See a Social Security Number? Say Something!
Report Privacy Problems to https://public.resource.org/privacy
Or call the IRS Identity Theft Hotline at 1-800-908-4490
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)

A. For the 2003 calendar year, or tax year beginning OCT 1, 2003 and ending SEP 30, 2004

B. Check if applicable

C. Name of organization

STONENWALL COMMUNITY FOUNDATION

D. Employer identification number

13-3550688

E. Telephone number

212-367-1155

F. Accounting method

X Accrual

G. Website: N/A

H. and I are not applicable to section 527 organizations.

I. 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.

J. Organization type (check only one) [ ] 501(c) 3

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 □

2,357,824

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

1. Contributions, gifts, grants, and similar amounts received

a. Direct public support

b. Indirect public support

c. Government contributions (grants)

d. Total (add lines 1a through 1c) (cash $1,247,312; noncash $0)

1d. 1,247,312

2. Program service revenue including government fees and contracts (from Part VII, line 93)

3. Membership dues and assessments

4. Interest on savings and temporary cash investments

5. Dividends and interest from securities

6. Gross rents

6a. 1,247,312

6b. 1,247,312

6c. 1,247,312

7. Other investment income (describe □)

8. Gross amount from sales of assets other than inventory

8a. (A) Securities

8b. (B) Other

8c. 5,829

STMT 1

8d. 5,829

9. Special events and activities (attach schedule). If any amount is from gaming, check here □

9a. 1,085,561

9b. 1,079,732

9c. 5,829

S

10. Gross sales of inventory, less returns and allowances

10a. 1,085,561

10b. 1,079,732

10c. 5,829

11. Other revenue (from Part VII, line 103)

11a. 4,560

11b. 1,278,092

11c. 1,010,823

11d. 66,019

11e. 313,038

11f. 13,889,880

18. Excess or (deficit) for the year (subtract line 17 from line 12)

18a. <111,788

18b. 1,121,629

19. Net assets or fund balances at beginning of year (from line 73, column (A))

19a. 39,173

19b. 1,049,014

20. Other changes in net assets or fund balances (attach explanation)

21. Net assets or fund balances at end of year (combine lines 18, 19, and 20)

SEE STATEMENT 2

RECEIVED

AUG 2 4 2005

OGDEN, UT

Form 990 (2003)

12-17-03

LHA

For Paperwork Reduction Act Notice, see the separate instructions.

15190805 135009 4435

2003.09000 STONENWALL COMMUNITY FOUNDATION 4435__1
### Part II: Statement of Functional Expenses

<table>
<thead>
<tr>
<th>Item</th>
<th>(A) Total</th>
<th>(B) Program services</th>
<th>(C) Management and general</th>
<th>(D) Fundraising</th>
</tr>
</thead>
<tbody>
<tr>
<td>22. Grants and allocations (attach schedule)</td>
<td>919,277.</td>
<td>919,277.</td>
<td>STATEMENT 5</td>
<td></td>
</tr>
<tr>
<td>23. Specific assistance to individuals (attach schedule)</td>
<td>86,913.</td>
<td>34,765.</td>
<td>21,728.</td>
<td>30,420.</td>
</tr>
<tr>
<td>24. Benefits paid to or for members (attach schedule)</td>
<td>100,239.</td>
<td>20,351.</td>
<td>18,884.</td>
<td>61,004.</td>
</tr>
<tr>
<td>25. Compensation of officers, directors, etc</td>
<td>6,000.</td>
<td>1,767.</td>
<td>1,302.</td>
<td>2,931.</td>
</tr>
<tr>
<td>26. Other salaries and wages</td>
<td>3,466.</td>
<td>1,021.</td>
<td>752.</td>
<td>1,693.</td>
</tr>
<tr>
<td>27. Pension plan contributions</td>
<td>1,793.</td>
<td>1,793.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>32. Legal fees</td>
<td>3,838.</td>
<td>2,303.</td>
<td>1,535.</td>
<td></td>
</tr>
<tr>
<td>34. Telephone</td>
<td>1,793.</td>
<td>1,793.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>35. Postage and shipping</td>
<td>1,793.</td>
<td>1,793.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>36. Occupancy</td>
<td>1,793.</td>
<td>1,793.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>37. Equipment rental and maintenance</td>
<td>1,793.</td>
<td>1,793.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>38. Printing and publications</td>
<td>1,793.</td>
<td>1,793.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>39. Travel</td>
<td>1,793.</td>
<td>1,793.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>40. Conferences, conventions, and meetings</td>
<td>1,793.</td>
<td>1,793.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>41. Interest</td>
<td>1,793.</td>
<td>1,793.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>42. Depreciation, depletion, etc (attach schedule)</td>
<td>1,793.</td>
<td>1,793.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>43. Other expenses not covered above (attach)</td>
<td>1,793.</td>
<td>1,793.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>1,793.</td>
<td>1,793.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>1,793.</td>
<td>1,793.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>1,793.</td>
<td>1,793.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>1,793.</td>
<td>1,793.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>1,793.</td>
<td>1,793.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>1,793.</td>
<td>1,793.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total functional expenses (add lines 22 through 43):**

<table>
<thead>
<tr>
<th>Line 44</th>
<th>(A) Total</th>
<th>(B) Program services</th>
<th>(C) Management and general</th>
<th>(D) Fundraising</th>
</tr>
</thead>
<tbody>
<tr>
<td>44. Total functional expenses</td>
<td>1,389,880.</td>
<td>1,010,823.</td>
<td>66,019.</td>
<td>313,038.</td>
</tr>
</tbody>
</table>

**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 [x] No □

If "Yes," enter (i) the aggregate amount of these joint costs $919,277.; (ii) the amount allocated to Program services $919,277.; (iii) the amount allocated to Management and general $1,010,823.; and (iv) the amount allocated to Fundraising $66,019.

