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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)

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

OMB No. 1545-0047

2001

Open to Public Inspection

Form 990

Department of the Treasury Internal Revenue Service

A For the 2001 calendar year, or tax year period beginning JUL 1, 2001 and ending JUN 30, 2002

B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending. C Name of organization: BREAD AND ROSES COMMUNITY FUND. D Employer identification number: 23-2047297. E Telephone number: (215) 731-1107. F Accounting method: Accrual.

G Web site WWW.BREADROSESFUND.ORG. H and I are not applicable to section 527 organizations. H(a) Is this a group return for affiliates? No. H(b) If "Yes," enter number of affiliates. H(c) Are all affiliates included? N/A. H(d) Is this a separate return filed by an organization covered by a group ruling? No.

J Organization type (check only one) [X] 501(c)(3) (Insert no) [ ] 4947(a)(1) or [ ] 527. K Check here [ ] if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 1,188,942. 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

1 Contributions, gifts, grants, and similar amounts received. 1a Direct public support 522,624. 1b Indirect public support 99,589. 1c Government contributions (grants). 1d Total (add lines 1a through 1c) (cash \$ 622,213. noncash \$ ) 622,213.

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 5,936. 5 Dividends and interest from securities 35,817.

6 a Gross rents. b Less rental expenses. c Net rental income or (loss) (subtract line 6b from line 6a). 7 Other investment income (describe ).

8 a Gross amount from sale of assets other than inventory (A) Securities 462,178. (B) Other. b Less cost or other basis and sales expenses 519,122. c Gain or (loss) (attach schedule) <56,944.>. d Net gain or (loss) (combine line 8c, columns (A) and (B)) STMT 1 <56,944.>.

9 Special events and activities (attach schedule). a Gross revenue (not including \$ 0. of contributions reported on line 1a) 9a 47,633. b Less direct expenses other than fundraising expenses 9b 22,846. c Net income or (loss) from special events (subtract line 9b from line 9a) SEE STATEMENT 2 24,787.

10 a Gross sales of inventory, less returns and allowances. b Less cost of goods sold. c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a). 11 Other revenue (from Part VII, line 103) 15,165.

12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c and 11) 646,974.

13 Program services (from line 44, column (B)) 660,115. 14 Management and general (from line 44, column (C)) 25,922. 15 Fundraising (from line 44, column (D)) 53,771.

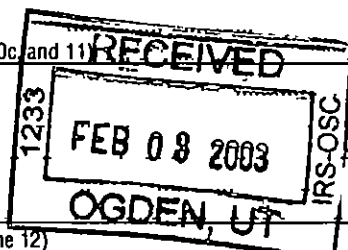
16 Payments to affiliates (attach schedule). 17 Total expenses (add lines 16 and 44, column (A)) 739,808.

18 Excess or (deficit) for the year (subtract line 17 from line 12) <92,834.>. 19 Net assets or fund balances at beginning of year (from line 73, column (A)) 1,757,868.

20 Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 3 27,430. 21 Net assets or fund balances at end of year (combine lines 18, 19, and 20) 1,692,464.

123001 01-04-02 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2001)

15381220 793760 3065 2001.08000 BREAD AND ROSES COMMUNITY 3065 1



913

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

Table with 5 columns: (A) Total, (B) Program services, (C) Management and general, (D) Fundraising. Rows include 22 Grants and allocations, 23 Specific assistance, 24 Benefits paid, 25 Compensation of officers, 26 Other salaries and wages, 27 Pension plan contributions, 28 Other employee benefits, 29 Payroll taxes, 30 Professional fundraising fees, 31 Accounting fees, 32 Legal fees, 33 Supplies, 34 Telephone, 35 Postage and shipping, 36 Occupancy, 37 Equipment rental and maintenance, 38 Printing and publications, 39 Travel, 40 Conferences, conventions, and meetings, 41 Interest, 42 Depreciation, depletion, etc, 43 Other expenses not covered above, 44 Total functional expenses.

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 \$, (ii) the amount allocated to Program services \$, (iii) the amount allocated to Management and general \$, and (iv) the amount allocated to Fundraising \$

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? SEE STATEMENT 5

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)

Program Service Expenses (Required for 501(c)(3) and (4) orgs and 4947(a)(1) trusts but optional for others)

Table with 2 columns: Description of program service, Program Service Expenses. Rows include a SEE STATEMENT 6, b SEE STATEMENT 7, c, d, e Other program services, f Total of Program Service Expenses.

**Part IV Balance Sheets**

Note		(A) Beginning of year		(B) End of year	
<i>Where required, attached schedules and amounts within the description column should be for end-of-year amounts only</i>					
Assets	45	Cash - non-interest-bearing	48,678.	45	72,449.
	46	Savings and temporary cash investments	213,027.	46	208,835.
	47 a	Accounts receivable	47a 2,721.		
	b	Less allowance for doubtful accounts	47b	47c	2,721.
	48 a	Pledges receivable	48a 120,323.		
	b	Less allowance for doubtful accounts	48b	48c	120,323.
	49	Grants receivable		49	0.
	50	Receivables from officers, directors, trustees, and key employees		50	
	51 a	Other notes and loans receivable	51a 10,000.		
	b	Less allowance for doubtful accounts	51b	51c	10,000.
	52	Inventories for sale or use		52	
	53	Prepaid expenses and deferred charges	3,486.	53	8,665.
	54	Investments - securities <b>STMT 9</b> <b>STMT 10</b> <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	1,474,035.	54	1,344,372.
	55 a	Investments - land, buildings, and equipment basis	55a		
	b	Less accumulated depreciation	55b	55c	
56	Investments - other		56		
57 a	Land, buildings, and equipment basis	57a 60,130.			
b	Less accumulated depreciation <b>STMT 11</b>	57b 42,703.	57c	17,427.	
58	Other assets (describe <input type="checkbox"/> )		58		
59	<b>Total assets</b> (add lines 45 through 58) (must equal line 74)	1,879,686.	59	1,784,792.	
Liabilities	60	Accounts payable and accrued expenses	8,308.	60	5,328.
	61	Grants payable	113,510.	61	87,000.
	62	Deferred revenue		62	
	63	Loans from officers, directors, trustees, and key employees		63	
	64 a	Tax-exempt bond liabilities		64a	
	b	Mortgages and other notes payable		64b	
	65	Other liabilities (describe <input type="checkbox"/> )		65	
66	<b>Total liabilities</b> (add lines 60 through 65)	121,818.	66	92,328.	
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	589,360.	67	586,742.
	68	Temporarily restricted	1,168,508.	68	1,105,722.
	69	Permanently restricted		69	
	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	<b>Total net assets or fund balances</b> (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)	1,757,868.	73	1,692,464.	
74	<b>Total liabilities and net assets / fund balances</b> (add lines 66 and 73)	1,879,686.	74	1,784,792.	

