

Filing Instructions

HARLEM CENTER FOR EDUCATION, INC.

Exempt Organization Tax Return

Taxable Year Ended August 31, 2007

COPY

Date Due: July 15, 2008

Remittance: None is required. Your Form 990 for the tax year ended 8/31/07 shows no balance due. The return should be signed and dated on Page 8 by an officer representing the organization.

Mail To: Internal Revenue Service Center
Ogden, UT 84201-0027

If a private delivery service is used, mail to:
OSPC
1973 N. Rulon White Blvd.
Ogden, UT 84404

Other: Initial and date the copy of the return, and retain it for your records.

HARLEM CENTER FOR EDUCATION, INC.
1 EAST 104TH STREET
NEW YORK, NY 10029

Internal Revenue Service Center
Ogden, UT 84201-0027



Form **990**

Department of the Treasury
Internal Revenue Service

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

2005

Open to Public Inspection

A For the 2005 calendar year, or tax year beginning **9/01/06**, and ending **8/31/07**

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

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
HARLEM CENTER FOR EDUCATION, INC.

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
1 EAST 104TH STREET

City or town, state or country, and ZIP + 4
NEW YORK NY 10029

D Employer identification no.
13-2928903

E Telephone number
212-348-9200

F Accounting method: Cash Accrual Other (specify)

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

G Website: ▶ **www.harlemctred.com**

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

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization chooses to file a return, be sure to file a complete return. Some states require a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **1,149,774**

H and **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? Yes No (If "No," attach a list. See instr.)

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).

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

Revenue	1 Contributions, gifts, grants, and similar amounts received:			
	a Direct public support	1a	235,076	
	b Indirect public support	1b		
	c Government contributions (grants)	1c	908,390	
	d Total (add lines 1a through 1c) (cash \$ 1,143,466 noncash \$)	1d		1,143,466
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2		
	3 Membership dues and assessments	3		
	4 Interest on savings and temporary cash investments	4		6,308
	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)	6c		
7 Other investment income (describe)	7			
8a Gross amount from sales of assets other than inventory	(A) Securities	8a		
	(B) Other	8b		
		8c		
		8d		
9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>				
a Gross revenue (not including \$ of contributions reported on line 1a)	9a			
b Less: direct expenses other than fundraising expenses	9b			
c Net income or (loss) from special events (subtract line 9b from line 9a)	9c			
10a Gross sales of inventory, less returns and allowances		10a		
	b Less: cost of goods sold	10b		
	c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c		
11 Other revenue (from Part VII, line 103)	11			
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		1,149,774	
Expenses	13 Program services (from line 44, column (B))	13		932,390
	14 Management and general (from line 44, column (C))	14		19,423
	15 Fundraising (from line 44, column (D))	15		19,423
	16 Payments to affiliates (attach schedule)	16		
	17 Total expenses (add lines 16 and 44, column (A))	17		971,236
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18		178,538
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		89,471
	20 Other changes in net assets or fund balances (attach explanation) See Statement 1	20		12,639
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		280,648

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 the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22			
23	Specific assistance to individuals (attach schedule) <input type="checkbox"/>	23			
24	Benefits paid to or for members (attach schedule) _____	24			
25	Compensation of officers, directors, etc. _____	25	80,641	58,713	10,964
26	Other salaries and wages _____	26	467,535	467,535	
27	Pension plan contributions _____	27			
28	Other employee benefits _____	28	65,800	63,168	1,316
29	Payroll taxes _____	29			
30	Professional fundraising fees _____	30			
31	Accounting fees _____	31			
32	Legal fees _____	32			
33	Supplies _____	33	55,903	53,667	1,118
34	Telephone _____	34	16,517	15,857	330
35	Postage and shipping _____	35	6,384	6,128	128
36	Occupancy _____	36	105,432	101,216	2,108
37	Equipment rental and maintenance _____	37	41,877	40,201	838
38	Printing and publications _____	38			
39	Travel _____	39	27,170	26,084	543
40	Conferences, conventions, and meetings _____	40			
41	Interest _____	41			
42	Depreciation, depletion, etc. (attach schedule) _____	42	7,810	7,498	156
43	Other expenses not covered above (itemize):				
a	See Statement 2	43a	96,167	92,323	1,922
b	_____	43b			
c	_____	43c			
d	_____	43d			
e	_____	43e			
f	_____	43f			
g	_____	43g			
44	Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	971,236	932,390	19,423