### Part III: Statement of Program Service Accomplishments

**DEVELOPING PHILANTHROPY WITHIN THE LESBIAN AND GAY COMMUNITY.

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 other organizations.)

<table>
<thead>
<tr>
<th>a</th>
<th>SEE STATEMENT 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>b</td>
<td>(Grants and allocations $919,277.)</td>
</tr>
<tr>
<td>c</td>
<td>1,010,823.</td>
</tr>
<tr>
<td>d</td>
<td>(Grants and allocations $919,277.)</td>
</tr>
</tbody>
</table>
| e | Other program services (attach schedule)

(Grants and allocations $)

<table>
<thead>
<tr>
<th>f</th>
<th>Total of Program Service Expenses (should equal line 44, column (B), Program services)</th>
</tr>
</thead>
<tbody>
<tr>
<td>44</td>
<td>$1,010,823.</td>
</tr>
<tr>
<td>Assets</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td><strong>Note:</strong> Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.</td>
<td></td>
</tr>
<tr>
<td><strong>Part IV Balance Sheets</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(A)</td>
</tr>
<tr>
<td></td>
<td>Beginning of year</td>
</tr>
<tr>
<td>45</td>
<td>Cash - non-interest-bearing</td>
</tr>
<tr>
<td>46</td>
<td>Savings and temporary cash investments</td>
</tr>
<tr>
<td>47 a</td>
<td>Accounts receivable</td>
</tr>
<tr>
<td>b</td>
<td>Less: allowance for doubtful accounts</td>
</tr>
<tr>
<td>48 a</td>
<td>Pledges receivable</td>
</tr>
<tr>
<td>b</td>
<td>Less: allowance for doubtful accounts</td>
</tr>
<tr>
<td>49</td>
<td>Grants receivable</td>
</tr>
<tr>
<td>50</td>
<td>Receivables from officers, directors, trustees, and key employees</td>
</tr>
<tr>
<td>51 a</td>
<td>Other notes and loans receivable</td>
</tr>
<tr>
<td>b</td>
<td>Less: allowance for doubtful accounts</td>
</tr>
<tr>
<td>52</td>
<td>Inventories for sale or use</td>
</tr>
<tr>
<td>53</td>
<td>Prepaid expenses and deferred charges</td>
</tr>
<tr>
<td>54</td>
<td>Investments - securities STMT 6</td>
</tr>
<tr>
<td>55 a</td>
<td>Investments - land, buildings, and equipment basis</td>
</tr>
<tr>
<td>b</td>
<td>Less: accumulated depreciation</td>
</tr>
<tr>
<td>56</td>
<td>Investments - other</td>
</tr>
<tr>
<td>57 a</td>
<td>Land, buildings, and equipment basis</td>
</tr>
<tr>
<td>b</td>
<td>Less: accumulated depreciation</td>
</tr>
<tr>
<td>58</td>
<td>Other assets (describe)</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>59</td>
<td>Total assets (add lines 45 through 58) (must equal line 74)</td>
</tr>
<tr>
<td>60</td>
<td>Accounts payable and accrued expenses</td>
</tr>
<tr>
<td>61</td>
<td>Grants payable</td>
</tr>
<tr>
<td>62</td>
<td>Deferred revenue</td>
</tr>
<tr>
<td>63</td>
<td>Loans from officers, directors, trustees, and key employees</td>
</tr>
<tr>
<td>64 a</td>
<td>Tax-exempt bond liabilities</td>
</tr>
<tr>
<td>b</td>
<td>Mortgages and other notes payable</td>
</tr>
<tr>
<td>65</td>
<td>Other liabilities (describe)</td>
</tr>
<tr>
<td>66</td>
<td>Total liabilities (add lines 60 through 65)</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Organizations that follow SFAS 117, check here □ and complete lines 67 through 69 and lines 73 and 74.</td>
<td></td>
</tr>
<tr>
<td>67</td>
<td>Unrestricted</td>
</tr>
<tr>
<td>68</td>
<td>Temporarily restricted</td>
</tr>
<tr>
<td>69</td>
<td>Permanently restricted</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Organizations that do not follow SFAS 117, check here □ and complete lines 70 through 74.</td>
<td></td>
</tr>
<tr>
<td>70</td>
<td>Capital stock, trust principal, or current funds</td>
</tr>
<tr>
<td>71</td>
<td>Paid-in or capital surplus, or land, building, and equipment fund</td>
</tr>
<tr>
<td>72</td>
<td>Retained earnings, endowment, accumulated income, or other funds</td>
</tr>
<tr>
<td>73</td>
<td>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)</td>
</tr>
<tr>
<td>74</td>
<td>Total liabilities and net assets (add lines 66 and 73)</td>
</tr>
</tbody>
</table>

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>Total revenue, gains, and other support per audited financial statements</td>
</tr>
<tr>
<td>b</td>
<td>Amounts included on line a but not on line 12, Form 990</td>
</tr>
<tr>
<td>(1)</td>
<td>Net unrealized gains on investments</td>
</tr>
<tr>
<td>(2)</td>
<td>Donated services and use of facilities</td>
</tr>
<tr>
<td>(3)</td>
<td>Recoveries of prior year grants</td>
</tr>
<tr>
<td>(4)</td>
<td>Other (specify)</td>
</tr>
</tbody>
</table>

