

Giftizen.org

Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2000

Open to Public
Inspection

May be
initial but
not
marked
"initial."
However
a later
(2002?)
return
was
marked
"initial"
here.

Department of the Treasury
Internal Revenue Service

Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation), or section 527, or section 4947(a)(1) nonexempt charitable trust

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

A For the 2000 calendar year, or tax year period beginning

, 2000, and ending

, 20

Check if applicable
Change of addr
Change of name
Initial return
Final return
Amended return

Please use IRS label or print or type
See Specific Instructions

C Name of organization, number and street, city, town, state, and ZIP code
21st CENTURY SCHOOL FUND, INC.
c/o MARY FILARDO
2814 ADAMS MILL RD NW
WASHINGTON, DC 20009-2204

D Employer identification number
52-2139122E Telephone number
(202) 745-3745F Check if application pending

Note H and I are not applicable to sec 527 orgs

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 inst.) Yes NoH(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

I Enter 4-digit group exemption no. (GEN) ►

L Check this box if organization is not required to attach Schedule B (Form 990 or 990-EZ) ►

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

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

J Accounting method Cash Accrual Other (specify) ►

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

Part I Revenue, Expenses, and Changes In Net Assets or Fund Balances (See Specific Instructions)

1 Contributions, gifts, grants, and similar amounts received	1a	195,047.	\$192K of this from JUST 3 sources. See 'Sched B' (near end)
a Direct public support	1b		
b Indirect public support	1c		
c Government contributions (grants)			
d Total (add lines 1a through 1c) (cash \$ 195,047. noncash)	1d	195,047.	
2 Program service revenue including government fees and contracts (from Part VII, line 93)	2	161,575.	
3 Membership dues and assessments	3		
4 Interest on savings and temporary cash investments	4	2,020.	
5 Dividends and interest from securities	5		
6a Gross rents	6a		
b Less rental expenses	6b		
c Net rental income or (loss) (subtract line 6b from line 6a)			
7 Other investment income (describe))	7		
8a Gross amount from sales of assets other than inventory	(A) Securities	(B) Other	
b Less cost/other basis & sales expenses	8a		
c Gain or (loss) (attach schedule)	8b		
d Net gain or (loss) (combine line 8c, columns (A) and (B))	8c		
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)			
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)			
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	358,642.	
13 Program services (from line 44, column (B))	13	58,673.	
14 Management and general (from line 44, column (C))	14	230,787.	
15 Fundraising (from line 44, column (D))	15	18,478.	
16 Payments to affiliates (attach schedule)	16		
17 Total expenses (add lines 13 and 44, column (A))	17	307,938.	
18 Excess or (deficit) for the year (subtract line 17 from line 12)	18	50,704.	
19 Net assets or fund balances at beginning of year (from line 73, column (A))	19	2,278.	
20 Other changes in net assets or fund balances (attach explanation)	20		
21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	52,982.	

For Paperwork Reduction Act Notice, see the separate Instructions

CAA 0 99012 NTF 33747

Form 990 (2000)

EP

RP

MARCH 18 2002

FILMED

REVENUE

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 Specific Instructions)			
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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	68,746.	0.	68,746.
26	Other salaries and wages	26	118,225.		118,225.
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	6,722.	304.	6,418.
34	Telephone	34	5,770.	678.	5,092.
35	Postage and shipping	35	5,226.	1,000.	1,014.
36	Occupancy	36			
37	Equipment rental and maintenance	37			
38	Printing and publications	38	2,756.	2,005.	751.
39	Travel	39	11,535.	8,149.	2,927.
40	Conferences, conventions, and meetings	40	2,000.		1,400.
41	Interest	41			
42	Depreciation, depletion, etc (attach schedule)	42	1,261.		1,261.
43	Other expenses (itemize) a See Attached	43a	85,697.	46,537.	24,953.
b		43b			
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	307,938.	58,673.	230,787.
					18,478.

Reporting of Joint Costs. Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation?

► Yes No

If "Yes," enter (I) 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 Specific Instructions)

What is the organization's primary exempt purpose? ► PUBLIC SCHOOL FACILITIES		Program Service Expenses (Required for 501(c)(3) & (4) orgs, & 4947(a)(1) trusts but optional for others)
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)		
a DEJONG	322	
DC SCHOOL SEARCH	7457	
FORMAT PRO	21564	
	(Grants and allocations \$ _____)	29,343.
b NCEF	22576	
NEW JERSEY	760	
	(Grants and allocations \$ _____)	23,336.
c OYSTER	300	
EYP ED	1368	
HONORARIA	4002	
	(Grants and allocations \$ _____)	5,670.
d SCHOOL WITH OUT WALLS	90	
SCIENTEX	234	
	(Grants and allocations \$ _____)	324.
e Other program services (attach schedule)	(Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)		► 58,673.

