

EXTENSION ATTACHED

Form 990

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

2003

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A For the 2003 calendar year, or tax year beginning 07/01, 2003, and ending 06/30/2004

- B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending

C Name of organization THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION. 1395 LEXINGTON AVENUE, NEW YORK, NY 10128

D Employer identification number 13-1624229. E Telephone number (212) 415-5497. F Accounting method: Cash, Accrual (checked)

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

H and I are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates? Yes [X] No. H(b) If "Yes," enter number of affiliates. H(c) Are all affiliates included? Yes [] No. H(d) Is this a separate return filed by an organization covered by a group ruling? Yes [] No. I Group Exemption Number. M Check [] if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

G Website: WWW.92NDSTY.ORG

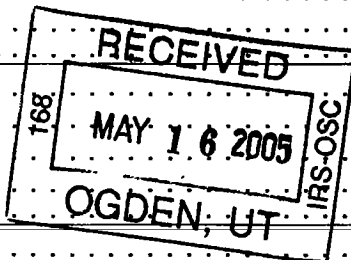
J Organization type (check only one) [X] 501(c)(3) [] 4947(a)(1) [] 527

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 97,812,474.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.)

Table with 21 rows and 4 columns: Description, Sub-description, Amount, Total. Rows include Contributions (1), Program service revenue (2), Membership dues (3), Interest on savings (4), Dividends (5), Gross rents (6a-6c), Other investment income (7), Gross amount from sales of assets (8a-8d), Special events (9a-9c), Gross sales of inventory (10a-10c), Other revenue (11), Total revenue (12), Expenses (13-17), Excess or deficit (18), Net assets (19-21).



Revenue

Expenses

Net Assets

SCANNED JUN 24 2005

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2003)

Handwritten note: 6-13-16 16

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 22 of the instructions.)

Table with 5 columns: Description, (A) Total, (B) Program services, (C) Management and general, (D) Fundraising. Rows include Grants and allocations, Specific assistance, Compensation of officers, etc., and 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

Part III Statement of Program Service Accomplishments (See page 25 of the instructions.)

Table with 2 columns: Description, Program Service Expenses. Rows include SEE STATEMENTS 32-34, Other program services, and Total of Program Service Expenses.

Part IV Balance Sheets (See page 25 of the instructions.)

		(A) Beginning of year		(B) End of year	
Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.					
Assets	45	Cash - non-interest-bearing	2,112,373.	45	1,326,087.
	46	Savings and temporary cash investments	7,847,152.	46	9,173,961.
	47a	Accounts receivable	481,384.		
	b	Less: allowance for doubtful accounts	NONE	47c	481,384.
	48a	Pledges receivable	8,906,136.		
	b	Less: allowance for doubtful accounts	773,948.	48c	8,132,188.
	49	Grants receivable		49	
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)	\$TMT. 30. 150,000.	50	NONE
	51a	Other notes and loans receivable (attach schedule)	\$TMT. 30. 93,832.		
	b	Less: allowance for doubtful accounts		51c	93,832.
	52	Inventories for sale or use		52	
	53	Prepaid expenses and deferred charges	91,109.	53	190,998.
	54	Investments - securities (attach schedule) STMT 5. <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	35,744,795.	54	40,168,030.
	Liabilities	55a	Investments - land, buildings, and equipment: basis		
b		Less: accumulated depreciation (attach schedule)		55c	
56		Investments - other (attach schedule)		56	
57a		Land, buildings, and equipment: basis	67,771,489.		
b		Less: accumulated depreciation (attach schedule)	\$TMT. 35 33,174,343.	57c	34,597,146.
58		Other assets (describe <input type="checkbox"/> STMT 6)	196,323.	58	119,532.
59		Total assets (add lines 45 through 58) (must equal line 74)	92,935,257.	59	94,283,158.
60		Accounts payable and accrued expenses	4,216,701.	60	3,512,440.
61		Grants payable		61	
62		Deferred revenue	7,246,595.	62	6,937,555.
Net Assets or Fund Balances	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)		64b	
	65	Other liabilities (describe <input type="checkbox"/> STMT 7)	149,399.	65	206,552.
	66	Total liabilities (add lines 60 through 65)	11,612,695.	66	10,656,547.
	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.				
	67	Unrestricted	39,075,152.	67	37,947,684.
68	Temporarily restricted	18,627,068.	68	20,948,991.	
69	Permanently restricted	23,620,342.	69	24,729,936.	
Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.					
70	Capital stock, trust principal, or current funds		70		
71	Paid-in or capital surplus, or land, building, and equipment fund		71		
72	Retained earnings, endowment, accumulated income, or other funds		72		
73	Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	81,322,562.	73	83,626,611.	
74	Total liabilities and net assets / fund balances (add lines 66 and 73)	92,935,257.	74	94,283,158.	