Add amounts on lines (1) through (4) = $39,173

Line a minus line b = $1,278,092

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>Total expenses and losses per audited financial statements</td>
</tr>
<tr>
<td>b</td>
<td>Amounts included on line a but not on line 17, Form 990</td>
</tr>
<tr>
<td>(1)</td>
<td>Donated services and use of facilities</td>
</tr>
<tr>
<td>(2)</td>
<td>Prior year adjustments reported on line 20, Form 990</td>
</tr>
<tr>
<td>(3)</td>
<td>Losses reported on line 20, Form 990</td>
</tr>
<tr>
<td>(4)</td>
<td>Other (specify)</td>
</tr>
</tbody>
</table>

Add amounts on lines (1) through (4) = 0

Line a minus line b = $1,389,880

### Part V  List of Officers, Directors, Trustees, and Key Employees

<table>
<thead>
<tr>
<th>Name and address</th>
<th>Title and average hours per week devoted to position</th>
<th>Compensation if not paid enter “-“</th>
<th>Contributions to employee benefit plans and deferred compensation</th>
<th>Expense account and other allowances</th>
</tr>
</thead>
<tbody>
<tr>
<td>BILL MATTLE 150 EAST 37TH STREET, #6D NEW YORK, NY 10016</td>
<td>EXECUTIVE DIRECTOR</td>
<td>40</td>
<td>86,913</td>
<td>0</td>
</tr>
<tr>
<td>BRADLEY R. CARLSON 345 WEST 13TH STREET, #6B NEW YORK, NY 10014</td>
<td>PRESIDENT</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>MICHAEL GREENBERG 241 WEST 23RD STREET, #4B NEW YORK, NY 10001</td>
<td>TRESURER</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>JAYSON JARUSHEWSKY 65 NASSAU STREET, #6C NEW YORK, NY 10038</td>
<td>VICE PRESIDENT</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>LAURIE LINTON 211 EAST 53RD STREET, #11H NEW YORK, NY 10022</td>
<td>VICE PRESIDENT</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>DAVID SHEVLIN 51 5TH AVENUE, #3A NEW YORK, NY 10003</td>
<td>SECRETARY</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

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

329001 12-17-03

15190805 135009 4435 2003.09000 STONEWALL COMMUNITY FOUNDAT 4435 1
Form 990 (2003)  

STONEWALL COMMUNITY FOUNDATION 13-3550688 Page 5

<table>
<thead>
<tr>
<th>Part VI</th>
<th>Other Information</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>76</td>
<td>Did the organization engage in any activity not previously reported to the IRS? If &quot;Yes,&quot; attach a detailed description of each activity</td>
<td>76</td>
<td>X</td>
</tr>
<tr>
<td>77</td>
<td>Were any changes made in the organizing or governing documents but not reported to the IRS?</td>
<td>77</td>
<td>X</td>
</tr>
<tr>
<td>78a</td>
<td>Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?</td>
<td>78a</td>
<td>X</td>
</tr>
<tr>
<td>78b</td>
<td>If &quot;Yes,&quot; has it filed a tax return on Form 990-T for this year?</td>
<td>78b</td>
<td>N/A</td>
</tr>
<tr>
<td>79</td>
<td>Was there a liquidation, dissolution, termination, or substantial contraction during the year?</td>
<td>79</td>
<td>X</td>
</tr>
<tr>
<td>79a</td>
<td>If &quot;Yes,&quot; attach a statement</td>
<td></td>
<td></td>
</tr>
<tr>
<td>80a</td>
<td>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?</td>
<td>80a</td>
<td>X</td>
</tr>
<tr>
<td>81a</td>
<td>Enter direct or indirect political expenditures. See line 81 instructions and check whether it is</td>
<td>81a</td>
<td>Exempt or Nonexempt</td>
</tr>
<tr>
<td>81b</td>
<td>If &quot;Yes,&quot; enter the name of the organization</td>
<td></td>
<td></td>
</tr>
<tr>
<td>82a</td>
<td>Did the organization file Form 1120-POL for this year?</td>
<td>82a</td>
<td>X</td>
</tr>
<tr>
<td>82b</td>
<td>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?</td>
<td>82b</td>
<td>N/A</td>
</tr>
<tr>
<td>83a</td>
<td>Did the organization comply with the public inspection requirements for returns and exemption applications?</td>
<td>83a</td>
<td>X</td>
</tr>
<tr>
<td>83b</td>
<td>Did the organization comply with the disclosure requirements relating to quad pro quo contributions?</td>
<td>83b</td>
<td>X</td>
</tr>
<tr>
<td>84a</td>
<td>Did the organization solicit any contributions or gifts that were not tax deductible?</td>
<td>84a</td>
<td>X</td>
</tr>
<tr>
<td>85</td>
<td>Section 162(e) lobbying and political expenditures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>85a</td>
<td>Did the organization make only in-house lobbying expenditures of $2,000 or less?</td>
<td>85a</td>
<td>N/A</td>
</tr>
<tr>
<td>85b</td>
<td>If &quot;Yes,&quot; was the amount of contributions or gifts not tax deductible?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>85c</td>
<td>Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</td>
<td>85c</td>
<td>N/A</td>
</tr>
<tr>
<td>85d</td>
<td>Dues, assessments, and similar amounts from members</td>
<td></td>
<td></td>
</tr>
<tr>
<td>85e</td>
<td>Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices</td>
<td></td>
<td></td>
</tr>
<tr>
<td>85f</td>
<td>Taxable amount of lobbying and political expenditures (line 85d less 85e)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>85g</td>
<td>Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>85h</td>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>86</td>
<td>Section 501(c) organizations. Enter 0.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>86a</td>
<td>Gross receipts, included on line 12, for public use of club facilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>86b</td>
<td>Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>87</td>
<td>Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>88</td>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>89a</td>
<td>Section 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under section 4911; section 4912; section 4913; section 4955;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>89b</td>
<td>Section 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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>90a</td>
<td>List the states with which a copy of this return is filed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>90b</td>
<td>Number of employees employed in the pay period that includes March 12, 2003</td>
<td></td>
<td></td>
</tr>
<tr>
<td>91</td>
<td>The books are in care of STONEWALL COMMUNITY FOUNDATION Telephone no 212-367-1155</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Located at 119 WEST 24TH STREET, NEW YORK, NY ZIP + 4 10011

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.
## Part VII  Analysis of Income-Producing Activities

(See page 33 of the instructions.)