Part IV Balance Sheets (See Specific 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	4,609.	45	2,586.
	46 Savings and temporary cash investments	200,000.	46	144,765.
	47a Accounts receivable	47a 5,010.		
	b Less allowance for doubtful accounts	47b	51,027.	47c 5,010.
	48a Pledges receivable	48a		
	b Less allowance for doubtful accounts	48b		48c
	49 Grants receivable			49
	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
A S S E T S	52 Inventories for sale or use			52
	53 Prepaid expenses and deferred charges			53
	54 Investments -- securities (attach schedule)			54
	55a Investments -- land, buildings, and equipment basis	55a 4,674.		
	b Less accumulated depreciation (attach schedule)	55b 1,804.	2,172.	55c 2,870.
	56 Investments -- other (attach schedule)			56
	57a Land, buildings, and equipment basis	57a		
	b Less accumulated depreciation (attach schedule)	57b		57c
	58 Other assets (describe ► _____)			58
	59 Total assets (add lines 45 through 58) (must equal line 74)		257,808.	59 155,231.
L I A B L I T I E S	60 Accounts payable and accrued expenses		255,530.	60 102,249.
	61 Grants payable			61
	62 Deferred revenue			62
	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 ► _____)			65
	66 Total liabilities (add lines 60 through 65)		255,530.	66 102,249.
N F E T A S B S E L T A S C O R S	Organizations that follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted			67
	68 Temporarily restricted			68
	69 Permanently restricted			69
	Organizations that do not follow SFAS 117, check here ► <input checked="" 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		2,278.	72 52,982.
	73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19 and column (B) must equal line 21)		2,278.	73 52,982.
	74 Total liabilities and net assets / fund balances (add lines 66 and 73)		257,808.	74 155,231.

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 Specific 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 N/A	a Total expenses and losses per audited financial statements ►	a N/A
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 \$ _____		(1) Donated services & use of facilities \$ _____	
(2) Donated services & use of facilities \$ _____		(2) Prior year adjustments reported on line 20, Form 990 \$ _____	
(3) Recoveries of prior year grants \$ _____		(3) Losses reported on line 20, Form 990 \$ _____	
(4) Other (specify) _____ \$ _____		(4) Other (specify) _____ \$ _____	
Add amounts on lines (1) through (4) ► b		Add amounts on lines (1) through (4) ► b	
c Line a minus line b ► c		c Line a minus line b ► c	
d Amounts included on line 12, Form 990 but not on line a		d Amounts included on line 17, Form 990 but not on line a	
(1) Investment expenses not included on line 6b, Form 990 \$ _____		(1) Investment expenses not included on line 6b, Form 990 \$ _____	
(2) Other (specify) _____ \$ _____		(2) Other (specify) _____ \$ _____	
Add amounts on lines (1) and (2) ► d		Add amounts on lines (1) and (2) ► d	
e Total revenue per line 12, Form 990 (line c plus line d) ► e		e Total expenses per line 17, Form 990 (line c plus line d) ► e	

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see Specific 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 comp	(E) Expense account and other allowances
DR DUSTIN WILSON	BOARD CHAI	0.	0.	0.
MICHAEL McSHEA	SECT/TREAS	0.	0.	0.
MARY FILARDO	EXEC DIREC 80.	68,746.	0.	0.
KELLY ALLIN BUTLER	BOARD	0.	0.	0.
PAQUITA HOLLAND	BOARD	0.	0.	0.
JIM WILSON	BOARD	0.	0.	0.
JERALD WOODY	BOARD	0.	0.	0.
EDDIE NEAL	BOARD	0.	0.	0.
JAMES B QUERY	BOARD	0.	0.	0.
CATHY REILLY	BOARD	0.	0.	0.
BARBARA SOMSON	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?
If "Yes," attach schedule -- see Specific Instructions