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 27 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	48,125,447.	a Total expenses and losses per audited financial statements ▶	a	45,821,398.
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 . . \$ 440,631.			(1) Donated services and use of facilities \$ 309,000.		
(2) Donated services and use of facilities \$ 309,000.			(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):		
\$			\$		
Add amounts on lines (1) through (4) ▶	b	749,631.	Add amounts on lines (1) through (4) . . ▶	b	309,000.
c Line a minus line b ▶	c	47,375,816.	c Line a minus line b ▶	c	45,512,398.
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):		
\$			\$		
STMT 8 \$ 1,168,706.			STMT 9 \$ 1,168,706.		
Add amounts on lines (1) and (2) . . ▶	d	1,168,706.	Add amounts on lines (1) and (2) . . ▶	d	1,168,706.
e Total revenue per line 12, Form 990 (line c plus line d) ▶	e	48,544,522.	e Total expenses per line 17, Form 990 (line c plus line d) ▶	e	46,681,104.

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see page 27 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
SEE STATEMENTS 10-25		608,392.	50,859.	NONE

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 28 of the instructions.

Part VI Other Information (See page 28 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
78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . 78a X
78b If "Yes," has it filed a tax return on Form 990-T for this year? . . . 78b N/A
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement . . . 79 X
80a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? . . . 80a X
80b If "Yes," enter the name of the organization THE PARTNERSHIP FOR JEWISH LIFE, INC. and check whether it is X exempt or nonexempt.
81a Enter direct and indirect political expenditures. See line 81 instructions. 81a NONE
81b Did the organization file Form 1120-POL for this year? . . . 81b X
82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? . . . 82a X
82b 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 309,000.
83a Did the organization comply with the public inspection requirements for returns and exemption applications? . . . 83a X
83b Did the organization comply with the disclosure requirements relating to quid pro quo contributions? . . . 83b X
84a Did the organization solicit any contributions or gifts that were not tax deductible? . . . 84a X
84b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . 84b N/A
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? . . . 85a N/A
b Did the organization make only in-house lobbying expenditures of \$2,000 or less? . . . 85b N/A
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 N/A
d Section 162(e) lobbying and political expenditures . . . 85d N/A
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices . . . 85e N/A
f Taxable amount of lobbying and political expenditures (line 85d less 85e) . . . 85f N/A
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? . . . 85g N/A
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 N/A
86 501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12 . . . 86a N/A
b Gross receipts, included on line 12, for public use of club facilities . . . 86b N/A
87 501(c)(12) orgs. Enter: a Gross income from members or shareholders . . . 87a N/A
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . 87b N/A
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
89a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 NONE ; section 4912 NONE ; section 4955 NONE
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 . . . NONE
d Enter: Amount of tax on line 89c, above, reimbursed by the organization . . . NONE
90a List the states with which a copy of this return is filed NEW YORK
b Number of employees employed in the pay period that includes March 12, 2003 (See instructions) . . . 90b 958
91 The books are in care of ADAM HAMMERMAN Telephone no. (212) 415-5497
Located at 1395 LEXINGTON AVE NY, NY ZIP + 4 10128
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 NONE

Part VII Analysis of Income-Producing Activities (See page 33 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 PROGRAM SERVICE					
b FEES					22,527,520.
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					
96 Dividends and interest from securities			14	3,194,419.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property			16	4,892,544.	
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	2,176,170.	
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))				10,263,133.	22,527,520.
105 Total (add line 104, columns (B), (D), and (E))					32,790,653.

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

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	STMT 26

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 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
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions.)

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

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

Under penalties of perjury, I declare that I have examined this return and belief, it is true, correct, and complete. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge.

