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Return of Organization Exempt From Income Tax

2002

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2002 calendar year, or tax year beginning **2002**, and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization PUBLIC POLICY AND EDUCATION FUND OF NEW YORK, INC	D Employer identification number 13-3364209
	Please use IRS label or print or type. See Specific Instructions Number and street (or P O box if mail is not delivered to street address) Room/suite 94 CENTRAL AVENUE	E Telephone number 518 465-4600
	City or town, state or country, and ZIP + 4 ALBANY, NY 12206	F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual Other (specify)

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

H and I are not applicable to section 527 organizations

G Web site

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

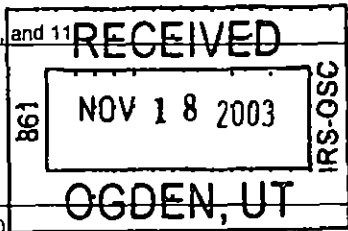
K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS but if the organization received a Form 990 Package in the mail it should file a return without financial data. Some states require a complete return.

L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 **1,628,280**

H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes" enter number of affiliates
H(c) Are all affiliates included? (If "No" attach a list. See instructions.) Yes No
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Enter 4-digit GEN
M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 17 of the instructions)

Revenue	1	Contributions, gifts, grants, and similar amounts received				
	a	Direct public support	1a	1,557,903		
	b	Indirect public support	1b			
	c	Government contributions (grants)	1c	47,000		
	d	Total (add lines 1a through 1c) (cash \$ noncash \$)	1d		1,604,903	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2			
	3	Membership dues and assessments	3			
	4	Interest on savings and temporary cash investments	4		6,077	
	5	Dividends and interest from securities	5			
	6a	Gross rents	6a	17,300		
	b	Less rental expenses	6b			
	c	Net rental income or (loss) (subtract line 6b from line 6a)	6c		17,300	
7	Other investment income (describe)	7				
Revenue	8a	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other		
	b	Less cost or other basis and sales expenses	8a			
	c	Gain or (loss) (attach schedule)	8b			
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8c			
Revenue	9	Special events and activities (attach schedule)				
	a	Gross revenue (not including \$ of contributions reported on line 1a)	9a			
	b	Less direct expenses other than fundraising expenses	9b			
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c				
Revenue	10a	Gross sales of inventory, less returns and allowances	10a			
	b	Less cost of goods sold	10b			
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
11	Other revenue (from Part VII, line 103)	11				
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12			1,628,280	
Expenses	13	Program services (from line 44, column (B))	13		1,485,557	
	14	Management and general (from line 44, column (C))	14		106,805	
	15	Fundraising (from line 44, column (D))	15		20,036	
	16	Payments to affiliates (attach schedule)	16			
	17	Total expenses (add lines 16 and 44 column (A))	17		1,612,398	
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18		15,882	
	19	Net assets or fund balances at beginning of year (from line 73 column (A))	19		137,453	
	20	Other changes in net assets or fund balances (attach explanation)	20		-44,040	
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		109,295	



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Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 21 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)	22			
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc	25			
26	Other salaries and wages	26			
27	Pension plan contributions	27			
28	Other employee benefits	28			
29	Payroll taxes	29			
30	Professional fundraising fees	30			
31	Accounting fees	31			
32	Legal fees	32			
33	Supplies	33			
34	Telephone	34			
35	Postage and shipping	35			
36	Occupancy	36			
37	Equipment rental and maintenance	37			
38	Printing and publications	38			
39	Travel	39			
40	Conferences, conventions, and meetings	40			
41	Interest	41			
42	Depreciation depletion etc (attach schedule)	42			
43	Other expenses not covered above (itemize) a _____	43a			
	b per schedule attached	43b	1,612,398	1,485,557	106,805
	c _____	43c			
	d _____	43d			
	e _____	43e			
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	1,612,398	1,485,557	106,805