► Yes No

Part VI	Other Information (See Specific Instructions)	N/A	Yes	No
76	Did organization engage in any activity not previously reported to IRS? If "Yes," attach detailed description of each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	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
b	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? b If "Yes," enter the name of the organization ►	80a		X
	and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt			
81a	Enter the amount of political expenditures, direct or indirect, as described in the instructions for line 81	81a		
b	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? 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 for reporting in Part III)	82a		X
	► 82b			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	N/A	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	N/A	
84a	Did the organization solicit any contributions or gifts that were not tax deductible? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84a		X
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? b Did the organization make only in-house lobbying expenditures of \$2,000 or less? 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	85a	N/A	
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 in 85f?	85g	N/A	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A	
86	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12 b Gross receipts, included on line 12, for public use of club facilities	86a		
87	501(c)(12) orgs Enter a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87a		
	► 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
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 ► , section 4912 ► , section 4955 ►	89a		
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 ►			
d	Enter Amount of tax on line 89c, above, reimbursed by the organization ►			
90a	List the states with which a copy of this return is filed ►			
b	Number of employees employed in the pay period that includes March 12, 2000 (See inst.)	90b		4
91	The books are in care of ► THE COMPANY Telephone no ► (202) 745-3745 Located at ► ABOVE ZIP code ►			
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			

Part VII Analysis of Income-Producing Activities (See Specific Instructions)

	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	
Enter gross amounts unless otherwise indicated					
93 Program service revenue					24,750.
a DEJONG					71,000.
b DC SCHOOL SEARCH					3,774.
c OYSTER SCHOOL/HON					4,011.
d EYP-ED SPECS					58,040.
e FORMAT PRO					
f Medicare/Medicaid payments					
g Fees & contracts from govt agencies					
94 Membership dues & assessments					
Interest on savings and temporary cash investments					2,020.
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit/(loss) from sales of inventory					
103 Other revenue a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))					163,595.
105 Total (add line 104, columns (B), (D), and (E))					163,595.

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

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See Specific Instructions)

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)
	ATTACHED

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions)

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

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See Specific Instructions)

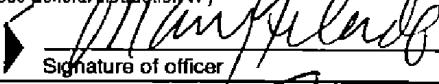
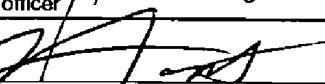
(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

 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)

Please Sign Here	Under penalties of perjury, I declare that I have examined this return including accompanying schedules and statements and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge (Important See General Instruction W)		
	 3/8/02		
	Type or print name and title MARY FILARDO EXECUTIVE DIR		
Paid Preparer's Use Only	Preparer's signature 	Date 1/16/00	Check if self- em- ployed <input type="checkbox"/>
	Firm's name (or yours if self-employed) and address, & ZIP code		Preparer's SSN or PTIN EIN ► 52-2114755
	James D Goldblatt CPA PC 806 Hollywood Avenue Silver Spring, MD 20904		Phone no ► (301) 622-5947

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047

2000

Supplementary Information — (See separate Instructions.)

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

Name of the organization

21st CENTURY SCHOOL FUND, INC.

Employer Identification number

52-2139122

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See 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 empl benefit plans & deferred compensation	(e) Expense account and other allowances
--- NONE ---				
Total number of other employees paid over				

Total number of other employees paid over
\$50,000

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See 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

Part III Statements About Activities		Yes	No
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 total expenses paid or incurred in connection with the lobbying activities ► \$ _____ 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	1	X
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any of its 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		
a	Sale, exchange, or leasing of property?	2a	X
b	Lending of money or other extension of credit?	2b	X
c	Furnishing of goods, services, or facilities?	2c	X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	X
e	Transfer of any part of its income or assets? If the answer to any question is "Yes," attach a detailed statement explaining the transactions	2e	X
3	Does the organization make grants for scholarships, fellowships, student loans, etc.?	3	X
4a	Do you have a section 403(b) annuity plan for your employees?	4a	X
b	Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs qualify to receive payments (See the instructions)		