Please Sign Here

Signature of officer: *[Signature]*

Type or print name and title: **DOH ADLER EXEC**

Paid Preparer's Use Only

Preparer's signature: *[Signature]*

Firm's name (or yours if self-employed), address, and ZIP + 4: **EISNER LLP
750 THIRD AVENUE
NEW YORK, NY**

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

2003

Name of the organization **THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION** Employer identification number **13-1624229**

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
FRANCES GINSBURG C/O THE YOUNG MEN'S & YOUNG WOMEN'S HEBREW ASSOCIATION	PROGRAM DIRECTOR FULL-TIME	160,443.	20,312.	NONE
ELEANOR R. GOLDHAR C/O THE YOUNG MEN'S & YOUNG WOMEN'S HEBREW ASSOCIATION	PROGRAM DIRECTOR FULL-TIME	176,798.	36,531.	NONE
HANNA A. GAIFMAN C/O THE YOUNG MEN'S & YOUNG WOMEN'S HEBREW ASSOCIATION	PROGRAM DIRECTOR FULL-TIME	129,156.	16,298.	NONE
DAVID SCHMELTZER C/O THE YOUNG MEN'S & YOUNG WOMEN'S HEBREW ASSOCIATION	PROGRAM DIRECTOR FULL-TIME	162,239.	37,698.	NONE
CORNELIUS CADIGAN C/O THE YOUNG MEN'S & YOUNG WOMEN'S HEBREW ASSOCIATION	PROGRAM DIRECTOR FULL-TIME	139,050.	18,022.	NONE
Total number of other employees paid over \$50,000	▶ 107			

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
GELLER & COMPANY 800 THIRD AVE, NY, NY 10022	ACCOUNTING SERVICES	501,568.
KLEINMAN ASSOCIATES 14 SPRUCEWOOD LN, WESTPORT, CT 06880	MANT OF PROD SYSTEM	241,920.
PROSKAUER ROSE LLP 1585 BROADWAY, NY, NY 10036	LEGAL SERVICES	212,808.
APPLIED CONCEPTS 6 BRIGADE HILL RD, MORRISTOWN, NJ 07960	COMPUTER CONSULTANTS	182,885.
THE MONTEBELLO GROUP PO BOX 278 SUFFREN, NY 10901	SECURITY	1,180,784.
Total number of others receiving over \$50,000 for professional services	▶ 4	

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.
JSA

Schedule A (Form 990 or 990-EZ) 2003

Part III Statements About Activities (See page 2 of the instructions.)

Table with 3 columns: Question, Yes, No. Rows include: 1. During the year, has the organization attempted to influence national, state, or local legislation... 2. During the year, has the organization, either directly or indirectly, engaged in any of the following acts... 3a. Do you make grants for scholarships, fellowships, student loans, etc.? 3b. Do you have a section 403(b) annuity plan for your employees? 4. Did you maintain any separate account for participating donors...

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.
6. A school.
7. A hospital or a cooperative hospital service organization.
8. A Federal, state, or local government or governmental unit.
9. A medical research organization operated in conjunction with a hospital.
10. An organization operated for the benefit of a college or university owned or operated by a governmental unit.
11a. An organization that normally receives a substantial part of its support from a governmental unit or from the general public.
11b. A community trust.
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...
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).

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

Table with 2 columns: (a) Name(s) of supported organization(s), (b) Line number from above.

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

Table with columns: Calendar year (or fiscal year beginning in), (a) 2002, (b) 2001, (c) 2000, (d) 1999, (e) Total. Rows include: 15 Gifts, grants, and contributions received; 16 Membership fees received; 17 Gross receipts from admissions, merchandise sold or services performed; 18 Gross income from interest, dividends, amounts received from payments on securities loans; 19 Net income from unrelated business activities; 20 Tax revenues levied for the organization's benefit; 21 The value of services or facilities furnished to the organization by a governmental unit without charge; 22 Other income; 23 Total of lines 15 through 22; 24 Line 23 minus line 17; 25 Enter 1% of line 23; 26 Organizations described on lines 10 or 11; 27 Organizations described on line 12; 28 Unusual Grants.

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)

NOT APPLICABLE

		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?	34b	
	If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	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) **NOT APPLICABLE**

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

Limits on Lobbying Expenditures

(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	
37	Total lobbying expenditures to influence a legislative body (direct lobbying) . . .	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
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	} 41	
	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		
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
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) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
45	Lobbying nontaxable amount				
46	Lobbying ceiling amount (150% of line 45(e))				
47	Total lobbying expenditures				
48	Grassroots nontaxable amount				
49	Grassroots ceiling amount (150% of line 48(e))				
50	Grassroots lobbying expenditures				

Part VI-B Lobbying Activity by Nonelecting Public Charities

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

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

Table with 3 columns: Question, Yes, No. Rows include: 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, (ii) Purchases of assets, (iii) Rental of facilities, (iv) Reimbursement arrangements, (v) Loans or loan guarantees, (vi) Performance of services; c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

Table with 4 columns: (a) Line no., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. Row 1 contains 'N/A'.

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 [X] No

b If "Yes," complete the following schedule:

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. Row 1 contains 'N/A'.