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

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

What is the organization's primary exempt purpose? <u>see below</u>	Program Service Expenses (Required for 501(c)(3) and (4) orgs and 4947(a)(1) trusts but optional for others)
a <u>Research & public education on issues impacting New York State including health care issues, environmental concerns, affordable housing, economic development, children's health, school, education issues, fiscal policies and campaign finance reform</u> (Grants and allocations \$ _____)	1,485,557
b _____ _____ (Grants and allocations \$ _____)	
c _____ _____ (Grants and allocations \$ _____)	
d _____ _____ (Grants and allocations \$ _____)	
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	1,485,557

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

Note Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		(A) Beginning of year		(B) End of year
45	Cash - non-interest-bearing	102,109	45	198,432
46	Savings and temporary cash investments		46	
47a	Accounts receivable		47a	
b	Less allowance for doubtful accounts		47b	
			47c	
48a	Pledges receivable		48a	
b	Less allowance for doubtful accounts		48b	
			48c	
49	Grants receivable	241,038	49	649,605
50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
51a	Other notes and loans receivable (attach schedule)		51a	
b	Less allowance for doubtful accounts		51b	
			51c	
52	Inventories for sale or use		52	
53	Prepaid expenses and deferred charges	475	53	1,200
54	Investments - securities (attach schedule) <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	83,760	54	60,383
55a	Investments - land, buildings, and equipment basis		55a	
b	Less accumulated depreciation (attach schedule)		55b	
			55c	
56	Investments - other (attach schedule)		56	
57a	Land, buildings, and equipment basis	167,869	57a	
b	Less accumulated depreciation (attach schedule)	74,433	57b	
		96,964	57c	93,436
58	Other assets (describe <input checked="" type="checkbox"/> Due from related party)	157,977	58	217,044
59	Total assets (add lines 45 through 58) (must equal line 74)	682,323	59	1,220,100
60	Accounts payable and accrued expenses	1,871	60	
61	Grants payable		61	
62	Deferred revenue	494,954	62	975,273
63	Loans from officers, directors, trustees, and key employees (attach schedule)		63	
64a	Tax-exempt bond liabilities (attach schedule)		64a	
b	Mortgages and other notes payable (attach schedule)	46,603	64b	135,532
65	Other liabilities (describe <input checked="" type="checkbox"/> lease payable)	1,442	65	
66	Total liabilities (add lines 60 through 65)	544,870	66	1,110,805
67	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74		67	
68	Unrestricted	137,453	68	109,295
69	Temporarily restricted		69	
70	Permanently restricted		70	
71	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74		71	
72	Capital stock, trust principal, or current funds		72	
73	Paid-in or capital surplus, or land, building, and equipment fund		73	
74	Retained earnings, endowment, accumulated income, or other funds		74	
75	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)	137,453	75	109,295
76	Total liabilities and net assets / fund balances (add lines 66 and 73)	682,323	76	1,220,100

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 (See page 26 of the instructions)

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	a	1,628,280
b Amounts included on line a but not on line 12, Form 990		
(1) Net unrealized gains on investments \$		
(2) Donated services and use of facilities \$		
(3) Recoveries of prior year grants \$		
(4) Other (specify)		
Add amounts on lines (1) through (4)	b	
c Line a minus line b	c	1,628,280
d Amounts included on line 12, Form 990 but not on line a		
(1) Investment expenses not included on line 6b, Form 990 \$		
(2) Other (specify)		
Add amounts on lines (1) and (2)	d	
e Total revenue per line 12, Form 990 (line c plus line d)	e	1,628,280

a Total expenses and losses per audited financial statements	a	1,612,398
b Amounts included on line a but not on line 17, Form 990		
(1) Donated services and use of facilities \$		
(2) Prior year adjustments reported on line 20 Form 990 \$		
(3) Losses reported on line 20, Form 990 \$		
(4) Other (specify)		
Add amounts on lines (1) through (4)	b	
c Line a minus line b	c	1,612,398
d Amounts included on line 17, Form 990 but not on line a		
(1) Investment expenses not included on line 6b, Form 990 \$		
(2) Other (specify)		
Add amounts on lines (1) and (2)	d	
e Total expenses per line 17, Form 990 (line c plus line d)	e	1,612,398