<table>
<thead>
<tr>
<th>A. Business code</th>
<th>B. Amount</th>
<th>C. Exclusion code</th>
<th>D. Amount</th>
<th>E. Related or exempt function income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program service revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medicare/Medicaid payments</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fees and contracts from government agencies</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Membership dues and assessments</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interest on savings and temporary cash investments</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dividends and interest from securities</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net rental income or (loss) from real estate:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Debt-financed property</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Not debt-financed property</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net rental income or (loss) from personal property</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other investment income</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gain or (loss) from sales of assets</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other than inventory</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other revenues:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. OTHER SUPPORT</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Subtotal (add columns B, D, and E)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total (add line 104, columns B, D, and E)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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)

## Part IX  Information Regarding Taxable Subsidiaries and Disregarded Entities

(See page 34 of the instructions.)

<table>
<thead>
<tr>
<th>Name, address, and EIN of corporation, partnership, or disregarded entity</th>
<th>Percentage of ownership interest</th>
<th>Nature of activities</th>
<th>Total income</th>
<th>End-of-year assets</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## 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 8926 and Form 4720 (see instructions).

Please sign and date here:

Name, title, and complete description of preparer (other than officer) is based on all information of which preparer has knowledge.

Preparer's signature: [Name]

Preparer's date: 8/15/05

Preparer's SSN or PTIN: 103-24-9876

Preparer's phone number: (212) 793-3530

Firm's name (or yours if self-employed), address, and ZIP + 4:

FRUCHTER, ROSEN & COMPANY, P.C. 156 WEST 56TH STREET, SUITE 1902 NEW YORK, NY 10019
<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>STONEWALL COMMUNITY FOUNDATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employer identification number</td>
<td>13 3550688</td>
</tr>
</tbody>
</table>

**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").

<table>
<thead>
<tr>
<th>(a) Name and address of each employee paid more than $50,000</th>
<th>(b) Titles and average hours per week devoted to position</th>
<th>(c) Compensation</th>
<th>(d) Contributions to employee benefit plans &amp; deferred compensation</th>
<th>(e) Expense account and other allowances</th>
</tr>
</thead>
<tbody>
<tr>
<td>NONE</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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").

<table>
<thead>
<tr>
<th>(a) Name and address of each independent contractor paid more than $50,000</th>
<th>(b) Type of service</th>
<th>(c) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>NONE</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total number of others receiving over $50,000 for professional services: **0**
**Part III** Statements About Activities  

<table>
<thead>
<tr>
<th>Activity Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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 &quot;Yes,&quot; enter the total expenses paid or incurred in connection with the lobbying activities.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking &quot;Yes&quot; must complete Part VI-B AND attach a detailed description of the lobbying activities.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; attach a detailed statement explaining the transactions.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Sale, exchange, or leasing of property?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b. Lending of money or other extension of credit?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>c. Furnishing of goods, services, or facilities?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>d. Payment of compensation (or payment or reimbursement of expenses if more than $1,000)?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>e. Transfer of any part of its income or assets?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>3. Do you make grants for scholarships, fellowships, student loans, etc.? (If &quot;Yes,&quot; attach an explanation of how you determine that recipients qualify to receive payments.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

**Part IV** Reason for Non-Private Foundation Status  

The organization is not a private foundation because it is (Please check only ONE applicable box.)

<table>
<thead>
<tr>
<th>Option</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>5. A church, convention of churches, or association of churches Section 170(b)(1)(A)(i).</td>
<td></td>
</tr>
<tr>
<td>6. A school Section 170(b)(1)(A)(ii) (Also complete Part V.)</td>
<td></td>
</tr>
<tr>
<td>7. A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii)</td>
<td></td>
</tr>
<tr>
<td>8. A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(iv).</td>
<td></td>
</tr>
<tr>
<td>9. A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(v). Enter the hospital's name, city, and state.</td>
<td></td>
</tr>
<tr>
<td>10. An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(v). (Also complete the Support Schedule in Part IV-A.)</td>
<td></td>
</tr>
<tr>
<td>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.)</td>
<td></td>
</tr>
<tr>
<td>11b. A community trust Section 170(b)(1)(A)(vii). (Also complete the Support Schedule in Part IV-A.)</td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>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)).</td>
<td></td>
</tr>
</tbody>
</table>

Provide the following information about the supported organizations (See page 5 of the instructions.)

<table>
<thead>
<tr>
<th>(a) Name(s) of supported organization(s)</th>
<th>(b) Line number from above</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Part IV** Reason for Non-Private Foundation Status  

The organization is not a private foundation because it is (Please check only ONE applicable box.)

<table>
<thead>
<tr>
<th>Option</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>5. A church, convention of churches, or association of churches Section 170(b)(1)(A)(i).</td>
<td></td>
</tr>
<tr>
<td>6. A school Section 170(b)(1)(A)(ii) (Also complete Part V.)</td>
<td></td>
</tr>
<tr>
<td>7. A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii)</td>
<td></td>
</tr>
<tr>
<td>8. A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(iv).</td>
<td></td>
</tr>
<tr>
<td>9. A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(v). Enter the hospital's name, city, and state.</td>
<td></td>
</tr>
<tr>
<td>10. An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(v). (Also complete the Support Schedule in Part IV-A.)</td>
<td></td>
</tr>
<tr>
<td>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.)</td>
<td></td>
</tr>
<tr>
<td>11b. A community trust Section 170(b)(1)(A)(vii). (Also complete the Support Schedule in Part IV-A.)</td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>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)).</td>
<td></td>
</tr>
</tbody>
</table>

Provide the following information about the supported organizations (See page 5 of the instructions.)