FORM 990, PART I - EXCLUDED CONTRIBUTIONS

=====

DESCRIPTION

AMOUNT

CONTRIBUTIONS FROM SPECIAL
EVENTS

3,179,268.

TOTAL

3,179,268.

=====

YOUNG MEN AND WOMEN'S HEBREW ASSOCIATION
SCHEDULE OF INVESTMENTS
TAX YEAR ENDING JUNE 30, 2004
EIN: #13-1624229

FORM 990, PART IV LINE 8a

	PROCEEDS	COST	REALIZED GAIN
PORTFOLIO OF INVESTMENTS	47,343,957	46,543,321	800,636
SURPRISE LAKE CAMP	1,097,334	0	1,097,334
LAND	2,500,200	2,222,000	278,200
	3,597,534	2,222,000	1,375,534

DETAILS AVAILABLE UPON REQUEST

FORM 990, PART I - SPECIAL FUNDRAISING EVENTS AND ACTIVITIES

DESCRIPTION	GROSS REVENUE	DIRECT EXPENSES
-----	-----	-----
CONTRIBUTIONS FROM SPECIAL EVENTS	502,631.	502,631.
	-----	-----
TOTALS	502,631.	502,631.
	=====	=====

FORM 990, PART I -- OTHER INCREASES IN FUND BALANCES
=====

DESCRIPTION -----	AMOUNT -----
UNREALIZED GAIN ON INVESTMENTS	440,631.

TOTAL	440,631.
	=====

FORM 990, PART II - OTHER EXPENSES

=====

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
-----	-----	-----	-----	-----
PROGRAM EXPENSES	1,483,156.	1,359,441.	92,873.	30,842.
OTHER PROFESSIONAL FEES	5,198,327.	4,551,135.	504,238.	142,954.
OFFICE EXPENSES	162,277.	138,909.	19,149.	4,219.
CREDIT CARD CHARGES	464,452.	464,452.		
INSURANCE EXPENSE	937,970.	869,498.	67,534.	938.
STAFF EXPENSES	224,794.	178,330.	40,171.	6,293.
ADVERTISING	1,073,931.	1,007,550.	29,042.	37,339.
PHOTOGRAPHY	52,459.	49,941.	1,102.	1,416.
REPAIRS AND MAINTENANCE	1,110,147.	1,021,335.	87,702.	1,110.
EQUIPMENT SUPPLIES	634,365.	581,167.	39,876.	13,322.
BAD DEBT EXPENSE	40,687.	40,687.		
MISCELLANEOUS	536,710.	536,710.		
	-----	-----	-----	-----
TOTALS	11919275.	10799155.	881,687.	238,433.
	=====	=====	=====	=====

FORM 990, PART IV - INVESTMENTS - SECURITIES

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
U.S. GOVERNMENT OBLIGATIONS	15,540,358.	11,699,765.
CORPORATE & OTHER OBLIGATIONS	3,058,829.	6,928,198.
COMMON STOCKS	14,066,657.	15,938,593.
MUTUAL FUNDS	3,078,951.	5,601,474.
TOTALS	----- 35,744,795. =====	----- 40,168,030. =====

FORM 990, PART IV - OTHER ASSETS

=====

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
ACCRUED INTEREST RECEIVABLE	196,323.	119,532.
TOTALS	196,323.	119,532.

=====

=====

FORM 990, PART IV - OTHER LIABILITIES

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
SECURITY DEPOSIT	149,399.	206,552.
TOTALS	149,399.	206,552.

FORM 990, PART IV-A - OTHER REVENUE ON RETURN BUT NOT ON BOOKS

=====

DESCRIPTION	AMOUNT
-----	-----
SCHOLARSHIP ACCOUNTED FOR IN THE FINANCIAL STATEMENTS AS A REDUCTION OF REVENUE AND IN THE TAX RETURN AS AN EXPENSE	1,168,706.

TOTAL	1,168,706.
	=====

FORM 990, PART IV-B - OTHER EXPENSES ON RETURN BUT NOT ON BOOKS

=====

DESCRIPTION

AMOUNT

SCHOLARSHIP ACCOUNTED FOR IN
THE FINANCIAL STATEMENTS AS A
REDUCTION OF REVENUE AND IN
THE TAX RETURN AS AN EXPENSE

1,168,706.