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see page 26 of the instructions)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Per list attached all volunteer board		0	0	0

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? Yes No
If "Yes," attach schedule - see page 26 of the instructions

JSA
2E1040 1 000

Part VI Other Information (See page 27 of the instructions)

Yes No

76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity 76 x

77 Were any changes made in the organizing or governing documents but not reported to the IRS? 77 x
If "Yes," attach a conformed copy of the changes

78 a Did the organization have unrelated business gross income of \$1 000 or more during the year covered by this return? 78a x
b If "Yes," has it filed a tax return on Form 990-T for this year? 78b

79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes " attach a statement 79 x

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? 80a x
b If "Yes " enter the name of the organization Citizen Action of NY 501 (c) (4)
and check whether it is exempt or nonexempt

81 a Enter direct or indirect political expenditures See line 81 instructions 81a 0
b Did the organization file Form 1120-POL for this year? 81b x

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? 82a x
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) 82b

83 a Did the organization comply with the public inspection requirements for returns and exemption applications? 83a x
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions? 83b x

84 a Did the organization solicit any contributions or gifts that were not tax deductible? 84a x
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 84b

85 501(c)(4), (5) or (6) organizations a Were substantially all dues nondeductible by members? 85a
b Did the organization make only in-house lobbying expenditures of \$2 000 or less? 85b
If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year

c Dues, assessments, and similar amounts from members 85c
d Section 162(e) lobbying and political expenditures 85d
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e
f Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? 85g
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? 85h

86 501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12 86a
b Gross receipts, included on line 12, for public use of club facilities 86b

87 501(c)(12) orgs Enter a Gross income from members or shareholders 87a
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 87b

88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes " complete Part IX 88 x

89 a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 0 , section 4912 0 section 4955 0 89a 0
b 501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction 89b x
c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912 4955, and 4958 0
d Enter Amount of tax on line 89c, above, reimbursed by the organization 0

90 a List the states with which a copy of this return is filed New York 90a
b Number of employees employed in the pay period that includes March 12, 2002 (See instructions) 90b

91 The books are in care of Public Policy and Education Fund of NY Telephone no 518 465-4600
Located at 94 Central Avenue, Albany NY ZIP + 4 12206

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 0

Part VII Analysis of Income-Producing Activities (See page 31 of the instructions)

Note Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a _____					
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	6,077	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property			16	17,300	
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					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))				23,377	
105 Total (add line 104, columns (B), (D), and (E))					23,377

Note Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 32 of the instructions)

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

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

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

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

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

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

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

Please Sign Here

Signature of officer: Karen Schmitt Date: 11/12/03
 Type or print name and title: Karen Schmitt Executive Director

Paid Preparer's Use Only

Preparer's signature: George R Kaminski Date: 11/10/03 Check if self-employed: Preparer's SSN or PTIN (See Gen. Inst. V): 071-48-8596
 Firm's name (or yours if self-employed): George R Kaminski CPA EIN: 14-1721118
 address and ZIP + 4: 11 Computer Drive West Albany, NY 12205 Phone no: (518) 435-1452

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information - (See separate instructions.)

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

OMB No 1545-0047

2002

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer Identification number

PUBLIC POLICY AND EDUCATION FUND OF NEW YORK, INC

13-3364209

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
Richard Kirsch Spencertown, NY	Exec Dir	54,635	2,732	0
Karen Scharff Hannacroix, NY	Prog Mgmt	53,100	2,655	0
Regina M Eaton Albany, NY	Prog Mgmt	55,266	0	0
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
<p>1 During the year has the organization attempted to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes" enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ <u>63,817</u> (Must equal amounts on line 38, Part VI-A or line I or Part VI-B)</p> <p>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</p>	1	x
<p>2 During the year has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors trustees, directors, officers creators key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer director, trustee majority owner or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)</p>		
<p>a Sale, exchange, or leasing of property?</p>	2a	x
<p>b Lending of money or other extension of credit?</p>	2b	x
<p>c Furnishing of goods services, or facilities?</p>	2c	x
<p>d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?</p>	2d	x
<p>e Transfer of any part of its income or assets?</p>	2e	x
<p>3 Does the organization make grants for scholarships, fellowships, student loans, etc ? (See Note below)</p>	3	x
<p>4 Do you have a section 403(b) annuity plan for your employees?</p>	4	x
<p>Note 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</p>		