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

Provide the following information about the supported organizations (See 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 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) 1999	(b) 1998	(c) 1997	(d) 1996	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28)	79,533.				79,533.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable etc., purpose	389,078.				389,078.
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	243.				243.
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	468,854.				468,854.
24 Line 23 minus line 17	79,776.				79,776.
25 Enter 1% of line 23	4,689.				
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24 b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1996 through 1999 exceeded the amount shown in line 26a. Enter the sum of all these excess amounts c Total support for section 509(a)(1) test. Enter line 24, column (e) d Add Amounts from column (e) for lines 18 243.19 22 26b e Public support (line 26c minus line 26d total) f Public support percentage (line 26e (numerator) divided by line 26c (denominator))				26a 1,596. 26b 26c 79,776. 26d 243. 26e 79,533. 26f 99.6954 %
27 Organizations described on line 12	a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," attach a list (which is not open to public inspection) to show the name of, and total amounts received in each year from, each "disqualified person." Enter the sum of such amounts for each year (1999) (1998) (1997) (1996) b For any amount included in line 17 that was received from a nondisqualified person, attach a list 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.) 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 (1999) (1998) (1997) (1996) c Add Amounts from column (e) for lines 15 16 17 20 21 d Add Line 27a total and line 27b total e Public support (line 27c total minus line 27d total) f Total support for section 509(a)(2) test. Enter amount on line 23, column (e) g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) h Investment Income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))				27c 27d 27e 27f 27g % 27h %
28 Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 1996 through 1999, attach a list (which is not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these grants in line 15 (See the instructions)					

Part V Private School Questionnaire (See 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	
<hr/> <hr/> <hr/>		
32 Does the organization maintain the following		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
 If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)		
<hr/> <hr/>		
33 Does the organization discriminate by race in any way with respect to		
a Students' rights or privileges?	33a	
b Admissions policies?	33b	
c Employment of faculty or administrative staff?	33c	
d Scholarships or other financial assistance?	33d	
e Educational policies?	33e	
f Use of facilities?	33f	
g Athletic programs?	33g	
h Other extracurricular activities?	33h	
 If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)		
<hr/> <hr/> <hr/>		
34a Does the organization receive any financial aid or assistance from a governmental agency?		
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 401 through 405 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 the instructions)
(To be completed ONLY by an eligible organization that filed Form 5768)

a if the organization belongs to an affiliated group
 b if you checked "a" above 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		
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)			
43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36		0.	0.
44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38		0.	0.

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.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in) ►	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(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 the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

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

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 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	

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.

Schedule B
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

OMB No 1545-0047

2000Supplementary Information for line 1d of Form 990 or
line 1 of Form 990-EZ (see instructions)

Name of organization

21st CENTURY SCHOOL FUND, INC.Organization type (check one)-- Section 501(c)(**3**) ► (enter number) 527 or 4947(a)(1) nonexempt charitable trust**A Section 501(c)(7), (8), or (10) organizations--**Check this box if the organization had no charitable contributors who contributed more than \$1,000 during the year (But see General rule in instructions) ►

Enter here the total gifts received during the year for a religious, charitable, etc., purpose ► \$

Note: This form is generally not open to public inspection except for section 527 organizations.

SMA 990B1-0001 T0108

Schedule B (Form 990 or 990-EZ) (2000)

Name of organization

21st CENTURY SCHOOL FUND, INC.

Employer identification number

52-2139122

Part I Contributors

Why not just fill this in, since it was already redacted as to names?

(a) No	(b) Name, address and zip code	(c) Aggregate contributions	(d) Type of contribution
1		\$ 20,000.	<input type="checkbox"/> Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash
(a) No		(c) Aggregate contributions	(d) Type of contribution
2		\$ 152,347.	<input type="checkbox"/> Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash
(a) No		(c) Aggregate contributions	(d) Type of contribution
3		\$ 20,000.	<input type="checkbox"/> Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash
(a) No	(b) Name, address and zip code	(c) Aggregate contributions	(d) Type of contribution
—	—	\$ —	<input type="checkbox"/> Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash
(a) No	(b) Name, address and zip code	(c) Aggregate contributions	(d) Type of contribution
—	—	\$ —	<input type="checkbox"/> Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash
(a) No	(b) Name, address and zip code	(c) Aggregate contributions	(d) Type of contribution
—	—	\$ —	<input type="checkbox"/> Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash

**21st Century School Fund
Program Expenses FY2000**

*FY 1999 - 2000 GEN SL-13911L STATEMENT OF PROGRAM SERVICE
ACCOMPLISHMENT*

Academy for Educational Development (grant) **ACCOMPLISHMENT** **\$1,750.00**

For participating in a study on value-added work of Ford Foundation in convening capacity-building grantees

America Speaks **\$1,380.86**

Organizing and participated in visit to Portland, Oregon to learn about youth involvement models for use in the DC Youth Summit. Washington, DC youth and members of Mayor Williams staff participated in the trip which is resulting in the formation of the Mayor's Youth Advisory Council

