

Return of Organization Exempt From Income Tax

1999

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

Department of the Treasury Internal Revenue Service

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

This Form is Open to Public Inspection

A For the 1999 calendar year, OR tax year period beginning 1999, and ending

- B Check it: Change of address, Initial return, Final return, Amended return (required also for State reporting)

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

C Cry - Child Relief & You, Inc. 24 Greenbrook Road Berkeley Heights, NJ 07922

D Employer identification number 22-3122761 E Telephone number (908) 322-3782 F Check If exemption application is pending

G Type of organization Exempt under section 501(c) (3) (insert number) OR section 4947(a)(1) nonexempt charitable trust

Note: Section 501(c)(3) exempt organizations and 4947(a)(1) nonexempt charitable trusts MUST attach a completed Schedule A (Form 990).

H(a) Is this a group return filed for affiliates? Yes No (b) If "Yes," enter the number of affiliates for which this return is filed: (c) Is this a separate return filed by an organization covered by a group ruling? Yes No I If either box in H is checked "Yes," enter four-digit group exemption number (GEN) 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 it received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

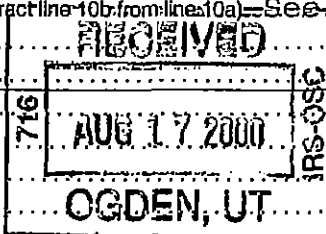
Note: Form 990-EZ may be used by organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at end of year.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 15.)

AUG 30 2000

FILED

Table with columns for line number, description, sub-column (a, b, c), and amount. Includes rows for contributions, program revenue, rental income, special events, and total revenue/expenses.



20

Part IV Balance Sheets (See Specific Instructions on page 22.)

		(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	70,321	45	10,565
	46 Savings and temporary cash investments	99,149	46	267,984
	47a Accounts receivable	47a		
	b Less: allowance for doubtful accounts	47b	47c	
	48a Pledges receivable	48a	12,500	
	b Less: allowance for doubtful accounts	48b		12,500
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees (attach sch)		50	
	51a Other notes and loans receivable (attach schedule)	51a		
	b Less: allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use	13,850	52	14,368
	53 Prepaid expenses and deferred charges		53	
	54 Investments - securities (attach schedule)	11,984	54	149,560
	55a Investments - land, buildings, and equipment: basis	55a		
	b Less: accumulated depreciation (attach schedule)	55b	55c	
56 Investments - other (attach schedule)		56		
57a Land, buildings, and equipment: basis	57a			
b Less: accumulated depreciation (attach schedule)	57b	57c		
58 Other assets (describe ▶ See Statement 9)		58	2,250	
59 Total assets (add lines 45 through 58) (must equal line 74)	195,304	59	457,227	
LIABILITIES	60 Accounts payable and accrued expenses	2,017	60	5,160
	61 Grants payable		61	209,320
	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)	2,017	66	214,480	
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	137,282	67	242,747
	68 Temporarily restricted	56,005	68	
	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 and column (B) must equal line 21)	193,287	73	242,747	
74 Total liabilities and net assets/fund balances (add lines 66 and 73)	195,304	74	457,227	

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 V Other Information (See Specific Instructions on page 25.)

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... 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. 78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 78b If "Yes," has it filed a tax return on Form 990-T for this year? 79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement. 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? 80b If "Yes," enter the name of the organization N/A and check whether it is exempt OR nonexempt. 81a Enter the amount of political expenditures, direct or indirect, as described in the instructions for line 81 81a 0 81b Did the organization file Form 1120-POL for this year? 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? 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 for reporting in Part III.) 82b N/A 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 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) organizations. 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) organizations. 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? 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 0 ; section 4912 0 ; section 4955 0 b 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year? If "Yes," attach a statement explaining each transaction 89b X c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958. 0 d Enter: Amount of tax in 89c, above, reimbursed by the organization 0 90a List the states with which a copy of this return is filed New Jersey b Number of employees employed in the pay period that includes March 12, 1999 (See Instructions.) 90b 0 91 The books are in care of Mrs. Meera Rao Telephone no. (908) 322-3782 Located at 24 Greenbrook Rd., Berk Hgts, NJ ZIP + 4 07922 92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here N/A and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A

Part VII Analysis of Income-Producing Activities (See Specific Instructions on page 29.)

Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies ...					
94 Membership dues and assessments					
95 Interest on savings & temporary cash investments			14	2,341	
96 Dividends and 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/loss from sales of assets other than inventory					
101 Net income or (loss) from special events			2	5,877	
102 Gross profit or (loss) from sales of inventory			5	13,557	
103 Other revenue: a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))				21,775	
105 Total (add line 104, columns (B), (D), and (E))					21,775

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

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See Specific Instructions on page 30.)

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).
	N/A

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instruction on page 30)

Name, address, and employer identification number of corporation or partnership	Percentage of ownership interest	Nature of business activities	Total income	End-of-year assets
N/A	%			
	%			
	%			
	%			

return, including accompanying schedules and statements, and to the best of my knowledge and belief, the information on this return is based on all information of which preparer has knowledge.
 8/10/00 SEEMA CHETAL TRSACRSP

**SCHEDULE A
(Form 990)**

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

OMB No. 1545-0047

1999

Department of the Treasury
Internal Revenue Service

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

Cry - Child Relief & You, Inc.

Employer identification number

22-3122761

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$50,000 ▶		0		

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 1 of the instructions. List each one (whether individuals or firms.) If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over \$50,000 for professional services ▶		0

Part III Statements About Activities

	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 the total expenses paid or incurred in connection with the lobbying activities. ▶ \$ <u>N/A</u> Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		X
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?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		X
e Transfer of any part of its income or assets?		X
If the answer to any question is "Yes," attach a detailed statement explaining the transactions.		
3 Does the organization make grants for scholarships, fellowships, student loans, etc.?	X	
4a Do you have a section 403(b) annuity plan for your employees?		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 instructions on page 2.)		

Part IV Reason for Non-Private Foundation Status (See pages 2 through 4 of the instructions.)

The organization is not a private foundation because it is: (Please check only **ONE** applicable box):

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

Provide the following information about the supported organizations. (See page 4 of the instructions.)

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

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

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

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

Calendar year (or fiscal year beginning in) ▶	(a) 1998	(b) 1997	(c) 1996	(d) 1995	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	277,537	154,121	166,136	168,855	766,649
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					
18 Gross income from interest, dividends, amounts received from payments on securities (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	1,946	1,234	1,234		4,414
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 sch. Do not include gain or (loss) from sale of capital assets. See. S.M. 11	82,319	12,061	10,831	15,477	120,688
23 Total of lines 15 through 22	361,802	167,416	178,201	184,332	891,751
24 Line 23 minus line 17	361,802	167,416	178,201	184,332	891,751
25 Enter 1% of line 23	3,618	1,674	1,782	1,843	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 N/A . . . ▶					26a
b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a government unit or publicly supported organization) whose total gifts for 1995 through 1998 exceeded the amount shown in line 26a. Enter the sum of all these excess amounts ▶					26b
c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶					26c
d Add: Amounts from column (e) for lines: 18 _____ 19 _____ 22 _____ 26b _____ ▶					26d
e Public support (line 26c minus line 26d total) ▶					26e
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶					26f %
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 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: (1998) _____ (1997) _____ (1996) _____ (1995) _____					
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 all these differences (the excess amounts) for each year: (1998) _____ (1997) _____ (1996) _____ (1995) _____					
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____ ▶	766,649				27c 766,649
d Add: Line 27a total and line 27b total ▶					27d
e Public support (line 27c total minus line 27d total) ▶					27e 766,649
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e) ▶					27f 891,751
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶					27g 85.97%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)). ▶					27h 0.49%

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1995 through 1998, 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 page 4 of the instructions.)

Part V

Private School Questionnaire (See page 4 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)

N/A

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?		
If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
.....			
.....			
.....			
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions?		
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
.....			
.....			
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities?		
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?		
b	Has the organization's right to such aid ever been revoked or suspended?		
If you answered "Yes" to either 34a or b, please explain using an attached statement.			
.....			
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.		

Part VI-A

Lobbying Expenditures by Electing Public Charities (See page 6 of the instructions.)
(To be completed ONLY by an eligible organization that filed Form 5768)

N/A

Check here **a** if the organization belongs to an affiliated group.
Check here **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	41	
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 7 of the instructions.)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 1999	(b) 1998	(c) 1997	(d) 1996	(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 8 of the instructions.)