<table>
<thead>
<tr>
<th>(a) Name(s) of supported organization(s)</th>
<th>(b) Line number from above</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

14. An organization organized and operated to test for public safety Section 509(a)(4). (See page 6 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.

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)

<table>
<thead>
<tr>
<th></th>
<th>(a) 2002</th>
<th>(b) 2001</th>
<th>(c) 2000</th>
<th>(d) 1999</th>
<th>(e) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 Gifts, grants, and contributions received (Do not include unusual grants. See line 26a)</td>
<td>1,432,079</td>
<td>1,689,090</td>
<td>1,430,366</td>
<td>1,287,845</td>
<td>5,839,380</td>
</tr>
<tr>
<td>16 Membership fees received</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td>77,146</td>
<td>&lt;16,594&gt;</td>
<td>41,086</td>
<td>54,487</td>
<td>156,125</td>
</tr>
<tr>
<td>19 Net income from unrelated business activities not included in line 18</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22 Other income Attach a schedule. Do not include gain or (loss) from sale of capital assets</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23 Total of lines 15 through 22</td>
<td>1,509,225</td>
<td>1,672,496</td>
<td>1,471,452</td>
<td>1,342,332</td>
<td>5,995,505</td>
</tr>
<tr>
<td>24 Line 23 minus line 17</td>
<td>1,509,225</td>
<td>1,672,496</td>
<td>1,471,452</td>
<td>1,342,332</td>
<td>5,995,505</td>
</tr>
<tr>
<td>25 Enter 1% of line 23</td>
<td>15,092</td>
<td>16,725</td>
<td>14,715</td>
<td>13,423</td>
<td></td>
</tr>
</tbody>
</table>

#### Organizations described on lines 10 or 11:

- a Enter 2% of amount in column (e), line 24 | 26a | 119,910 |
- 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 1999 through 2002 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts | 26b | 1,774,766 |
- c Total support for section 509(a)(1) test. Enter line 24, column (e) | 26c | 5,995,505 |
- d Add Amounts from column (e) for lines: 18 156,125 19 22 1,774,766 26b 1,930,891 | 26d |
- e Public support (line 26c minus line 26d total) | 26e | 4,064,614 |
- f Public support percentage (line 26c numerator divided by line 26c denominator) | 26f | 67.7944% |

#### 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: N/A (2002) (2001) (2000) (1999) | 27a |
- 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. Add the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A (2002) (2001) (2000) (1999) | 27b |
- c Add Amounts from column (e) for lines 15 16 17 20 21 27c N/A | 27c |
- 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 % |

#### Unusual Grants:

For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

**NONE**
<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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?</td>
<td>29</td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>30</td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>31</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; please describe, if &quot;No,&quot; please explain (If you need more space, attach a separate statement.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>32. Does the organization maintain the following:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Records indicating the racial composition of the student body, faculty, and administrative staff?</td>
<td>32a</td>
<td></td>
</tr>
<tr>
<td>b. Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?</td>
<td>32b</td>
<td></td>
</tr>
<tr>
<td>c. Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?</td>
<td>32c</td>
<td></td>
</tr>
<tr>
<td>d. Copies of all material used by the organization or on its behalf to solicit contributions?</td>
<td>32d</td>
<td></td>
</tr>
<tr>
<td>If you answered &quot;No&quot; to any of the above, please explain (If you need more space, attach a separate statement.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>33. Does the organization discriminate by race in any way with respect to</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Students' rights or privileges?</td>
<td>33a</td>
<td></td>
</tr>
<tr>
<td>b. Admissions policies?</td>
<td>33b</td>
<td></td>
</tr>
<tr>
<td>c. Employment of faculty or administrative staff?</td>
<td>33c</td>
<td></td>
</tr>
<tr>
<td>d. Scholarships or other financial assistance?</td>
<td>33d</td>
<td></td>
</tr>
<tr>
<td>e. Educational policies?</td>
<td>33e</td>
<td></td>
</tr>
<tr>
<td>f. Use of facilities?</td>
<td>33f</td>
<td></td>
</tr>
<tr>
<td>g. Athletic programs?</td>
<td>33g</td>
<td></td>
</tr>
<tr>
<td>h. Other extracurricular activities?</td>
<td>33h</td>
<td></td>
</tr>
<tr>
<td>If you answered &quot;Yes&quot; to any of the above, please explain (If you need more space, attach a separate statement.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>34 a. Does the organization receive any financial aid or assistance from a governmental agency?</td>
<td>34a</td>
<td></td>
</tr>
<tr>
<td>b. Has the organization's right to such aid ever been revoked or suspended?</td>
<td>34b</td>
<td></td>
</tr>
<tr>
<td>If you answered &quot;Yes&quot; to either 34a or b, please explain using an attached statement.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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 &quot;No,&quot; attach an explanation</td>
<td>35</td>
<td></td>
</tr>
</tbody>
</table>
Part VI-A  Lobbying Expenditures by Electing Public Charities  (See page 9 of the instructions )

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

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred )

<table>
<thead>
<tr>
<th></th>
<th>(a) Affiliated group totals</th>
<th>(b) To be completed for ALL electing organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>36 Total lobbying expenditures to influence public opinion (grassroots lobbying)</td>
<td>36</td>
<td></td>
</tr>
<tr>
<td>37 Total lobbying expenditures to influence a legislative body (direct lobbying)</td>
<td>37</td>
<td></td>
</tr>
<tr>
<td>38 Total lobbying expenditures (add lines 36 and 37)</td>
<td>38</td>
<td></td>
</tr>
<tr>
<td>39 Other exempt purpose expenditures</td>
<td>39</td>
<td></td>
</tr>
<tr>
<td>40 Total exempt purpose expenditures (add lines 38 and 39)</td>
<td>40</td>
<td></td>
</tr>
<tr>
<td>41 Lobbying nontaxable amount Enter the amount from the following table -</td>
<td></td>
<td></td>
</tr>
<tr>
<td>42 Grassroots nontaxable amount (enter 25% of line 41)</td>
<td>42</td>
<td></td>
</tr>
<tr>
<td>43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36</td>
<td>43</td>
<td></td>
</tr>
<tr>
<td>44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38</td>
<td>44</td>
<td></td>
</tr>
</tbody>
</table>

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)

<table>
<thead>
<tr>
<th>Calendar year or fiscal year beginning in</th>
<th>(a) 2003</th>
<th>(b) 2002</th>
<th>(c) 2001</th>
<th>(d) 2000</th>
<th>(e) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>45 Lobbying nontaxable amount</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>46 Lobbying ceiling amount (150% of line 45(e))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>47 Total lobbying expenditures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>48 Grassroots nontaxable amount</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>49 Grassroots ceiling amount (150% of line 48(e))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>50 Grassroots lobbying expenditures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Part VI-B  Lobbying Activity by Nonelecting Public Charities
(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions)

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

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>a Volunteers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Paid staff or management (Include compensation in expenses reported on lines c through h.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Media advertisements</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Mailings to members, legislators, or the public</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Publications, or published or broadcast statements</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Grants to other organizations for lobbying purposes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Direct contact with legislators, their staffs, government officials, or a legislative body</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i Total lobbying expenditures (Add lines c through h.)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

N/A

Schedule A (Form 990 or 990-EZ) 2003
## 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?

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

### 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>
<thead>
<tr>
<th>Line no</th>
<th>Amount involved</th>
<th>Name of noncharitable exempt organization</th>
<th>Description of transfers, transactions, and sharing arrangements</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 52 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?

- a [ ] Yes [x] No

b If "Yes," complete the following schedule

<table>
<thead>
<tr>
<th>Line no</th>
<th>Name of organization</th>
<th>Type of organization</th>
<th>Description of relationship</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asset No</td>
<td>Description</td>
<td>Data Acquired</td>
<td>Method</td>
</tr>
<tr>
<td>----------</td>
<td>----------------------------</td>
<td>---------------</td>
<td>--------</td>
</tr>
<tr>
<td>1</td>
<td>COMPUTER</td>
<td>VARIOUS</td>
<td>5.00</td>
</tr>
<tr>
<td>2</td>
<td>COMPUTER</td>
<td>VARIOUS</td>
<td>5.00</td>
</tr>
<tr>
<td></td>
<td>* 990 PAGE 2 TOTAL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>OTHER</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MANAGEMENT AND GENERAL</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>COMPUTER</td>
<td>033101SL</td>
<td>5.00</td>
</tr>
<tr>
<td>4</td>
<td>PRINTER</td>
<td>093003SL</td>
<td>5.00</td>
</tr>
<tr>
<td>5</td>
<td>PRINTER</td>
<td>120103SL</td>
<td>5.00</td>
</tr>
<tr>
<td></td>
<td>* 990 PAGE 2 TOTAL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MANAGEMENT AND GENERAL</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>* GRAND TOTAL 990 PAGE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>DEPR</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(D) - Asset disposed  
* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction
### FORM 990 GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES

**Statement 1**

<table>
<thead>
<tr>
<th>Description</th>
<th>Gross Sales Price</th>
<th>Cost or Other Basis</th>
<th>Expense of Sale</th>
<th>Net Gain or (Loss)</th>
</tr>
</thead>
<tbody>
<tr>
<td>VARIOUS</td>
<td>1,085,561.</td>
<td>1,079,732.</td>
<td>0.</td>
<td>5,829.</td>
</tr>
<tr>
<td>TO FORM 990, PART I, LINE 8</td>
<td>1,085,561.</td>
<td>1,079,732.</td>
<td>0.</td>
<td>5,829.</td>
</tr>
</tbody>
</table>

### FORM 990 OTHER CHANGES IN NET ASSETS OR FUND BALANCES

**Statement 2**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNREALIZED GAINS</td>
<td>39,173.</td>
</tr>
<tr>
<td>TOTAL TO FORM 990, PART I, LINE 20</td>
<td>39,173.</td>
</tr>
</tbody>
</table>