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			Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return		
a Total revenue, gains, and other support per audited financial statements		674,404.	a Total expenses and losses per audited financial statements		739,808.
b Amounts included on line a but not on line 12, Form 990			b Amounts included on line a but not on line 17, Form 990		
(1) Net unrealized gains on investments \$ 13,028.			(1) Donated services and use of facilities \$		
(2) Donated services and use of facilities \$			(2) Prior year adjustments reported on line 20, Form 990 \$		
(3) Recoveries of prior year grants \$			(3) Losses reported on line 20, Form 990 \$		
(4) Other (specify)			(4) Other (specify)		
STMT 12 \$ 14,402.					
Add amounts on lines (1) through (4)	b	27,430.	Add amounts on lines (1) through (4)	b	0.
c Line a minus line b	c	646,974.	c Line a minus line b	c	739,808.
d Amounts included on line 12, Form 990 but not on line a			d Amounts included on line 17, Form 990 but not on line a		
(1) Investment expenses not included on line 6b, Form 990 \$			(1) Investment expenses not included on line 6b, Form 990 \$		
(2) Other (specify)			(2) Other (specify)		
Add amounts on lines (1) and (2)	d	0.	Add amounts on lines (1) and (2)	d	0.
e Total revenue per line 12, Form 990 (line c plus line d)	e	646,974.	e Total expenses per line 17, Form 990 (line c plus line d)	e	739,808.

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated)				
(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
SEE STATEMENT 13		54,813.	5,499.	0.
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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 Form 990 (2001)

Part VI Other Information

76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity
77 Were any changes made in the organizing or governing documents but not reported to the IRS?
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?
78 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?
80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?
80 b If "Yes," enter the name of the organization and check whether it is exempt OR nonexempt.
81 a Enter direct or indirect political expenditures See line 81 instructions
81 b Did the organization file Form 1120-POL for this year?
82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?
82 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)
83 a Did the organization comply with the public inspection requirements for returns and exemption applications?
83 b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?
84 a Did the organization solicit any contributions or gifts that were not tax deductible?
84 b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?
85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?
85 b Did the organization make only in-house lobbying expenditures of \$2,000 or less?
85 c Dues, assessments, and similar amounts from members
85 d Section 162(e) lobbying and political expenditures
85 e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices
85 f Taxable amount of lobbying and political expenditures (line 85d less 85e)
85 g Does the organization elect to pay the section 6033(e) tax on the amount in 85f?
85 h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?
86 501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12
86 b Gross receipts, included on line 12, for public use of club facilities
87 501(c)(12) organizations Enter a Gross income from members or shareholders
87 b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)
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?
89 a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911, section 4912, and section 4955
89 b 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year?
89 c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
89 d Enter Amount of tax on line 89c, above, reimbursed by the organization
90 a List the states with which a copy of this return is filed
90 b Number of employees employed in the pay period that includes March 12, 2001

91 The books are in care of MANAGEMENT Telephone no 215-731-1107
Located at 1500 WALNUT STREET, SUITE 1305, PHILA., PA ZIP + 4 19102

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 N/A

**Part VII Analysis of Income-Producing Activities** (See Specific Instructions on page 32)

Note Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	5,936.	
96 Dividends and interest from securities			14	35,817.	
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	<56,944.>	
101 Net income or (loss) from special events			01	24,787.	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a MISCELLANEOUS					15,165.
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		9,596.	15,165.
105 Total (add line 104, columns (B), (D), and (E))					24,761.

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 Specific Instructions on page 32)

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)

103A MISCELLANEOUS INCOME REPRESENTS THE SERVICE FEES RETAINED BY THE ORGANIZATION TO RECOVER ITS ADMINISTRATIVE EXPENSES RELATED TO PROCESSING GRANTS MADE TO OTHER SOCIAL CHANGE ORGANIZATIONS

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See Specific Instructions on page 33)

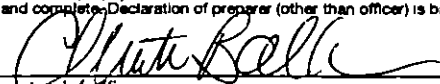
(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

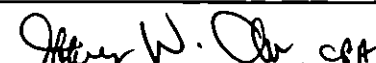
**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See Specific Instructions on page 33)

- (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 Here:  Date: \_\_\_\_\_ Type or print name and title: **Christie Balka, Exec Director**

Paid Preparer's Use Only: Preparer's signature:  Date: 1/3/03 Check if self-employed:  Preparer's SSN or PTIN: \_\_\_\_\_ Firm's name (or yours if self-employed), address, and ZIP + 4: **BRIGGS, BUNTING & DOUGHERTY, LLP  
TWO PENN CENTER PLAZA, SUITE 820  
PHILADELPHIA, PA 19102-1732** EIN: \_\_\_\_\_ Phone no: **215-567-7770**