Part IV Reason for Non-Private Foundation Status (See pages 3 through 5 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)(v) (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 5 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) *Use cash method of accounting*

Note You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year, (or fiscal year beginning in)	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28)	1,429,201	1,075,427	578,436	567,860	3,650,924
16 Membership fees received					
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					
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	20,333	24,864	23,315	13,748	82,260
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
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.					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.					
23 Total of lines 15 through 22	1,449,534	1,100,291	601,751	581,608	3,733,184
24 Line 23 minus line 17	1,449,534	1,100,291	601,751	581,608	3,733,184
25 Enter 1% of line 23	14,495.34	11,002.91	6,017.51	5,816.08	
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24				26a 74,663.68
	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 1998 through 2001 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts.				26b 103,620
	c Total support for section 509(a)(1) test. Enter line 24, column (e).				26c 3,733,184
	d Add: Amounts from column (e) for lines 18 <u>82,260</u> 19 _____ 22 _____ 26b <u>103,620</u>				26d 185,880
	e Public support (line 26c minus line 26d total)				26e 3,547,304
	f Public support percentage (line 26e (numerator) divided by line 26c (denominator))				26f 95.0209%
27 Organizations described on line 12	a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2001) _____ (2000) _____ (1999) _____ (1998) _____				
	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: (2001) _____ (2000) _____ (1999) _____ (1998) _____				
	c Add: Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____				27c _____
	d Add: Line 27a total _____ and line 27b total _____				27d _____
	e Public support (line 27c total minus line 27d total)				27e _____
	f Total support for section 509(a)(2) test. Enter amount from line 23, column (e).				27f _____
	g Public support percentage (line 27e (numerator) divided by line 27f (denominator))				27g 0.0000%
	h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))				27h 0.0000%

28 Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Part V Private School Questionnaire (See page 7 of the instructions)
(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?	29	
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?	30	
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)	31	

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?	32d	
If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)		

33 Does the organization discriminate by race in any way with respect to		
a Students' rights or privileges?	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?	33h	
If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)		

34a Does the organization receive any financial aid or assistance from a governmental agency?	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)

(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

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred)

	(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	54,889
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38 Total lobbying expenditures (add lines 36 and 37)	38	54,889
39 Other exempt purpose expenditures	39	1,557,509
40 Total exempt purpose expenditures (add lines 38 and 39)	40	1,612,398
41 Lobbying nontaxable amount Enter the amount from the following table - If the amount on line 40 is - The lobbying nontaxable amount is - Not over \$500,000 20% of the amount on line 40 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	41	230,620
42 Grassroots nontaxable amount (enter 25% of line 41)	42	57,655
43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	0
44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	

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				
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
45 Lobbying nontaxable amount	230,620	214,674	179,698		624,992
46 Lobbying ceiling amount (150% of line 45(e))					937,488
47 Total lobbying expenditures	54,889	47,501	39,367		150,685
48 Grassroots nontaxable amount	54,889	47,501	36,480		147,798
49 Grassroots ceiling amount (150% of line 48(e))					221,697
50 Grassroots lobbying expenditures	54,889	47,501	36,480		147,798

Part VI-B Lobbying Activity by Nonelecting Public Charities

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

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	Yes	No	Amount
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)			

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. 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.

	Yes	No
51a(i)		x
a(ii)		x
b(i)		x
b(ii)		x
b(iii)		x
b(iv)		x
b(v)		x
b(vi)		x
c	x	

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
51c		Citizen Action of NY Exempt under 501(c)(4)	Common use of office building, lease equipment, some personnel

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
Citizen Action of NY, Inc	Exempt under 501(c)(4)	Shared use of office, personnel office expenses

Public Policy and Education Fund of New York, Inc.