N/A

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

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

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

Client 3660

Cry - Child Relief & You, Inc.

22-3122761

Statement 2
Form 990, Part I, Line 9
Net Income (Loss) from Special Events

Special Events:

A) Special Events and Programs

B)

C)

Other:

Special Events	A	B	C	Other	Total
Gross Receipts	\$ 30,331			0	30,331
Less: Contributions	0			0	0
Gross Revenue	30,331			0	30,331
Less: Direct Expenses	24,454			0	24,454
Net Income (Loss)	\$ 5,877			0	5,877

Statement 3
Form 990, Part I, Line 10
Gross Profit (Loss) from Sales of Inventory

Items Sold	Amount
Sales of Greeting Cards & T-shirts	\$ 32,230
Gross sales	\$ 32,230
Less returns & allowances	0
Net sales	\$ 32,230
Less: Cost of goods sold	18,673
Gross profit from sales of inventory	\$ 13,557

Statement 4
Form 990, Part I, Line 20
Other Changes in Net Assets or Fund Balances

Unrealized Gains on Securities Held	\$ 45,570
Total	\$ 45,570

Client 3660

Cry - Child Relief & You, Inc.

22-3122761

Statement 5
Form 990, Part II, Line 22
Grants and Allocations

Cash Grants and Allocations:

Class of Activity:	Grant	
Donee's Name:	Cry - Child Relief & You	
Donee's Address:	DDA Slum Wing Barat Ghar Bapu Park, New Delhi,	
Relationship of Donee:	Independent Organization	
Amount Given:		\$ 596,311
Class of Activity:	Grant	
Donee's Name:	Atlanta Day Shelter for W	
Donee's Address:	1039 Marietta St. NW Atlanta, GA 30318	
Relationship of Donee:	Independent Organization	
Amount Given:		5,000
Class of Activity:	Grant	
Donee's Name:	Jeffries Street Learning	
Relationship of Donee:	Dallas, Texas Independent Org.	
Amount Given:		5,000
Class of Activity:	Grant	
Donee's Name:	Mulhill Child & Fam. Deve	
Donee's Address:	101-A Oakland Street Trenton, NJ 08618	
Relationship of Donee:	Independent Org.	
Amount Given:		5,000
Class of Activity:	Grant	
Donee's Name:	StreetCats Foundations	
Relationship of Donee:	Oakland, CA Independent Org.	
Amount Given:		5,850
Total Cash Grants and Allocations		<u>\$ 617,161</u>
Total Grants and Allocations		<u>\$ 617,161</u>

Client 3660

Cry - Child Relief & You, Inc.

22-3122761

Statement 6
Form 990, Part II, Line 43
Other Expenses

Other Expenses	(A) Total	(B) Program Services	(C) Management & General	(D) Fundraising
Advertising	\$ 1,944	972		972
Bank Service Charges	1,970		1,970	
Cryterion Publishing	15,448	11,586		3,862
Dues and Subscriptions	350		350	
Insurance	3,161	1,580	1,581	
Licences and Permits	2,280	2,280		
Miscellaneous Expense	1,257	628	314	315
Office Expenses	5,380	2,690	2,690	
Program Expenses - other	24,454	18,341		6,113
Travel Expenses	610	305	305	
Volunteer Conference Exp	2,063			2,063
Web Hosting Expense	435	218		217
Total	\$ 59,352	38,600	7,210	13,542

Statement 7
Form 990, Part III
Organization's Primary Exempt Purpose

Supporting Programs to help poor and needy children

Statement 8
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses
Supporting small, struggling and medium sized projects in India and the United States that work toward child welfare programs that focus on education, training, illiteracy, ill health, oppression of communities and most importantly of women. children.	\$ 617,161	655,761
	<u>\$ 617,161</u>	<u>655,761</u>

Client 3660

Cry - Child Relief & You, Inc.