TOTAL

1,168,706.
=====

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS -----	TITLE AND TIME DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCT AND OTHER ALLOWANCES -----
MICHAEL GOLDSTEIN C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	PRESIDENT 2 HRS/WK	NONE	NONE	NONE
MATTHEW BRONFMAN C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	CHAIRMAN 2 HRS/WK	NONE	NONE	NONE
PATRICIA CAYNE, PHD C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	VICE PRESIDENT 2 HRS/WK	NONE	NONE	NONE
MARCIA EPPLER COLVIN C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	VICE PRESIDENT 2 HRS/WK	NONE	NONE	NONE
LORI A. KASOWITZ C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	VICE PRESIDENT 2 HRS/WK	NONE	NONE	NONE
FREDRIC MACK	VICE PRESIDENT 2 HRS/WK	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS -----	TITLE AND TIME DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCT AND OTHER ALLOWANCES -----
C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128				
SALLY KLINGENSTEIN MARTELL C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	VICE PRESIDENT 2 HRS/WK	NONE	NONE	NONE
CURTIS SCHENKER C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	VICE PRESIDENT 2 HRS/WK	NONE	NONE	NONE
JOAN TISCH C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	VICE PRESIDENT 2 HRS/MO	NONE	NONE	NONE
THOMAS BLOCK C/O THE YOUNG MEN'S AND YOUNG WOMENS HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	TREASURER 2 HRS/WK	NONE	NONE	NONE
ADDIE GUTTAG C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION	SECRETARY 2 HRS/MO	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
1395 LEXINGTON AVENUE NEW YORK, NY 10128				
ROBERT APPEL C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE
JODY GOTTFRIED ARNHOLD C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE
DR. ARTHUR AUFSES C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE
GLENN R. AUGUST C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/WK	NONE	NONE	NONE
CATHERINE H. BEHREND C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
CLAIRE B. BENENSON C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/WK	NONE	NONE	NONE
LEN BLAVATNIK C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE
MRS. CLARENCE BUTTENWIESER C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE
JILL ANN BUTTENWIESER C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE
LINDA CAHILL C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE
CLIVE CHAJET	DIRECTOR 2 HRS/WK	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128				
JEROME CHAZEN C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE
ANDREW CRYSTAL C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/WK	NONE	NONE	NONE
RICHARD CRYSTAL C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/WK	NONE	NONE	NONE
STANLEY EDELMAN, MD C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE
STUART J. ELLMAN C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION	DIRECTOR 2 HRS/WK	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
1395 LEXINGTON AVENUE NEW YORK, NY 10128				
MICHAEL FELDBERG C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE
CHRISTINE FERER C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE
MRS. AVERY FISHER C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE
ADAM P. GLICK C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE
JEFFERY B. GOLDENBERG C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/WK	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS -----	TITLE AND TIME DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCT AND OTHER ALLOWANCES -----
JANE H. GOLDMAN C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE
MRS. CORINNE P. GREENBERG C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE
JOHN GREENWOOD C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/WK	NONE	NONE	NONE
DANIEL R. KAPLAN C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/WK	NONE	NONE	NONE
DR. LEE KATZ C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/WK	NONE	NONE	NONE
JEFFERY P. KLEIN	DIRECTOR 2 HRS/WK	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128				
HENRY KOHN C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE
NANCY Z. LANE C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/WK	NONE	NONE	NONE
WILLIAM P. LAUDER C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/WK	NONE	NONE	NONE
JOSEPH N. LEFF C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/WK	NONE	NONE	NONE
PAUL LEVY C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION	DIRECTOR 2 HRS/WK	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
1395 LEXINGTON AVENUE NEW YORK, NY 10128				
ARMAND LINDENBAUM C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE
LINI LIPTON C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/WK	NONE	NONE	NONE
JONATHAN P. MAY C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/WK	NONE	NONE	NONE
IRWIN MILLER C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/WK	NONE	NONE	NONE
PHILIP L. MILSTEIN C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/WK	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
JOHN R. OPPENHEIMER C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/WK	NONE	NONE	NONE
MARTIN J. OPPENHEIMER C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/WK	NONE	NONE	NONE
FREDERIC M. POSES C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/WK	NONE	NONE	NONE
MARTIN J. RABINOWITZ C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/WK	NONE	NONE	NONE
DAVID S. ROSE C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE
MARCELLA ROSEN	DIRECTOR 2 HRS/MO	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128				
JOHN STEINHARDT C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE
GAIL MICHELE SALTZ, MD C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/WK	NONE	NONE	NONE
AMY R. SILVERMAN C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE
ANNE SPITZER C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE
OLIVER STANTON C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION	DIRECTOR 2 HRS/WK	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
1395 LEXINGTON AVENUE NEW YORK, NY 10128				
RONALD STEIN C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/WK	NONE	NONE	NONE
MICHAEL H. STEINHARDT C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE
STUART SUCHERMAN C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE
BERTRAM TEICH C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE
EVA COLIN USDAN C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
KENNETH WALLACH C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	DIRECTOR 2 HRS/MO	NONE	NONE	NONE
MURIEL BINDER C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	HONORARY DIRECTOR 2 HRS/MO	NONE	NONE	NONE
MARTIN BLUMENTHAL C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	HONORARY DIRECTOR 2 HRS/MO	NONE	NONE	NONE
DIANE A. FOGG C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	HONORARY DIRECTOR 2 HRS/MO	NONE	NONE	NONE
WILLIAM H. HEYMAN C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	HONORARY DIRECTOR 2 HRS/MO	NONE	NONE	NONE
MRS. JOAN L. JACOBSON	HONORARY DIRECTOR 2 HRS/MO	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128				
WILLIAM K. KRAMER C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	HONORARY DIRECTOR 2 HRS/MO	NONE	NONE	NONE
PETER W. MAY C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	HONORARY DIRECTOR 2 HRS/MO	NONE	NONE	NONE
MITCHELL J. NELSON C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	HONORARY DIRECTOR 2 HRS/MO	NONE	NONE	NONE
MADELINE I. NOVECK C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	HONORARY DIRECTOR 2 HRS/MO	NONE	NONE	NONE
ELIHU ROSE C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION	HONORARY DIRECTOR 2 HRS/MO	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES
=====