**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

**Supplementary Information-(See separate instructions.)**

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

**2001**

Name of the organization **BREAD AND ROSES COMMUNITY FUND** Employer identification number **23 2047297**

**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
NONE				
Total number of other employees paid over \$50,000 ▶	0			

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

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
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
<b>1</b> 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 <b>▶</b> \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B) 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		X
<b>2</b> 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) <b>SEE STATEMENT 14</b>		
<b>a</b> Sale, exchange, or leasing of property?		X
<b>b</b> Lending of money or other extension of credit?		X
<b>c</b> Furnishing of goods, services, or facilities?		X
<b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? <b>SEE PART V, FORM 990</b>	X	
<b>e</b> Transfer of any part of its income or assets?		X
<b>3</b> Does the organization make grants for scholarships, fellowships, student loans, etc? (See Note below)	X	
<b>4</b> Do you have a section 403(b) annuity plan for your employees?	X	
<b>Note</b> Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments <b>SEE STATEMENT 15</b>		

**Part IV Reason for Non-Private Foundation Status** (See pages 3 through 6 of the instructions)

- The organization is not a private foundation because it is (Please check only ONE applicable box.)
- 5  A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
  - 6  A school Section 170(b)(1)(A)(ii) (Also complete Part V)
  - 7  A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
  - 8  A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v)
  - 9  A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state **▶** \_\_\_\_\_
  - 10  An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A.)
  - 11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A.)
  - 11b  A community trust. Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A.)
  - 12  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A.)
  - 13  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

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

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14  An organization organized and operated to test for public safety Section 509(a)(4) (See page 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.  
 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) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
<b>15</b> Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	739,466.	619,839.	720,518.	373,641.	2,453,464.
<b>16</b> Membership fees received					
<b>17</b> 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	44,037.	51,242.	35,446.	23,712.	154,437.
<b>18</b> 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	55,401.	49,932.	7,133.	5,095.	117,561.
<b>19</b> Net income from unrelated business activities not included in line 18					
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
<b>21</b> 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.					
<b>22</b> Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.	16,304.	3,911.	5,950.	SEE STATEMENT 16	26,165.
<b>23</b> Total of lines 15 through 22	855,208.	724,924.	769,047.	402,448.	2,751,627.
<b>24</b> Line 23 minus line 17	811,171.	673,682.	733,601.	378,736.	2,597,190.
<b>25</b> Enter 1% of line 23	8,552.	7,249.	7,690.	4,024.	
<b>26 Organizations described on lines 10 or 11</b> a Enter 2% of amount in column (e), line 24					26a 51,944.
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 1997 through 2000 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 518,199.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 2,597,190.
d Add: Amounts from column (e) for lines 18 117,561. 19 22 26,165. 26b 518,199.					26d 661,925.
e Public support (line 26c minus line 26d total)					26e 1,935,265.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 74.5138%
<b>27 Organizations described on line 12</b> 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	(2000)	(1999)	(1998)	(1997)	
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: N/A	(2000)	(1999)	(1998)	(1997)	
c Add: Amounts from column (e) for lines 15 16 17 20 21					27c N/A
d Add: Line 27a total and line 27b total					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					27f N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %

**28 Unusual Grants** For an organization described in line 10, 11, or 12, that received any unusual grants during 1997 through 2000, 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

**Part V Private School Questionnaire** (See page 7 of the instructions )

N/A

**(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.)		
<hr/> <hr/> <hr/>			
32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
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.)	32d	
<hr/> <hr/> <hr/>			
33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement.)	33h	
<hr/> <hr/> <hr/>			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
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.	34b	
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	35	

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions.)

**N/A**

(To be completed ONLY by an eligible organization that filed Form 5768)

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

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred )		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		<b>N/A</b>	
<b>36</b> Total lobbying expenditures to influence public opinion (grassroots lobbying)	<b>36</b>		
<b>37</b> Total lobbying expenditures to influence a legislative body (direct lobbying)	<b>37</b>		
<b>38</b> Total lobbying expenditures (add lines 36 and 37)	<b>38</b>		
<b>39</b> Other exempt purpose expenditures	<b>39</b>		
<b>40</b> Total exempt purpose expenditures (add lines 38 and 39)	<b>40</b>		
<b>41</b> Lobbying nontaxable amount. Enter the amount from the following table -			
<b>If the amount on line 40 is -</b>	<b>The lobbying nontaxable amount is -</b>		
Not over \$500,000	20% of the amount on line 40	}	<b>41</b>
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
<b>42</b> Grassroots nontaxable amount (enter 25% of line 41)	<b>42</b>		
<b>43</b> Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	<b>43</b>		
<b>44</b> Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	<b>44</b>		

**Caution** If there is an amount on either line 43 or line 44, you must file Form 4720

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
<b>45</b> Lobbying nontaxable amount					0.
<b>46</b> Lobbying ceiling amount (150% of line 45(e))					0.
<b>47</b> Total lobbying expenditures					0.
<b>48</b> Grassroots nontaxable amount					0.
<b>49</b> Grassroots ceiling amount (150% of line 48(e))					0.
<b>50</b> Grassroots lobbying expenditures					0.

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 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

- a** Volunteers
- b** Paid staff or management (Include compensation in expenses reported on lines c through h )
- c** Media advertisements
- d** Mailings to members, legislators, or the public
- e** Publications, or published or broadcast statements
- f** Grants to other organizations for lobbying purposes
- g** Direct contact with legislators, their staffs, government officials, or a legislative body
- h** Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i** Total lobbying expenditures (Add lines c through h )

Yes	No	Amount
	<b>X</b>	
	<b>X</b>	
	<b>X</b>	
	<b>X</b>	
	<b>X</b>	
	<b>X</b>	
	<b>X</b>	
	<b>X</b>	
		0.