Morris and Gwendolyn Cafritz Foundation (grant) **\$20,000.00**

Conducted a direct education campaign within targeted DC communities, reviewed and edited 21CSF publications and software applications that focus on DC school facility issues, and supported the communities where schools have been designated for full modernization. These funds are matched by a grant from the Meyer Foundation

DC Bond **\$990.00**

Interest income (FROM \$200,000 SUCCESS FEE FOR CONSULTING ON OYSTER SCHOOL PUBLIC PRIVATE DEVELOPMENT PARTNERSHIP - majority of work took place prior to 2000. We continue to do small amounts of work now that are not funded)

DeJong & Associates – Community Dialogues (consulting contract) **\$24,750.00**

Developed framework and assisted in facilitating community involvement in the DC Public Schools long-range facility master planning process through a series of community dialogues

DeJong & Associates – Data Analysis (consulting contract) **\$57,699.69**

Analyzed data and developed recommendations for the facility master plan using FORMAT-Pro® software

Direct Mail Campaign Contributions (individual donations) **\$1,395.00**

Conducted public education direct mail campaign to support the DC Public Schools long-range master facility process and for fund raising to support the work of the 21st Century School Fund in the District of Columbia

Emborn Yaffee & Prescott (consulting contract) **\$4,010.66**

Consulted on development of educational specifications for District of Columbia Public Schools (delayed payment for work done prior to 2000)

Ford Foundation (grant) **\$150,000.00**

For support of national networking on school facilities issues, developing organizing handbook, and increasing internal development capacity

Lucent Technologies Corporate Contributions Program (grant) **\$1,000.00**

Developed and conducted technology training session for DC Public Schools library media specialists in the use of the internet and DCSchoolSearch.com – in partnership with the Library of Congress Digital Library

Eugene and Agnes E Meyer Foundation (grant) **\$20,000.00**

Conduct a direct education campaign within targeted DC communities, reviewed and edited 21CSF publications and software applications that focus on DC school facility issues, and supported the communities where schools have been designated for full modernization. These funds were matched by a grant from the Cafritz Foundation

Research Foundation of the State University of New York, Stony Brook (consulting contract) **\$71,000.00**

Year two funding for maintaining and reporting on use of www.DCSchoolSearch.com, as part of a research study on school choice and how parents use school information

21st Century School Fund Board of Directors 8/15/00

Officers:

Dustin Wilson
President Board of Directors
7806 Fulbright Court
Bethesda, MD 20817

Michael McShea
Treasurer, Board of Directors
Vice President Saubach Company
401 9th Street, NW
Washington, DC 20005

Key Employees

Mary W Filardo
Secretary, Board of Directors
Executive Director 21st Century School Fund
2814 Adams Mill Rd , NW
Washington, DC 20009

Members:

Kelly Allin Butler
Executive Director Parents for Public Schools
1520 N State Street
Jackson, MS 39202

Paquita Holland
Principal, Oyster School at KC Lewis
300 Bryant Street, NW
Washington, DC 20001

~~Shelton Lee~~
~~Director Lee Technologies~~
~~6130 Surrey Square Lane Apt 101~~
~~Forestville, MD 20747~~

Eddie Neal
President, CEO
Scientex Corporation
2000 14th Street North
Arlington, VA 22201

James B Query
Morgan Stanley, Dean Witter
2 Penn Center, Suite 200
Philadelphia, PA 19102

Cathy Reilly
President SHAPPE
1340 Ingraham St , NW
Washington, DC 20011

Barbara Somson
Deputy Director Legislative Affairs United
Auto Workers
3915 McKinley St, NW
Washington, DC 20036

Jim Wilson
President CEO James F Wilson, Inc
19650 Club House Road, Suite 203
Montgomery Village, MD 20886

~~Sarah Woodhead~~
~~1201 Kearney St , NE~~
~~Washington, DC 20017~~

Jerald Woody
Executive Director Alliance for Youth
And Community Success
706 4th St, NE
Washington, DC 20002

Supplemental Schedules
Company: 21st CENTURY SCHOOL FUND, INC.

2000
EIN: 52-2139122

Form 4562 Asset Listing.