Federal ID # 13-3364209 For the Fiscal Year Ended December 31, 2002

Form 990

Part I, Line 1a Direct Public Support

Contributions - General Programs	\$45,693
Special Events & Conferences	\$16,271
Non-government grants	\$1,495,258
Other Support Revenue	\$681
Total Direct Public Support	<u>\$1,557,903</u>

Part I, Line 1c Government Grants

Part II, Grants

Children's Defense Fund of New York	\$ 46,220
Citizens' Community of New York	\$ 46,326
Total Grants	<u>\$ 92,546</u>

Part II, Functional Expenses

Functional expenses are charged by direct cost to activity , or in some cases are allocated between Program Services, Management and General and Fund Raising based on time and effort of personnel and related costs for activity

Part IV, Line 54, Investments

(Total Contribution \$ 103,620 Form 990 Schedule Apart IV-A, Line 26b)

	<u>Beq. of Yr</u>	<u>End of Yr</u>
4000 shares of Presidential Life Corp stock received 12/27/01 & 2000 shares of Presidential Life Corp stock received 12/31/02	\$83,760	\$39,720 \$19,860
Money Market Account	\$0	\$803
	<u>\$83,760</u>	<u>\$60,383</u>

Part IV, Line 64b, Notes Payable

	<u>Beq. of Yr</u>	<u>End of Yr</u>
Key Bank	\$7,604	\$0
Key Bank Mortgage	\$38,999	\$35,532
Key Bank-Line of Credit	\$0	\$100,000
Total Notes Payable	<u>\$46,603</u>	<u>\$135,532</u>

Part I, Line 20 - Other changes in net assets or fund balances

Reduction of market value of donated stock held-unrealized loss	<u>\$ (44,040)</u>
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Part VI, Line 80b Related Organizations

Citizen Action of New York, Inc	Tax-exempt 501(c)(4)
Nexus Management Corporation, Inc	Nonexempt

PUBLIC POLICY AND EDUCATION FUND OF NEW YORK, INC
Schedule of Functional Expenses
Years Ended December 31, 2002 and 2001

Schedule 1

<u>Functional Expenses</u>		2002 Total Functional Expenses	2001 Total Functional Expenses
<u>Program Services Costs</u>	<u>Management & General Costs</u>	<u>Fund Raising & Development Costs</u>	
Personnel Costs	\$ 755,940	\$ 1,343	\$ 745,279
Fringe Benefits and Payroll Taxes	181,468	1,556	171,123
Consultants-programs	217,897	2,976	13,299
Communications	47,259	162	68,189
Travel	21,957	1,267	34,858
Printing/Design	5,632	247	14,343
Postage/Mailing	8,396	37	19,532
Rent, Utilities and Building Expenses	52,309	10,728	69,222
Equipment lease and maintenance	12,571	221	10,329
Supplies and expendable equipment	20,470	106	28,804
Data management and processing	10,864	103	11,257
Depreciation	-	14,907	15,809
Conference, training and meeting expense	54,982	2,036	35,432
Grants	92,946	-	70,000
Professional	-	6,675	10,090
Management fees	-	56,250	56,250
Interest	-	5,827	9,871
Bank fees	-	2,012	2,399
Other costs	2,866	352	10,654
	<u>\$ 1,485,557</u>	<u>\$ 20,036</u>	<u>\$ 1,396,740</u>
Totals	\$ 1,485,557	\$ 20,036	\$ 1,396,740
Totals-Prior Year	\$ 1,287,981	\$ 21,095	\$ 1,396,740

The accompanying notes are an integral part of these financial statements

Public Policy & Education Fund
of New York , Inc
FYE 12/31/02
Depreciation Summary