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____; (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year	
Assets	45	Cash-non-interest-bearing	83,709	45	182,106
	46	Savings and temporary cash investments		46	
	47a	Accounts receivable			
		47a			
	b	Less: allowance for doubtful accounts			
		47b			47c
	48a	Pledges receivable			
		48a			
	b	Less: allowance for doubtful accounts			
		48b			48c
	49	Grants receivable		49	112,500
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51a	Other notes and loans receivable (attach schedule) See Worksheet	51a	3,550	
	b	Less: allowance for doubtful accounts	51b		
52	Inventories for sale or use		12,839	51c	3,550
53	Prepaid expenses and deferred charges		10,200	52	
54	Investments-securities See Statement 3 <input type="checkbox"/> Cost <input type="checkbox"/> FMV			53	1,388
55a	Investments-land, buildings, and equipment: basis	55a	11,843		
b	Less: accumulated depreciation (attach schedule) See Statement 4	55b			
			7,010	55c	11,843
56	Investments-other (attach schedule)			56	
57a	Land, buildings, and equipment: basis	57a			
b	Less: accumulated depreciation (attach schedule) See Statement 5	57b			
				57c	
58	Other assets (describe See Statement 6)		8,821	58	1,949
59	Total assets (must equal line 74). Add lines 45 through 58.		122,579	59	313,336
Liabilities	60	Accounts payable and accrued expenses	10,467	60	10,117
	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 See Statement 7)		22,641	65
66	Total liabilities. Add lines 60 through 65		33,108	66	32,688
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.				
	67	Unrestricted	89,471	67	152,648
	68	Temporarily restricted		68	128,000
	69	Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.				
	70	Capital stock, trust principal, or current funds		70	
	71	Paid-in or capital surplus, or land, building, and equipment fund		71	
	72	Retained earnings, endowment, accumulated income, or other funds		72	
	73	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)		89,471	73
74	Total liabilities and net assets/fund balances. Add lines 66 and 73.		122,579	74	313,336

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a	Total revenue, gains, and other support per audited financial statements		a	1,162,413
b	Amounts included on line but not on Part I, line 12: a			
1	Net unrealized gains on investments	b1		
2	Donated services and use of facilities	b2	12,639	
3	Recoveries of prior year grants	b3		
4	Other (specify):	b4		
	Add lines b1 through b4		b	12,639
c	Subtract line b from line a		c	1,149,774
d	Amounts included on Part I, line 12, but not on line a:			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify):	d2		
	Add lines d1 and d2		d	
e	Total revenue (Part I, line 12). Add lines c and d		e	1,149,774

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

a	Total expenses and losses per audited financial statements		a	971,236
b	Amounts included on line a but not Part I, line 17:			
1	Donated services and use of facilities	b1		
2	Prior year adjustments reported on Part I, line 20	b2		
3	Losses reported on Part I, line 20	b3		
4	Other (specify):	b4		
	Add lines b1 through b4		b	
c	Subtract line b from line a		c	971,236
d	Amounts included on Part I, line 17, but not on line a:			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify):	d2		
	Add lines d1 and d2		d	
e	Total expenses (Part I, line 17). Add lines c and d		e	971,236

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contrib. to employee benefit plans & deferred compensation plans	(E) Expense account & other allowances
LEWIS P. JONES, III 1 Chase Manhattan Plaza, 6th Floor New York NY	CHAIRMAN 0	0	0	0
MURRAY C. STOLTZ 600 5th Avenue New York NY	TREASURER/SE 0	0	0	0
SEYMOUR FLIEGEL 28 West 44th St., Suite 914 New York NY	BOARD MEMBER 0	0	0	0
ANTHONY LOPEZ 5800 Arlington Ave., Suite 12 S. Riversdale NY	BOARD MEMBER 0	0	0	0
LONNIE SOURY 150 West 25 Street, Suite 403 New York NY	BOARD MEMBER 0	0	0	0
PAULA J. MARTIN 1 East 104th Street New York NY	EXECUTIVE DI 0	80,641	0	0