Asset		Acq # Description	Pct T Date	Inv Used Cr	Cost Basis	Depr Method	Conv Est Life	Prior Depr	Sec 179	2000 Depr
1	COMPUTER EQUIPMENT	N	08/13/99	100% N	1,600	MACRS DDB	HY 5	320	0	512
2	COMPUTER EQUIPMENT	N	08/30/99	100% N	450	MACRS DDB	HY 5	90	0	144
3	COLOR PRINTER	N	10/25/99	100% N	665	MACRS DDB	HY 5	133	0	213
4	TOWER CASE ETC	N	02/14/00	100% N	1,959	MACRS DDB	HY 5	0	0	392
Prior Year Totals								543	0	
Current Year Totals								4,674	0	1,261

Form 990 - Exempt Organization Tax Return
Line 42 - Depreciation, Depletion, Etc.

Description	(A) Total	(B) Program Services	(C) Mgmt. & General	(D) Fund-raising
DEPRECIATION EQUIPMENT	1,261.	0.	1,261.	0.
TOTAL	1,261.	0.	1,261.	0.

Form 990 - Exempt Organization Tax Return
Line 43 - Other Expenses

Description	(A) Total	(B) Program Services	(C) Mgmt. & General	(D) Fund-raising
EQUIPMENT RENTAL	2,354.	777.	1,577.	0.
CONSULTING	77,649.	44,423.	19,019.	14,207.
ADVERTISING	884.	753.	131.	0.
BOOKS & SUBSCRIPTIONS	278.	134.	144.	0.
MEETINGS	1,186.	343.	843.	0.
REIMBURSABLE EXPENSES	42.	42.	0.	0.
BANK CHARGES	522.	0.	522.	0.
DUES	375.	0.	375.	0.
INSURANCE	2,342.	0.	2,342.	0.
INTEREST	0.	0.	0.	0.
FILING FEES	65.	65.	0.	0.
TOTAL	85,697.	46,537.	24,953.	14,207.

Notes

Company: 21st CENTURY SCHOOL FUND, INC.

2000

EIN: 52-2139122

Note # 1 - ADDITIONAL OFFICERS/DIRECTO

JIM WILSON BOARD 0 COMP

SARAH WOODHEAD BOARD 0 COMP

JERALD WOODY BOARD 0 COMP

- 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 21st CENTURY SCHOOL FUND, INC.	Employer identification number 52-2139122
File by the due date for filing your return See instructions.	Number, street, and room or suite no. If a P.O. box see instructions 2814 ADAMS MILL RD NW	For IRS use only
	City, town or post office, state and ZIP code For a foreign address, see instructions WASHINGTON, DC 20009-2204	

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, 2001
- 5 For calendar year 2000 or other tax year beginning 20, and ending 20
- 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 THE ORGANIZATION HAS BEEN RESTRUCTURING ITS FINANCIAL REPORTING SYSTEM AND NEEDS TIME TO TRAIN NEW STAFF TO COLLECT ACCURATE INFO TO FILE RETURN.

- 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 \$
- 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

Certified Public Accountant

806 HOLLYWOOD AVENUE

SILVER SPRING, MD 20901 ACCOUNTANT

Date 08/10/2001

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 JAMES D GOLDBLATT CPA PC
	Number and street (include suite, room, or apt. no.) Or a P.O. box number 806 HOLLYWOOD AVENUE
	City or town, province or state, and country (including postal or ZIP code) EP

WIPD 5/10/01

Form 8868

(December 2000)

Department of the Treasury
Internal Revenue ServiceApplication for Extension of Time To File an
Exempt Organization Return

OMB No 1545-1709

► File a separate application for each return

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

- If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this form)

Note Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

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

Note Form 990-T corporations requesting an automatic 6-month extension--check this box and complete Part I only

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns

Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041

Type or print	Name of Exempt Organization 21st CENTURY SCHOOL FUND, INC.	Employer Identification number 52-2139122
File by the due date for filing your return See instructions	Number, street and room or suite no. If a P.O. box, see instructions 2814 ADAMS MILL RD NW	
	City, town or post office, state and ZIP code. For a foreign address, see instructions WASHINGTON, DC 20009-2204	

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 August 15 2001, to file the exempt organization return for the organization named above. The extension is for the organization's return for
 calendar year 2000 or
 tax year beginning _____, 20_____, and ending _____, 20_____

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 \$ 0.

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

c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or if required by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ 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 ►

Title ►

Date ► EP 5/4/01

For Paperwork Reduction Act Notice, see instruction

SMA 68881-0001 T 220

JAMES D. GOLDBLATT CPA
806 Hollywood Avenue
Silver Spring, MD 20904
577 62 7215

Form 8868 (12-2000)

U.180 5/4/01