### FORM 990 OTHER EXPENSES

**Statement 3**

<table>
<thead>
<tr>
<th>Description</th>
<th>(A) Total</th>
<th>(B) Program Services</th>
<th>(C) Management and General</th>
<th>(D) Fundraising</th>
</tr>
</thead>
<tbody>
<tr>
<td>DUES &amp; SUBSCRIPTIONS</td>
<td>2,079.</td>
<td>2,079.</td>
<td>150,643.</td>
<td></td>
</tr>
<tr>
<td>EVENTS</td>
<td>150,643.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NEWSLETTERS</td>
<td>7,354.</td>
<td></td>
<td>7,354.</td>
<td></td>
</tr>
<tr>
<td>PAYROLL TAXES &amp; BENEFITS</td>
<td>32,696.</td>
<td>9,629.</td>
<td>7,095.</td>
<td>15,972.</td>
</tr>
<tr>
<td>BANK AND CREDIT CARD FEES</td>
<td>18,112.</td>
<td>5,334.</td>
<td>3,930.</td>
<td>8,848.</td>
</tr>
<tr>
<td>BOARD INSURANCE EXPENSE</td>
<td>618.</td>
<td>182.</td>
<td>134.</td>
<td>302.</td>
</tr>
<tr>
<td>TRAVEL &amp; ENTERTAINMENT</td>
<td>1,818.</td>
<td>535.</td>
<td>395.</td>
<td>888.</td>
</tr>
<tr>
<td>MISCELLANEOUS</td>
<td>11,388.</td>
<td>3,354.</td>
<td>2,471.</td>
<td>5,563.</td>
</tr>
<tr>
<td>COMPUTER</td>
<td>9,287.</td>
<td>2,735.</td>
<td>2,015.</td>
<td>4,537.</td>
</tr>
<tr>
<td>GENERAL INSURANCE</td>
<td>7,552.</td>
<td>2,224.</td>
<td>1,639.</td>
<td>3,689.</td>
</tr>
<tr>
<td>FUND RAISING</td>
<td>8,922.</td>
<td></td>
<td></td>
<td>8,922.</td>
</tr>
<tr>
<td>PROFESSIONAL FEES</td>
<td>12,775.</td>
<td>3,762.</td>
<td>2,772.</td>
<td>6,241.</td>
</tr>
<tr>
<td>TOTAL TO FM 990, LN 43</td>
<td>263,244.</td>
<td>29,834.</td>
<td>20,451.</td>
<td>212,959.</td>
</tr>
</tbody>
</table>
DESCRIPTION OF PROGRAM SERVICE ONE

TO PROVIDE FINANCIAL ASSISTANCE TO NON-PROFIT ORGANIZATIONS AND PROJECTS THAT FURTHER THE HUMAN AND CIVIC RIGHTS OF GAY MEN AND LESBIANS, AND PROVIDE HEALTH, SOCIAL, AND CULTURAL SERVICES, PRIMARILY TO GAY MEN AND LESBIANS.

<table>
<thead>
<tr>
<th>Grants</th>
<th>Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>919,277</td>
<td>1,010,823</td>
</tr>
</tbody>
</table>

TO FORM 990, PART III, LINE A

FORM 990

CASH GRANTS AND ALLOCATIONS

<table>
<thead>
<tr>
<th>Classification</th>
<th>Donee's Name</th>
<th>Donee's Address</th>
<th>Donee's Relationship</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>See Attached</td>
<td>None</td>
<td></td>
<td></td>
<td>919,277</td>
</tr>
</tbody>
</table>

TOTAL INCLUDED ON FORM 990, PART II, LINE 22

| 919,277 |

FORM 990

NON-GOVERNMENT SECURITIES

<table>
<thead>
<tr>
<th>Security Description</th>
<th>Corporate Stocks</th>
<th>Corporate Bonds</th>
<th>Other Publicly Traded Securities</th>
<th>Other Securities</th>
<th>Total Non-Gov't Securities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Equities</td>
<td></td>
<td></td>
<td>312,973.</td>
<td>312,973.</td>
<td></td>
</tr>
<tr>
<td>Government and Agency</td>
<td></td>
<td></td>
<td>233,310.</td>
<td>233,310.</td>
<td></td>
</tr>
<tr>
<td>Corporate Bonds &amp; Mutual Funds</td>
<td></td>
<td></td>
<td>188,186.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

TO 990, LN 54 COL B

| 188,186. | 546,283. | 734,469. |
FORM 990
OTHER INVESTMENTS
STATEMENT 7

DESCRIPTION

CERTIFICATE OF DEPOSIT

VALUATION METHOD
MARKET VALUE
AMOUNT
0.

TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B
0.

FORM 990
DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT
STATEMENT 8

DESCRIPTION

COST OR OTHER BASIS
ACCUMULATED DEPRECIATION
BOOK VALUE

COMPUTER 2,146. 2,147. <1.>
COMPUTER 3,360. 3,360. 0.
COMPUTER 3,062. 2,532. 530.
PRINTER 3,632. 726. 2,906.
PRINTER 3,570. 714. 2,856.

TOTAL TO FORM 990, PART IV, LN 57 15,770. 9,479. 6,291.

FORM 990
OTHER ASSETS
STATEMENT 9

DESCRIPTION

RESIDUARY INTEREST IN AN ESTATE

AMOUNT
52,825.

TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B
52,825.
### Part I: Election to Expense Certain Tangible Property Under Section 179

| 1 | Maximum amount. See instructions for a higher limit for certain businesses | 100,000 |
| 2 | Total cost of section 179 property placed in service (see instructions) | |
| 3 | Threshold cost of section 179 property before reduction in limitation | 400,000 |
| 4 | Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter 0- | |
| 5 | Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter 0- if named filing separately, see instructions | |

Note: Do not use Part II or Part III below for listed property. Instead, use Part V

### Part II: Special Depreciation Allowance and Other Depreciation (Do not include listed property.)

| 14 | Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) | |
| 15 | Property subject to section 168(f)(1) election (see instructions) | |
| 16 | Other depreciation (including ACRS) (see instructions) | 1,793 |

### Part III: MACRS Depreciation (Do not include listed property.) (See instructions.)

#### Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2003

18 If you are electing under section 168(f)(d) to group any assets placed in service during the tax year into one or more general asset accounts, check here

