Eloise	650 Water St.		1			
Jenkuns, Emily	290 East 4th Street		1			
Jett, Jeff	651 W 188TH St.		1			
Jiang, Shao Xu	251 E. 3RD St.		1			
Jianyi, Tan	90 Columbia St		1			
Jimenez, Mirella	410 Grand St		4	4		
Jin, Li						
Jinrong, Zhao	20 Ave D		1			
Johnson, Deborah	410 Grand St		4	4		
Johnson, Deborah	950 E. 4th Walk		2	3		
Johnson, Debra	100 Pitt St		2			
Johnson, Douglas	201 East 33rd St		1			
Johnson, Dweight	552 186th St.		1			
Johnson, Goldman	67 Clinton Street		1			
Johnson, Iola	950 East 4th Street		1			
Johnson, John	760 Montgoe Ave.		2			
Johnson, Josephine	40 Ann St.		1		1	
Johnson, Kevin	142 Baruch Pl		2		2	
Johnson, Nathaniel	166 Norfolk		1			
Johnson, Paulette	950 East 4th St #9F		4			
Johnson, Rosita	765 FDR Dr		1	1		
Johnson, Tyrone	54-64 Rutgers		2	5		
Jones, Alfred	621 Water St.		1			
Jones, David	286 South St		1		1	
Jones, Deborah	347 E. 10th St		1	1		
Jones, Marcus	105 W. 17th St. #2B		1		1	
Jones, Marie	308 Delancey St		1			
Jones, Mia Henderson	60 Ave. D		1	4		
Jones, Njena	347 E. 10th St		2	1		
Jones, Robbin	130 Baruch Pl #a21		1			
Jordan, Kevin	304 W. 147th St #20		1			
Juanna, Moy Moy	109 Mott St.		1			
Julian, Lucretia	843 13TH St		1			
Kam, Poon Oi	114-59 Dalian Court		1			
Kanako, Kimura	2144 Bronx		1			
Kaplan, Raisa	174 Avenue A		2			
Karim, Nasima	920 E. 6th #11B		1			
Katsnelson, Giler	1517 Willet St		1			
Ke, Gee Yuk	180 Mott St.		1			
Keitt, Angelo	95 Baruch Dr		1			
Kennel, Renee	55 Rutgers Street		1			
Kercado, Jose	61 E. 97th St.		1			
Kern, Mary	14 Stuyvesant Oval				2	
Kerry, Iran	70 Baruch Dr.		2			
Keung, Heung Y	80 Pitt Street		1			
Khadrifa, Runcie	347 E. 10th St.		1	3		
King, James	601 E. 12th St.		1			
King, Joan	201 2nd Ave		1			
Kins, Rosetta	1141 FDR Dr #7E		1			