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

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 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...

Table with 2 columns: Yes, No. Rows include categories 51a(i), a(ii), b(i), b(ii), b(iii), b(iv), b(v), b(vi), and c, with 'X' marks in the 'No' column.

N/A

Table with 4 columns: (a) Line no, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements.

52 a 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 (X) No

b If "Yes," complete the following schedule N/A

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship.

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis - ITC, 179, Salvage	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
1	FUUL DEPRECIATED ASSETS	VARI	ESSL	5.00	16	5,517.			5,517.	5,517.		0.
2	COMPUTER EQUIPMENT		92SL	5.00	16	871.			871.	871.		0.
3	COMPUTER		92SL	5.00	16	2,313.			2,313.	2,313.		0.
4	COMPUTER SOFTWARE/HARDWARE		93SL	5.00	16	2,790.			2,790.	2,790.		0.
5	VAIL COMMUNICATION		93SL	5.00	16	2,354.			2,354.	2,354.		0.
6	MINOLTA COPIER		94SL	5.00	16	10,574.			10,574.	10,574.		0.
7	COMPUTER (95/96)		95SL	5.00	16	1,933.			1,933.	1,933.		0.
8	COMPUTER SOFTWARE (95/96)		95SL	5.00	16	2,705.			2,705.	2,705.		0.
9	OFFICE FURNITURE (95/96)		96SL	5.00	16	496.			496.	496.		0.
10	DITTO MACHINE (96/97)		97SL	5.00	16	269.			269.	243.		26.
11	17" COMPUTER MONITOR (96/97)		97SL	5.00	16	374.			374.	337.		37.
12	COMPUTERS (96/97)		97SL	5.00	16	2,805.			2,805.	2,525.		280.
13	COMPUTER EQUIPMENT (99/00)		SL	5.00	16	7,020.			7,020.	2,106.		1,404.
14	OFFICE FURNITURE (00/01)		090600SL	5.00	16	877.			877.	88.		175.
15	COMPUTER UPGRADE (00/01)		101100SL	5.00	16	1,065.			1,065.	107.		213.
16	GRANT SOFTWARE UPGRADE (00/01)		102000SL	5.00	16	1,510.			1,510.	151.		302.
17	VOICEMAIL SYSTEM (00/01)		121300SL	5.00	16	4,328.			4,328.	433.		866.
18	COMPUTER MAINTENANCE AGREEMENT (00/01)		010301	36M	42	795.			795.	132.		265.

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction in Basis - ITC, 179, Salvage	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
19	MODEM CONFIGURATION (00/01)	010801SL		5.00	16	540.			540.	54.		108.
20	COPIER (00/01)	063001SL		5.00	16	7,794.			7,794.	779.		1,559.
21	OFFICE RENOVATIONS (00/01)	091500SL		5.00	16	3,200.			3,200.	320.		640.
	* TOTAL 990 PAGE 2 DEPR & AMORT					60,130.		0.	60,130.	36,828.	0.	5,875.

(D) Asset disposed

FORM 990	GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES			STATEMENT	1
DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)	
THRU SALOMON SMITH BARNEY	10,083.	10,400.	0.	<317.>	
THRU MERRILL LYNCH THRU UNITED STATES TRUST COMPANY	64,644.	68,210.	0.	<3,566.>	
	387,451.	440,512.	0.	<53,061.>	
TO FORM 990, PART I, LINE 8	462,178.	519,122.	0.	<56,944.>	

FORM 990	SPECIAL EVENTS AND ACTIVITIES				STATEMENT	2
DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME	
TRIBUTE TO CHANGE DINNER	38,027.	0.	38,027.	22,251.	15,776.	
OTHER	9,606.	0.	9,606.	595.	9,011.	
TO FM 990, PART I, LINE 9	47,633.	0.	47,633.	22,846.	24,787.	

FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES		STATEMENT	3
DESCRIPTION				AMOUNT
UNREALIZED APPRECIATION (TEMPORARILY RESTRICTED ASSETS)				11,321.
UNREALIZED APPRECIATION (UNRESTRICTED ASSETS)				1,707.
RETURN OF CAPITAL ON VENTURES LIMITED PARTNERSHIP				14,402.
TOTAL TO FORM 990, PART I, LINE 20				27,430.



FORM 990	OTHER EXPENSES			STATEMENT	4
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING	
CAMPAIGN EXPENSE	9,698.	4,449.	0.	5,249.	
CONTRACT SERVICES	12,772.	8,823.	1,933.	2,016.	
DUES AND SUBSCRIPTIONS	11,207.	10,275.	903.	29.	
INSURANCE	4,145.	3,304.	310.	531.	
ADVERTISING	320.	160.	80.	80.	
STAFF/BOARD TRAINING	922.	735.	69.	118.	
BANK CHARGES	12,289.	11,493.	331.	465.	
OTHER PROGRAM EXPENSE	18,367.	18,367.	0.	0.	
COMPUTER-RELATED EXPENSES	8,412.	6,705.	629.	1,078.	
DONOR SERVICES	3,710.	3,710.	0.	0.	
LABOR ENLISTMENT COSTS	1,434.	1,143.	107.	184.	
LICENSES AND TAXES	1,481.	1,180.	111.	190.	
<b>TOTAL TO FM 990, LN 43</b>	<b>84,757.</b>	<b>70,344.</b>	<b>4,473.</b>	<b>9,940.</b>	

FORM 990	STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE	STATEMENT	5
PART III			

## EXPLANATION

PROVIDE FINANCIAL SUPPORT TO ORGANIZATIONS WORKING FOR PROGRESSIVE SOCIAL CHANGE IN THE GREATER PHILADELPHIA, PENNSYLVANIA AND CAMDEN AREAS.