22-3122761

Statement 9
Form 990, Part IV, Line 58
Other Assets

	Ending
Prepaid Expenses	\$ 1,000
Unexpired Insurance	1,250
Total	<u>\$ 2,250</u>

Statement 10
Form 990, Part V
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title & avg. Hrs/wk devoted	Comp.	Employee Ben. Pln Contrib.	Expense Account/ Other
Dr. Chaitanya Divgi Mem.Sloan Kettering , 1275 Yor New York, NY 10021	President None	\$ 0	0	0
Mr. P.K. Vasudevan 48 Terrapin Lane Mercerville, NJ 08619	Trustee None		0	0
Mrs. Seema Chetal Fincial Res Grp, 152 E 52 ST New York, NY 10013	Treasurer None		0	0
Mr. Ronald Victor 2680 N. 1st St, Suite 130 San Jose, CA 95134	Secretary None		0	0
Ms. Amita Kapur President CRY India New Delhi, INDIA	Trustee None		0	0
Mr. Sabeer Bhatia 41688 Christy St. Fremont, CA 94538	Trustee None		0	0
Mr. DaCunha Media Specialist Mumbai, INDIA	Trustee None		0	0
Mr. Nandan Maluste Financial Planner Mumbai, India	Trustee None		0	0

Client 3660

Cry - Child Relief & You, Inc.

22-3122761

Statement 10 (Continued)
Form 990, Part V
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title & avg. Hrs/wk devoted	Comp.	Employee Ben. Pln Contrib.	Expense Account/ Other
Ms. Pervin Varma Director - CRY India Mumbai, India	Trustee None	0	0	0
		Total	\$ 0	0

Statement 11
Schedule A, Part IV-A, Line 22
Other Income

Description	(a) 1998	(b) 1997	(c) 1996	(d) 1995	(e) Total
Net Special Event Reve	\$ 73,237	10,536	10,831	15,477	110,081
Net Sales of Inventory	9,082	1,525	0	0	10,607
	<u>\$ 82,319</u>	<u>12,061</u>	<u>10,831</u>	<u>15,477</u>	<u>120,688</u>

Application for Extension of Time To File Certain Excise, Income, Information, and Other Returns

OMB No. 1545-0148

File a separate application for each return.

Please type or print. File the original and one copy by the due date for filing your return. See instructions on back.

Name
Cry - Child Relief & You, Inc.

Employer identification number
22-3122761

Number, street, and room or suite no. (or P.O. box no. if mail is not delivered to street address)
24 Greenbrook Road

City, town or post office, state, and ZIP code. For a foreign address, see instructions.
Berkeley Heights, NJ 07922

Note: Corporate income tax return filers must use Form 7004 to request an extension of time to file. Partnerships, REMICs, and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

1 I request an extension of time until 8/15, 2000, to file (check only one):

<input type="checkbox"/> Form 706-GS(D)	<input type="checkbox"/> Form 990-T (401(a) or 408(a) trust)	<input type="checkbox"/> Form 1120-ND (sec. 4951 taxes)	<input type="checkbox"/> Form 8612
<input type="checkbox"/> Form 706-GS(T)	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 3520-A	<input type="checkbox"/> Form 8613
<input checked="" type="checkbox"/> Form 990 or 990-EZ	<input type="checkbox"/> Form 1041 (estate) (see instructions)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 8725
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 5227	<input type="checkbox"/> Form 8804
<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1042	<input type="checkbox"/> Form 6069	<input type="checkbox"/> Form 8831

If the organization does not have an office or place of business in the United States, check this box

2a For calendar year 1999, or other tax year beginning _____ and ending _____

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

3 Has an extension of time to file been previously granted for this tax year? Yes No

4 State in detail why you need the extension Additional time is needed to gather information from various volunteer sources in order to file a fair and accurate return.

5a If this form is for Form 706-GS(D), Form 706-GS(T), 990-BL, 990-PF, 990-T, 1041 (estate), 1042, 1120-ND, 4720, 6069, 8612, 8613, 8725, 8804, or 8831, enter the tentative tax, less any nonrefundable credits. See instructions. \$ 0

b If this form is for Form 990-PF, 990-T, 1041 (estate), 1042, or 8804, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. \$ 0

c Balance due. Subtract line 5b from line 5a. Include your payment with this form, or deposit with FTD coupon if required. See instructions. \$ 0

Signature and Verification

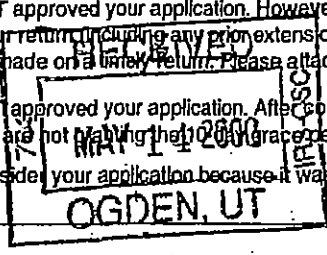
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete; and that I am authorized to prepare this form.