NAME AND ADDRESS -----	TITLE AND TIME DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCT AND OTHER ALLOWANCES -----
1395 LEXINGTON AVENUE NEW YORK, NY 10128				
JUDITH O. RUBIN C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	HONORARY DIRECTOR 2 HRS/MO	NONE	NONE	NONE
RUTH STANTON C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	HONORARY DIRECTOR 2 HRS/MO	NONE	NONE	NONE
ROGER L. STRONG C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	HONORARY DIRECTOR 2 HRS/MO	NONE	NONE	NONE
HARRIET WEINTRAUB C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	HONORARY DIRECTOR 2 HRS/MO	NONE	NONE	NONE
MYRNA Z. WEISS C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	HONORARY DIRECTOR 2 HRS/MO	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
SOL ADLER C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	EXECUTIVE DIRECTOR 40 HOURS	319,319.	31,264.	NONE
HELAINÉ GEISMAR-KATZ C/O THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION 1395 LEXINGTON AVENUE NEW YORK, NY 10128	ASOC. EXEC. DIRECTOR 40 HOURS	289,073.	19,595.	NONE
GRAND TOTALS		608,392.	50,859.	NONE

FORM 990, PART VIII - ACCOMPLISHMENT OF EXEMPT PURPOSES

LINE NO.	EXPLANATION OF HOW EACH ACTIVITY FOR WHICH INCOME IS REPORTED IN COLUMN (E) OF PART VII CONTRIBUTED IMPORTANTLY TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES
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93A & B	PROGRAM FEES FOR ALL PROGRAM SERVICE WHICH ARE A PART OF THE 92ND ST. Y'S STATED PURPOSE OF BEING A CULTURAL AND EDUCATIONAL RESOURCE FOR THE NYC METRO AREA. EXAMPLES INCLUDE PERFORMING ARTS PROGRAMS, EDUCATIONAL CLASSES, EDUCATIONAL TRAVEL, PHYSICAL FITNESS, HUMANITIES, LECTURES AND MUSIC.
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SCHEDULE A, PART III - EXPLANATION FOR LINE 2B

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SEE PART IV OF 990 AND STATEMENT 28

SCHEDULE A, PART III - EXPLANATION FOR LINE 2C

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THE 92ND STREET Y INCURRED LEGAL EXPENSES FOR SERVICES RENDERED BY A LAW FIRM WHICH HAS A PARTNER WHO IS A MEMBER OF THE BOARD OF DIRECTORS.

SCHEDULE A, PART III - EXPLANATION FOR LINE 3A

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SEE STATEMENT 31

YOUNG MEN AND WOMEN'S HEBREW ASSOCIATION
SCHEDULE OF FIXED ASSETS
TAX YEAR ENDING JUNE 30, 2004
EIN: #13-1624229

FORM 990, PART IV LINE 50

	<u>BEGINNING OF YEAR</u>	<u>END OF YEAR</u>
RECEIVABLE FROM OFFICERS AND DIRECTORS	<u>150,000</u>	<u>NONE</u>
RECEIVABLE FROM EMPLOYEE	<u>97,478</u>	<u>93,832</u>

Young Men's and Young Women's Hebrew Association
EID # 13-1624229
FYE 6/30/04

SCHOLARSHIP REPORT

The 92nd Street Y is committed to full community participation in its programs regardless of financial need. Scholarships are awarded throughout the agency based on financial need. **Scholarship Services** administers this process and works closely with the staff specific to the individual Y program center.