#### Section B - Assets Placed in Service During 2003 Tax Year Using the General Depreciation System

<table>
<thead>
<tr>
<th>(a) Classification of property</th>
<th>(b) Month and year placed in service</th>
<th>(c) Basis for depreciation (business/investment use only - see instructions)</th>
<th>(d) Recovery period</th>
<th>(e) Convention</th>
<th>(f) Method</th>
<th>(g) Depreciation deduction</th>
</tr>
</thead>
<tbody>
<tr>
<td>19a</td>
<td>3-year property</td>
<td></td>
<td></td>
<td>25 yrs.</td>
<td></td>
<td>S/L</td>
</tr>
<tr>
<td>b</td>
<td>5-year property</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>7-year property</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>10-year property</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>15-year property</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>20-year property</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>25-year property</td>
<td></td>
<td></td>
<td>25 yrs.</td>
<td></td>
<td>S/L</td>
</tr>
<tr>
<td>h</td>
<td>Residential rental property</td>
<td></td>
<td></td>
<td>27.5 yrs.</td>
<td></td>
<td>S/L</td>
</tr>
<tr>
<td>i</td>
<td>Nonresidential real property</td>
<td></td>
<td></td>
<td>27.5 yrs.</td>
<td></td>
<td>S/L</td>
</tr>
</tbody>
</table>

#### Section C - Assets Placed in Service During 2003 Tax Year Using the Alternative Depreciation System

<table>
<thead>
<tr>
<th>(a) Classification of property</th>
<th>(b) Month and year placed in service</th>
<th>(c) Basis for depreciation (business/investment use only - see instructions)</th>
<th>(d) Recovery period</th>
<th>(e) Convention</th>
<th>(f) Method</th>
<th>(g) Depreciation deduction</th>
</tr>
</thead>
<tbody>
<tr>
<td>20a</td>
<td>Class life</td>
<td></td>
<td></td>
<td>12 yrs.</td>
<td></td>
<td>S/L</td>
</tr>
<tr>
<td>b</td>
<td>12-year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>40-year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Part IV: Summary (See instructions.)

21 Listed property. Enter amount from line 28

22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21.

23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 280A costs
### Part V

**Listed Property** (include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

#### Section A - Depreciation and Other Information (Caution: See instructions for limits for passenger automobiles.)

- **24a** Do you have evidence to support the business/investment use claimed? [ ] Yes [ ] No
- **24b** If "Yes," is the evidence written? [ ] Yes [ ] No

<table>
<thead>
<tr>
<th>(a) Type of property (list vehicles first)</th>
<th>(b) Date placed in service</th>
<th>(c) Business/Investment use percentage</th>
<th>(d) Basis for depreciation (business/investment use only)</th>
<th>(e) Recovery period</th>
<th>(f) Method/Convention</th>
<th>(g) Depreciation deduction</th>
<th>(h) Elected section 179 cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use</td>
<td>25</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Property used more than 50% in a qualified business use:</td>
<td>%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Property used 50% or less in a qualified business use:</td>
<td>%</td>
<td>S/L</td>
<td>%</td>
<td>S/L</td>
<td>%</td>
<td>S/L</td>
<td></td>
</tr>
<tr>
<td>Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1</td>
<td>26</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Add amounts in column (i), line 26. Enter here and on line 7, page 1</td>
<td>29</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

<table>
<thead>
<tr>
<th>(a) Vehicle</th>
<th>(b) Vehicle</th>
<th>(c) Vehicle</th>
<th>(d) Vehicle</th>
<th>(e) Vehicle</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total business/investment miles driven during the year (do not include commuting miles)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total commuting miles driven during the year</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total other personal (noncommuting) miles driven</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total miles driven during the year. Add lines 30 through 32</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Was the vehicle available for personal use during off-duty hours?</td>
<td>Yes [ ] No [ ]</td>
<td>Yes [ ] No [ ]</td>
<td>Yes [ ] No [ ]</td>
<td>Yes [ ] No [ ]</td>
</tr>
<tr>
<td>Was the vehicle used primarily by a more than 5% owner or related person?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is another vehicle available for personal use?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

- **37** Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? [ ] Yes [ ] No
- **38** Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See instructions for vehicles used by corporate officers, directors, or 1% or more owners
- **39** Do you treat all use of vehicles by employees as personal use?
- **40** Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?
- **41** Do you meet the requirements concerning qualified automobile demonstration use?

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

#### Part VI - Amortization

- **42** Amortization of costs that begins during your 2003 tax year:
- **43** Amortization of costs that began before your 2003 tax year: 43
- **44** Total. Add amounts in column (f). See instructions for where to report 44

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316252/10-21-03 Form 4562 (2003)
Form 8868 (12-2000) Page 2

1. 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.

1. 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.

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

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

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

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 AUGUST 15, 2005.
5. For calendar year OCT 1, 2003, or other tax year beginning SEP 30, 2004.
6. If this tax year is for less than 12 months, check reason: ■ Initial return □ Final return □ Change in accounting period
7. State in detail why you need the extension.

Information Necessary to File a Complete an Accurate Return is Still Unavailable at This Time.

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 $ 8b. If this application is for Form 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 $ 8c. Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon, or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions $ N/A

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature □ Title □ Date □ 5/1/05

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 the 10-day grace period.

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

By.

Alternate Mailing Address - Enter the address if you want the copy of this application for an address different than the one entered above.

Name FRUCHTER ROSEN & COMPANY, P.C.

Number and street (include suite, room, or apt. no.) Or a P.O. box number 156 WEST 56TH STREET, SUITE 1902

City or town, province or state, and country (including postal or ZIP code) NEW YORK, NY 10019

EXTENSION APPROVED

JUN 2 2005

FIELD DIRECTOR, SUBMISSION PROCESSING, OGDEN

6240510 135009 4435 2003.09000 STONEWALL COMMUNITY FOUNDAT