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 6

DESCRIPTION OF PROGRAM SERVICE ONE

GRANTS AND SCHOLARSHIPS

GRANTS TO ORGANIZATIONS WHICH ADVOCATE PROGRESSIVE SOCIAL CHANGE AND SCHOLARSHIPS TO QUALIFIED INDIVIDUALS

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE A	347,322.	420,753.

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 7

DESCRIPTION OF PROGRAM SERVICE TWO

PROGRAM AND EDUCATION

PROGRAMS AND EDUCATION FOR VARIOUS SOCIAL CHANGE CAUSES INCLUDING AIDS AND HEALTH, ARTS, COMMUNITY ORGANIZING, HUMAN RIGHTS AND CIVIL LIBERTIES, LESBIAN AND GAY RIGHTS, WOMENS RIGHTS, WORKERS RIGHTS, AND YOUTH EMPOWERMENT

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE B	0.	239,362.

FORM 990 CASH GRANTS AND ALLOCATIONS STATEMENT 8

CLASSIFICATION	DONEE'S NAME	DONEE'S ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
VARIOUS	SEE SCHEDULE ATTACHED	SEE ATTACHED SCHEDULE	NONE	347,322.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22				347,322.

FORM 990	NON-GOVERNMENT SECURITIES			STATEMENT	9
SECURITY DESCRIPTION	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	OTHER SECURITIES	TOTAL NON-GOV'T SECURITIES
MARKETABLE EQUITY SECURITIES	640,035.				640,035.
MUTUAL FUNDS			30,944.		30,944.
CASH EQUIVALENTS (NOT AVAILABLE FOR OPERATING			292,985.		292,985.
TO 990, LN 54 COL B	640,035.		323,929.		963,964.

FORM 990	GOVERNMENT SECURITIES		STATEMENT	10
DESCRIPTION	U.S. GOVERNMENT	STATE AND LOCAL GOV'T	TOTAL GOV'T SECURITIES	
US GOVERNMENT AND AGENCY NOTES	380,408.		380,408.	
TOTAL TO FORM 990, LINE 54, COL B	380,408.		380,408.	

FORM 990	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT		STATEMENT	11
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE	
FUUL DEPRECIATED ASSETS	5,517.	5,517.	0.	
COMPUTER EQUIPMENT	871.	871.	0.	
COMPUTER	2,313.	2,313.	0.	
COMPUTER SOFTWARE/HARDWARE	2,790.	2,790.	0.	
VAIL COMMUNICATION	2,354.	2,354.	0.	
MINOLTA COPIER	10,574.	10,574.	0.	
COMPUTER (95/96)	1,933.	1,933.	0.	
COMPUTER SOFTWARE (95/96)	2,705.	2,705.	0.	
OFFICE FURNITURE (95/96)	496.	496.	0.	
DITTO MACHINE (96/97)	269.	269.	0.	
17" COMPUTER MONITOR (96/97)	374.	374.	0.	
3 COMPUTERS (96/97)	2,805.	2,805.	0.	
COMPUTER EQUIPMENT (99/00)	7,020.	3,510.	3,510.	
OFFICE FURNITURE (00/01)	877.	263.	614.	
COMPUTER UPGRADE (00/01)	1,065.	320.	745.	

BREAD AND ROSES COMMUNITY FUND

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GRANT SOFTWARE UPGRADE (00/01)	1,510.	453.	1,057.
VOICEMAIL SYSTEM (00/01)	4,328.	1,299.	3,029.
COMPUTER MAINTENANCE AGREEMENT (00/01)	795.	397.	398.
MODEM CONFIGURATION (00/01)	540.	162.	378.
COPIER (00/01)	7,794.	2,338.	5,456.
OFFICE RENOVATIONS (00/01)	3,200.	960.	2,240.
<b>TOTAL TO FORM 990, PART IV, LN 57</b>	<b>60,130.</b>	<b>42,703.</b>	<b>17,427.</b>

FORM 990 OTHER REVENUE NOT INCLUDED ON FORM 990 STATEMENT 12

DESCRIPTION	AMOUNT
RETURN OF CAPITAL ON VENTURES LIMITED PARTNERSHIP	14,402.
<b>TOTAL TO FORM 990, PART IV-A</b>	<b>14,402.</b>

FORM 990 PART V - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES STATEMENT 13

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN-SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
MOLLY FRANTZ 5 HAWS LANE FLOURTOWN, PA 19031	PRESIDENT 3.5 HRS/WK	0.	0.	0.
ANGIE PABON 776 NORTH 25TH STREET PHILADELPHIA, PA, 19130	VICE PRESIDENT 3.5 HRS/WK	0.	0.	0.
ADINA ABRAMOWITZ 620 CHESTNUT STREET, ROOM 572 PHILADELPHIA, PA 19106	TREASURER 3.5 HRS/WK	0.	0.	0.
CYNTHIA FOWLER 1100 SOUTH BROAD STREET, 712C PHILADELPHIA, PA 19146	SECRETARY 3.5 HRS/WK	0.	0.	0.
CHRISTIE BALK C/O BREAD & ROSES COMMUNITY FUND 1500 WALNUT STREET PHILADELPHIA, PA 19102	EXECUTIVE DIRECTOR 40 HRS/WK	54,813.	5,499.	0.