Individuals requesting scholarship assistance must complete the appropriate application and return it to **Scholarship Services**. Applicants are required to include required financial documentation (as defined by **Scholarship Services**) before a decision can be made. Previous scholarship history is considered as part of the decision making process. Recipients are responsible for a portion of the fee. All past balances must be paid before new awards are granted. Scholarship decisions are made jointly by the appropriate center or program director and the director of **Scholarship Services**. Every effort is made to facilitate the applicant's participation in the Y program chosen.

The registration completion procedure is given to each recipient with their award. Each scholarship award represents only a portion of the program fee. The scholarship recipient is responsible for the balance of the fee. The exception to only giving partial awards is in the Educational Outreach program. This program is funded to provide full scholarships for the children participating in their program.

On selected occasions, tickets to concerts performed at the Y, are also offered at scholarship rates to members of organizations which qualify for scholarship assistance. These include senior citizens and students, who must present the appropriate identification to receive the scholarship rate.

**THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION
ID # 13-1624229**

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

Eight Centers of Excellence

The 92nd Street Y **May Center for Health, Fitness & Sport** provides adults and children with numerous opportunities for exercise, recreation, health education and participation in competitive sports. Its comprehensive fitness facilities include two air-conditioned gyms, a 75- foot swimming pool, state-of-the-art aerobic and strength conditioning studios, racquetball courts, an indoor jogging track and more than 80 exercise classes weekly. The Center also offers programs for special populations through its Coronary Detection & Intervention Center (CDIC); its nutrition, osteoporosis and women's health programs; individual instruction and lectures by leading medical authorities.

Scholarships = \$ 520,280

Expenses = \$7,805,883

Endowed in 1999 by two visionary trustees, board chairman Philip Milstein and longtime board member John Rosenthal, the 92nd Street Y **Milstein/Rosenthal Center for Media & Technology** is spearheading the Y's foray into the technology age. Working with the other centers, the new unit is developing and implementing technology-based-programs-long distance learning, Internet simulcasts, video conferencing, and similar new -media tools-that will enable the Y to extend its reach beyond its four walls to communiteis and constituencies around the world.

Scholarships = \$ 0

Expenses = \$393,406

The 92nd Street Y **School of the Arts** continues the Y's long history of offering outstanding instruction in music, dance and the visual arts. Under its auspices are *the School of Music*, founded in 1917, the *Art Center* , founded in 1930, and the *Harkness Dance Center* , which offered the modern dance movement its first home in America in 1935. Classes are available for all age groups, from preschool children to senior adults, and at all levels of training, from avocational beginners to established professional performers, teachers and choreographers. The School's *Educational Outreach Program* brings music, dance and art into the lives of 8,000 economically disadvantaged students in East and West Harlem public schools.

Scholarships = \$ 122,707

Expenses = \$4,780,350

The 92nd Street Y Bronfman Center for Jewish Life, generously endowed by the Samuel Bronfman Foundation, offers a distinguished array of lectures, interviews, classes, workshops and holiday celebrations that explore Jewish ideas and themes. Known as a Jewish home to thousands of adults and children, the Center offers a wide range of programs to those beginning an exploration of Judaism, those continuing their studies and those seeking a better understanding of Jewish values, texts, history and rituals.

Scholarships = \$ 4,308

Expenses = \$1,568,955

The 92nd Street Y Lillian & Sol Goldman Family Center for Youth & Family provides programs that promote the healthy development and growth of children of all ages. From classes for parents-to-be to extensive activities for teens, the Center provides a supportive, noncompetitive environment that encourages children and families to reach their maximum potential. Center programs included the award-winning *Parenting Center*, the *Nursery School*, the *Noar Afterschool Center*, 13 summer camps and activities for children with developmental disabilities.

Scholarships = \$ 422,201

Expenses = \$9,829,052

The Makor/Steinhardt Center of the 92nd Street Y, housed in the Steinhardt Building at 35 West 67th Street, offers two programs. The first is **Makor**, which gives New Yorkers in their 20's and 30's opportunities for Jewish exploration and connection within an environment committed to Jewish pluralism, cultural innovation and intellectual excellence. Taking place in the evenings and on weekends-when young people are not at work. Makor presents a mix of sophisticated contemporary music performances, film screenings, art exhibits, theater presentations, literary readings, and classes and lectures, many devoted to Jewish topics. The second program taking place under the Center's rubric is *Daytime@the Steinhardt Building*, designed for the growing population of baby boomers who began retiring or entering semi-retirement in 2001. *Daytime @the Steinhardt Building* offers not only an eclectic mix of classes, workshops, films and other leisure and learning opportunities, but also a home-away-from-home, a place where boomers starting a new phase of life can find a community of like-minded and "like-situated" others.