At 12/31/95	Cost	End Year 01		End Year 02	
		Accum Deprec	Deprec Exp 2002	Accum Deprec	
Prior Improvements	6,130 00	1,226 00		1,226 00	
Furniture and Fixtures	4,237 98	4,237 98	0	4,237 98	
Computer	1,578 93	1,578 93	-	1,578 93	
AC	388 00	388 00	-	388 00	
Remodeling	1,490 50	330 59	47 32	377 90	
	13,825 41	7,761 50	47 32	7,808.81	
<u>Additions 1996</u>					
Remodeling	1 125 00	413 00	75 00	488 00	
	1,125 00	413 00	75 00	488 00	
<u>Additions 1997</u>					
Remodeling	450 00	135 00	30 00	165 00	
Phone-Binghamton	1,400 00	1,260 00	140 00	1,400 00	
Equipment-Laptop	1,106 75	996 08	110 68	1,106 75	
Equipment-Various	1,583 14	1,424 83	158 31	1,583 14	
Capitalized Leased Computer E	8,555 00	7,699 50	855 50	8,555 00	
Capitalized Leased Telephone E	7,108 00	6,397 20	710 80	7,108 00	
Capitalized Leased Office Furnit	7,170 00	6,453 00	717 00	7,170 00	
	27,372 89	24,365 60	2,722 29	27,087 89	
<u>Additions 1998</u>					
Software	8,075 00	5,652 50	1,615 00	7,267 50	
Building	1/1/1998 67,019 00	8,510 35	2,127 59	10,637 94	
<u>Additions 1999</u>					
Building Furnace	4,749 00	791 50	316 60	1 108 10	
Office equipment	664 00	332 00	132 80	464 80	
Computer-NYC	2,008 00	1,004 00	401 60	1,405 60	
Computer System-Central Office	12,519 00	6,259 50	2,503 80	8,763 30	
	19,940 00	8,387 00	3,354 80	11,741.80	
<u>Additions 2000</u>					
Equipment	12,619 96	3,785 99	2,523 99	6,309 98	
	12,619 96	3,785 99	2,523 99	6,309 98	
<u>Additions 2001</u>					
Office Equipment	6,513 61	651 36	1,302 72	1,954 08	
<u>Additions 2002</u>					
	11,378 38		1,137 84	1,137 84	
Totals	167,869 25	59,527 30	14,906 55	74,433 84	

Public Policy and Education Fund of New York

94 Central Avenue
Albany, New York 12206
518-465-4600

BOARD OF DIRECTORS – 2002

Eileen Hamlin – Chair

Catherine Abate

Richard Aborn

Adrian Dewind

Barry Ford

Maurice Garner

Ellen Kennedy

Robert Master

Steve Max

• 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

• 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	Name of Exempt Organization	Employer identification number
	PUBLIC POLICY AND EDUCATION FUND OF NEW YORK, INC	13-3364209
File by the extended due date for filing the return See instructions	Number street and room or suite no. If a P.O. box, see instructions	For IRS use only
	94 CENTRAL AVENUE	
	City town or post office state and ZIP code For a foreign address see instructions	
	ALBANY, NY 12206	

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-EZ	<input type="checkbox"/> Form 990-T (sec 401(a) or 408(a) trust)	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 5227	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> 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 November 15, 2003

5 For calendar year 2002, or other tax year beginning _____ and ending _____

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 An additional extension is requested in order to accumulate data from thrid party funding sponsors and finalize accounting reports necessary to file a complete and accurate report

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 \$ _____ 0

b If this application is for Form 990-PF, 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 \$ _____ 0

c **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 \$ _____ 0

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 *George R. Kaminski* Title CPA Date July 18, 2003

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 a 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

Other _____

By _____ Director Date _____

Alternate Mailing Address - Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above

Type or print	Name	EXTENSION APPROVED AUG 07 2003
	George R Kaminski CPA	
	Number and street (include suite, room, or apt. no) Or a P.O. box number	
	11 Computer Drive West	
	City or town, province or state, and country (including postal or ZIP code)	
	Albany, NY 12205	LINDA: SUBV. SS.