BREAD AND ROSES COMMUNITY FUND

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RICHARD BARON 728 DAVIDSON ROAD PHILADELPHIA, PA 19118	BOARD MEMBER 1.5 HRS/WK	0.	0.	0.
CATHY COATE 1424 SOUTH BROAD STREET PHILADELPHIA, PA 19146	BOARD MEMBER 1.5 HRS/WK	0.	0.	0.
DEBBIE FREEDMAN 1424 CHESTNUT STREET PHILADELPHIA, PA 19102	BOARD MEMBER 1.5 HRS/WK	0.	0.	0.
GREG JONES 7002 WISSAHICKON AVE PHILADELPHIA, PA 19119	BOARD MEMBER 1.5 HRS/WK	0.	0.	0.
RUE LANDAU 740 MILDRED STREET PHILADELPHIA, PA 19147	BOARD MEMBER 1.5 HRS/WK	0.	0.	0.
JERI NUTTER 1110 RIDGE AVENUE PHILADELPHIA, PA 19123	BOARD MEMBER 1.5 HRS/WK	0.	0.	0.
ALLYSON RANDOLPH 620 CHESTNUT STREET, ROOM 572 PHILADELPHIA, PA 19106	BOARD MEMBER 1.5 HRS/WK	0.	0.	0.
AISSIA RICHARDSON 2227 NORTH BROAD STREET PHILADELPHIA, PA 19132	BOARD MEMBER 1.5 HRS/WK	0.	0.	0.
TERRY RUMSEY 240 SOUTH RIDLEY CREEK ROAD MEDIA, PA 19063	BOARD MEMBER 1.5 HRS/WK	0.	0.	0.
ELLEN SOMEKOWA 913 ARCH STREET PHILADELPHIA, PA 19107	BOARD MEMBER 1.5 HRS/WK	0.	0.	0.
WAYNE WYNN 1845 WALNUT STREET PHILADELPHIA, PA 19103	BOARD MEMBER 1.5 HRS/WK	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V		54,813.	5,499.	0.

SCHEDULE A STATEMENT REGARDING ACTIVITIES WITH SUBSTANTIAL CONTRIBUTORS, TRUSTEES, DIRECTORS, CREATORS, KEY EMPLOYEES, ETC., PART III, LINE 2 STATEMENT 14

COMPENSATION FOR EXECUTIVE DIRECTOR

SCHEDULE A EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS PART III, LINE 3 STATEMENT 15

GRANT DECISIONS AT BREAD AND ROSES ARE REACHED AFTER FOLLOWING A PREORDAINED PROCESS. THAT PROCESS INCLUDES:

- COMPLETION OF AN APPLICATION
- INITIAL SCREENING BY THE COMMUNITY FUNDING BOARD - A GROUP COMPRISED OF COMMUNITY AND NEIGHBORHOOD ACTIVISTS
- INTERVIEWS WITH STAFF AND COMMUNITY FUNDING BOARD MEMBERS
- A FINAL REVIEW BY THE COMMUNITY FUNDING BOARD AND APPROVAL BY THE BOARD OF DIRECTORS

IN ADDITION, APPLYING ORGANIZATIONS MUST PRESENT PROOF OF THEIR TAD-EXEMPT STATUS OR EVIDENCE THAT THEY HAVE A FISCAL SPONSOR WHO HAS SUCH STATUS. ORGANIZATIONS WHO ARE NOT TAX-EXEMPT OR DO NOT HAVE A TAX-EXEMPT FISCAL SPONSOR MUST PROVIDE EVIDENCE THAT THE GRANT MONIES WILL BE USED FOR A TAX-EXEMPT PURPOSE. ALL GRANTEES ARE REQUIRED TO COMPLETE AND FILE A GRANTEE "FISCAL AND PROGRESS REPORT" WHEN THE GRANT MONIES HAVE BEEN SPENT OR SIX MONTHS AFTER RECEIPT OF THE GRANT, WHICHEVER IS SOONER. A SMALL NUMBER OF EMERGENCY AND DONOR-ADVISED GRANTS ARE ALSO DISBURSED. WHILE THE SAME TAX-EXEMPT EVIDENCE IS REQUIRED, THE REVIEW PROCESS IS SOMEWHAT DIFFERENT. A GRANTS COMMITTEE OF THE BOARD, WHICH INCLUDES AT LEAST ONE MEMBER OF EACH OF THE FOLLOWING GROUPS; STAFF, COMMUNITY FUNDING BOARD AND BOARD OF DIRECTORS. THE BOARD OF DIRECTORS THEN REVIEW THE GRANT'S COMMITTEE'S RECOMMENDATIONS AND MAKES A FINAL DECISION.

SCHEDULE A OTHER INCOME STATEMENT 16

DESCRIPTION	2000 AMOUNT	1999 AMOUNT	1998 AMOUNT	1997 AMOUNT
MISCELLANEOUS	16,304.	3,911.	5,950.	0.
TOTAL TO SCHEDULE A, LINE 22	16,304.	3,911.	5,950.	0.

**Depreciation and Amortization**  
(Including Information on Listed Property) **990**

**2001**

Attachment  
Sequence No. **67**

▶ See separate instructions ▶ Attach to your tax return

Name(s) shown on return

Business or activity to which this form relates

Identifying number

**BREAD AND ROSES COMMUNITY FUND**

**FORM 990 PAGE 2**

**23-2047297**

**Part I Election To Expense Certain Tangible Property Under Section 179 Note** If you have any listed property, complete Part V before you complete Part I

1	Maximum amount See instructions for a higher limit for certain businesses	1	24,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	\$200,000
4	Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property Enter amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2000 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2002 Add lines 9 and 10, less line 12	13	

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 certain property (other than listed property) acquired after September 10, 2001 (see instructions)	14	
15	Property subject to section 168(f)(1) election (see instructions)	15	
16	Other depreciation (including ACRS) (see instructions)	16	5,610.