Scholarships = \$ 1,260

Expenses = \$3,638,309

The 92nd Street Y Charles Simon Center for Adult Life & Learning offers a unique blend of social, educational and cultural programs for adults at every stage of their lives, from singles to seniors. Internationally, known as the presenter of the country's most prestigious lecture series, the Center frings the world's finest minds and most intriguing cultural figures to the Y's stage. Additionally, the Center offers diverse personal growth, career development and language classes, as well as local tours to places of historic, social, artistic and architectural importance. The acclaimed de Hirsch Residence and the Y's Buttenwieser Library also fall under the auspices of this Center.

Scholarships = \$ 18,534

Expenses = \$8,304,344

Through its *Music Program*, the 92nd Street Y Tisch Center for the Arts , endowed through the generous support of the Tisch family, produces and presents world-class concerts of classical, world, folk and cabaret music, lyric theater and jazz. The Center's *Unterberg Poetry Center*, established in 1939, produces a renowned literary reading series that presents the most distinguished writers of our time, offers extensive educational programs for writers of all levels, sponsors and adult literacy project for non-English-speaking, lower-income, recent immigrants, and hosts a literary program that brings world-famous authors to high schools to teach writing workshops.

Scholarships = \$ 79,416

Expenses = \$4,462,874

Total Scholarship Expenses = \$1,168,706

Total Program Expenses = \$40,783,173

Total Program Services = \$41,951,879

YOUNG MEN AND WOMEN'S HEBREW ASSOCIATION
SCHEDULE OF FIXED ASSETS
TAX YEAR ENDING JUNE 30, 2004
EIN: #13-1624229

FORM 990, PART II LINE 42 AND PART IV LINE 57B

	NET ENDING VALUE 6/30/04
LAND	2,524,881
BUILDING AND IMPROVEMENTS	47,699,701
FURNITURE AND EQUIPMENT	16,850,788
CONSTRUCTION IN PROGRESS	696,119
	<u>67,771,489</u>
ACCUMULATED DEPRECIATION- 7/1/2003	29,887,075
2004 DEPRECIATION EXPENSE	3,419,177
2004 WRITE-OFFS	(131,909)
ACCUMULATED DEPRECIATION- 7/1/2004	<u>33,174,343</u>

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ 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.

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION	Employer identification number 13-1624229
	Number, street, and room or suite no. If a P.O. box, see instructions. 1395 LEXINGTON AVENUE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10128	

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 02/15, 2005, 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 07/01, 2003, and ending 06/30, 2004.

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 EFPS (Electronic Federal Tax Payment System). See instructions \$ _____

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.

OFFICE COPY

Signature ▶ _____ Title ▶ **CPA** Date ▶ _____

For Paperwork Reduction Act Notice, see Instruction

- If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II and check this box **X**
- 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 File by the extended due date for filing the return. See instructions.	Name of Exempt Organization THE YOUNG MEN'S AND YOUNG WOMEN'S HEBREW ASSOCIATION	Employer identification number 13-1624229
	Number, street, and room or suite no. If a P.O. box, see instructions. 1395 LEXINGTON AVENUE	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10128	

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 05/16/2005

5 For calendar year _____, or other tax year beginning 07/01/2003 and ending 06/30/2004

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

7 State in detail why you need the extension INFORMATION NECESSARY TO PREPARE A COMPLETE AND ACCURATE RETURN IS NOT YET AVAILABLE.

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 _____ \$

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 _____ \$

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 _____ \$

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 *Ariel A. Flood* Title CPA Date 2/9/05

Notice to Applicant - To Be Completed by the IRS

- We have approved this application. Please attach this form to the organization's return.
- We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return.
- We have not approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting 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: _____ Date _____

Director _____

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 EISNER LLP	EXTENSION APPROVED FEB 25 2005 FIELD DIRECTOR, SUBMISSION PROCESSING, OGDEN,
	Number and street (Include suite, room, or apt. no.) Or a P.O. box number 750 THIRD AVENUE	
	City or town, province or state, and country (including postal or ZIP code) NEW YORK, NY 10017-2703	