**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 2001	17	
18	If you are electing under section 168(f)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

**Section B - Assets Placed in Service During 2001 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3 year property						
b 5 year property						
c 7 year property						
d 10-year property						
e 15 year property						
f 20-year property						
g 25 year property			25 yrs		S/L	
h Residential rental property	/		27.5 yrs	MM	S/L	
	/		27.5 yrs	MM	S/L	
i Nonresidential real property	/		39 yrs	MM	S/L	
	/			MM	S/L	

**Section C - Assets Placed in Service During 2001 Tax Year Using the Alternative Depreciation System**

20a Class life					S/L	
b 12 year			12 yrs		S/L	
c 40-year	/		40 yrs	MM	S/L	

**Part IV Summary (See instructions)**

21	Listed property Enter amount from line 28	21	
22	Total Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations see instr	22	5,610.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

**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

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost
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**25** Special depreciation allowance for listed property acquired after September 10, 2001, and used more than 50% in a qualified business use 25

**26** Property used more than 50% in a qualified business use

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
		%						
		%						
		%						

**27** Property used 50% or less in a qualified business use

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
		%				S/L		
		%				S/L		
		%				S/L		

**28** Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28

**29** Add amounts in column (i), line 26 Enter here and on line 7, page 1 29

**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.

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
<b>30</b> Total business/investment miles driven during the year (do not include commuting miles)												
<b>31</b> Total commuting miles driven during the year												
<b>32</b> Total other personal (noncommuting) miles driven												
<b>33</b> Total miles driven during the year Add lines 30 through 32												
<b>34</b> Was the vehicle available for personal use during off-duty hours?												
<b>35</b> Was the vehicle used primarily by a more than 5% owner or related person?												
<b>36</b> Is another vehicle available for personal use?												

**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

	Yes	No
<b>37</b> Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
<b>38</b> 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		
<b>39</b> Do you treat all use of vehicles by employees as personal use?		
<b>40</b> 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?		
<b>41</b> Do you meet the requirements concerning qualified automobile demonstration use? <b>Note</b> If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles		

**Part VI** **Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
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**42** Amortization of costs that begins during your 2001 tax year

(a)	(b)	(c)	(d)	(e)	(f)

**43** Amortization of costs that began before your 2001 tax year 43 265.

**44** Total. Add amounts in column (f). See instructions for where to report 44 265.



Receipient	Total	Address
A J Muste Memorial Instt	12,000	339 Lafayette Street, New York, New York 10012
Advocate Community Development Corp	500	1808 W Diamond, Philadelphia, PA 19121
American Institute for Social Justice	5,000	739 south 8th Street SE, Washington, DC 20003
American Friends Service	1,500	1501 Cherry Street, Philadelphia, PA 19102
Arab American CDC	47,414	1501 Germantown Avenue, Philadelphia, PA 19122
Asian Arts Institute	4,500	1315 Cherry Street, Philadelphia, PA 19104
Benjamin Wyskida/Goddard College	5,000	345 S 13th Street, 2F, Philadelphia, PA 19107
Black United Fund of Pennsylvania	12,000	2227 N Broad Street, Philadelphia, PA 19132
CATA	6,000	4 South Delsea Drive, P O Box F, Glassboro, NJ 08028
Center for Creative Activities	10,158	635 N 5th Street, Philadelphia, PA 19102
Center for Responsible Fund	4,450	924 Cherry Street, Ste 400, Philadelphia, PA 19107
Centro Pedro Claver	4,000	3565 North 7th Street, Philadelphia, PA 19140
Christopher McCarthy/Univ of Pennsylvania	5,000	1720 Lombard Street, 505, Philadelphia, PA 19146
Clavery Center for Cultur	3,500	801 South 48th Street, Philadelphia, PA 19143
Clay Studio	1,000	139 N 2nd Street, Philadelphia, PA 19106
Clean Air Council	500	135 S 19th Street, Ste 300, Philadelphia, PA 19104
Clean Water Fund	5,000	1201 Chestnut Street, Ste 602, Philadelphia, PA 19107
Coatesville Cultural Society	3,500	139E Lincoln Highway, Coatesville, PA 19320
Community Assistance for Prisoner	5,000	2865 N Garnet Street, Philadelphia, PA 19132
Community Education Center	100	3500 Lancaster Avenue, Philadelphia, PA 19104
Community Women's Education Project	500	Frankford Ave & Somerset, Philadelphia, PA
Cultural Odyssey	500	P O Box 156680, San Francisco, CA 94102
Defender Association of Phila	6,000	1801 Vine Street, Philadelphia, PA 19103
Disabled in Action, Inc	5,000	125 South 9th Street, Ste 700, Philadelphia, PA 19107
Friends of Farm workers	5,000	924 Cherry Street, Philadelphia, PA 19107
Grands As Parents	3,000	2121 North Gratz Street, Philadelphia, PA 19103
Greater Friends	6,000	541 Swede Street, Norristown, PA 19401
Hospitality House, Inc	7,500	3224 N Front Street, Philadelphia, PA 19140
Int'l Institute for Theater Research	500	143 East Lincoln Highway, Coatesville, PA 19320
Jeffrey Conly/Temple Univ	5,000	52 N Highland Avenue, Lansdowne, PA 19050
Philadelphia Area Jobs with Justice	5,000	1319 Locust Street, Philadelphia, PA 19107
Josh Lieberman/Univ of the Arts	5,000	639 Fairfield Circle, Westfield, NJ 07090
Maysie' Farm Conservation Center	4,500	15 St Andrew's Lane, Glenmoore, PA 19343
Media Fellowship House	500	302 South Jackson Street, Media, PA 19063
Mental Health Association of SEPA	3,000	1211 Chestnut Street, Philadelphia, PA 19107
Michael Everett/Penn State Abington	5,000	1320 folkrod Street, Apt 3A, Philadelphia, PA 19124
Michael Pollak/Univ of Pennsylvania	5,000	3333 Walnut Street, Box 481, Philadelphia, PA 19104
Mobilization Against AIDs International	6,000	584-B Castro Street, San Francisco, CA 94114
Moonstone, Inc	3,500	108 South 13th Street, Philadelphia, PA 19107
Mountain Meadow Country Expenence	3,000	7042 Greene Street, Philadelphia, PA 19119
National Clearinghouse for the Defensed of Battered Woman	6,500	125 South 9th Street, Philadelphia, PA 19107
New Jerusalem Laura	3,000	2011 West Norris Street, Philadelphia, PA 19121
New Liberty Productions	3,000	3500 Lancaster Avenue, Philadelphia, PA 19104
New Society Educational Foundation	12,750	P O Box 30947, Philadelphia, PA 19104
NJ Association on Correction	3,500	986 S Broad Street, Trenton, NJ 08611
Norris Square Neighborhood Project	500	2141 N Howard Street, Philadelphia, PA 19122
North Camden Land Trust	4,000	539 State Street, Camden, NJ 08102
PA Capital Representation Project	2,000	Independence Sq West, Ste 545, Philadelphia, PA 19106
PA NOW Education Fund	500	P O Box 33359, Philadelphia, PA 19142
Pennsylvania Institutional Law Project	3,000	924 Cherry Street, Philadelphia, PA 19107
Pennsylvania Prison Society	2,000	2000 Spring Garden Street, Philadelphia, PA 19130
People's Rights Fund	500	39 West 14th Street, Ste 206, New York, NY 10011
Phila Young Playwrites Festival	200	7 Ben Franklin Parkway, 2nd Floor, Philadelphia, PA 19103
Phila Citizens for Children and Youth	500	7 Ben Franklin Parkway, 2nd Floor, Philadelphia, PA 19103
Philadelphia FIGHT	8,900	1233 Locust Street, Philadelphia, PA 19107
Philadelphia Public School Notebook	100	3721 Midvale Avenue, Philadelphia, PA 19129
Philadelphia Unemployment Project	3,000	1201 Chestnut Street, Philadelphia, PA 19107

Philip Cochetti/Univ of Pennsylvania	20,000	122 E Congestoga Road, Devon, PA 19333
Reconstruction Inc	5,000	P O Box 7691, Philadelphia, PA 19101
Research for Action	500	3701 Chestnut Street, Philadelphia, PA 19104
Resource of Human Development	6,000	4333 Kelly Drive, Philadelphia, PA 19129
San Carlos Educational Foundation	5,000	1065 Creston Road, Berkeley, CA 94708
Scnbe Video Center	5,000	1342 Cypress Street, Philadelphia, PA 19107
Self Education Foundation	3,750	4530 Balitmore Avenue, Philadelphia, PA 19104
Spiral Q Puppet Theatre	6,500	3114 Sprng Garden Street, Philadelphia, PA 19104
Streetside Stores	500	1095 Market Street, Ste 207, San Francisco, CA 94103
Swarthmore College	500	500 College Avenue, Swarthmore, PA 19081
Taller Puertorriqueno	1,500	2721 N 6th Street, Philadelphia, PA 19133
The Attc Youth Center	500	419 S 15th Street, Philadelphia, PA 19146
The MOVE Organization	500	P O Box 19709, Philadelphia, PA 19143
Thomas Kane/ Temple Univ	5,000	519 Quigley Ave, Willow Grove, PA 19090
Wages for Housework Campaign	500	33 Maplwd Avenue, Philadelphia, PA 19144
WE of Delaware County	3,000	2115 madison Street, Chester, PA 19013
Women Make Movies, Inc	7,000	462 Broadway, 5th floor, New York, NY 10013
Women's Anti-Violence Education	3,500	1315 Cherry Street, Philadelphia, PA 19104
Women's Development Institute Int'l	500	460 Mallard Circle, Blue Bell, PA 10422
Women's Way	2,500	1233 Locust Street, Philadelohia, PA 19107
WYBE	500	8200 Ridge Avenue, Philadelphia, PA 19128
<b>Total</b>	<b>347,322</b>	

## Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

▶ File a separate application for each return

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ▶
  - If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)
- Note** Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

**Part I Automatic 3-Month Extension of Time** - Only submit original (no copies needed)

**Note** Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only ▶   
All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041

<b>Type or print</b>	Name of Exempt Organization <b>BREAD AND ROSES COMMUNITY FUND</b>	Employer identification number <b>23-2047297</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P O box, see instructions <b>1500 WALNUT STREET, NO. 1305</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions <b>PHILADELPHIA, PA 19102</b>	

**Check type of return to be filed** (file a separate application for each return)

- |  |  |                                    |
|--|--|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990 BL         | <input type="checkbox"/> Form 990-T (sec 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990 EZ         | <input type="checkbox"/> Form 990 T (trust other than above)     | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990 PF         | <input type="checkbox"/> Form 1041 A                             | <input type="checkbox"/> Form 8870 |

- 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 will cover

**1** I request an automatic 3-month (6-month, for **990-T corporation**) extension of time until **FEBRUARY 18, 2003** to file the exempt organization return for the organization named above. The extension is for the organization's return for  
▶  calendar year \_\_\_\_\_ or  
▶  tax year beginning **JUL 1, 2001**, and ending **JUN 30, 2002**

**2** If this tax year is for less than 12 months, check reason  Initial return  Final return  Change in accounting period

**3a** If this application is for Form 990-BL, 990-PF, 990 T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ \_\_\_\_\_

**b** If this application is for Form 990 PF or 990 T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit \$ \_\_\_\_\_

**c Balance Due** Subtract line 3b from line 3a. 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 ▶ *Marianne Mck* Title ▶ CPA Date ▶ 11/7/02  
LHA For Paperwork Reduction Act Notice, see instruction Form 8868 (12-2000)