Signature [Handwritten Signature] Title CPA Date 5/08/00

FILE ORIGINAL AND ONE COPY. The IRS will show below whether or not your application is approved and will return the copy.

Notice to Applicant - To Be Completed by the IRS

- We HAVE approved your application. Please attach this form to your return.
- We HAVE NOT approved your application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of your 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 your return.
- We HAVE NOT approved your application. After considering the reasons stated in item 4, we cannot grant your request for an extension of time to file. We are not making the 10-day grace period.
- We cannot consider your application because it was filed after the due date of the return for which an extension was requested.
- Other: _____



By: _____ Director Date _____

If you want a copy of this form to be returned to an address other than that shown above, please enter the address to which the copy should be sent.

Name NOKE AND HEARD, LLP

Number, street, and room or suite no. (or P.O. box no. if mail is not delivered to street address) 469 MORRIS AVENUE

City, town or post office, state, and ZIP code. For a foreign address, see instructions. SUMMIT, NJ 07901

CRY - CHILD RELIEF AND YOU, INC.

FINANCIAL STATEMENTS

DECEMBER 31, 1999

CRY - CHILD RELIEF AND YOU, INC.

FINANCIAL STATEMENTS

FOR THE YEAR ENDED DECEMBER 31, 1999

CONTENTS

Independent Auditor's Report

EXHIBIT A - Statement of Financial Position

EXHIBIT B - Statement of Activities

EXHIBIT C - Statement of Cash Flows

Notes to Financial Statements

NOKE AND HEARD, L.L.P.

Certified Public Accountants

469 MORRIS AVENUE
SUMMIT, N.J. 07901-1564

INDEPENDENT AUDITOR'S REPORT

To the Board of Trustees of
CRY - Child Relief and You, Inc.
24 Greenbrook Road
Berkeley Heights, New Jersey

We have audited the accompanying Statement of Financial Position of CRY - Child Relief and You, Inc., (a nonprofit organization) as of December 31, 1999, and the related Statement of Activities, and Statement of Cash Flows for the year then ended. These financial statements are the responsibility of the Organization's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with generally accepted auditing standards. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of CRY - Child Relief and You, Inc., as of December 31, 1999, and its changes in its net assets and its cash flows for the year then ended, in conformity with generally accepted accounting principles.

Noke and Heard, LLP

July 6, 2000.

CRY - CHILD RELIEF AND YOU, INC.
STATEMENT OF FINANCIAL POSITION

EXHIBIT A

DECEMBER 31, 1999

ASSETS

Current assets

Cash and cash equivalents	\$ 278,549
Investments	149,560
Pledges receivable	12,500
Prepaid expenses	1,000
Unexpired insurance	1,250
Inventory available for sale	<u>14,368</u>
Total assets	<u>\$ 457,227</u>

LIABILITIES AND NET ASSETS

Current liabilities

Accrued expenses	\$ 5,160
Grants payable	<u>209,320</u>
Total liabilities	<u>214,480</u>

Net assets

Unrestricted	<u>242,747</u>
Total net assets	<u>242,747</u>
Total liabilities and net assets	<u>\$ 457,227</u>

See accompanying notes to financial statements.

CRY - CHILD RELIEF AND YOU, INC.
STATEMENT OF CASH FLOWS

EXHIBIT C

FOR THE YEAR ENDED DECEMBER 31, 1999

	<u>UNRESTRICTED</u>	<u>TEMPORARILY RESTRICTED</u>	<u>TOTAL</u>
<u>Cash flows from operating activities</u>			
Excess (deficit) of revenues over expenses	\$ 49,460	\$ -	\$ 49,460
Adjustments to reconcile change in net assets to net cash provided by operating activities			
Increase in pledges receivable	(12,500)	-	(12,500)
Increase in prepaid expenses	(1,000)	-	(1,000)
Increase in unexpired insurance	(1,250)	-	(1,250)
Increase in inventory	(518)	-	(518)
Increase in grants payable	209,320	-	209,320
Increase in accrued expenses	<u>3,143</u>	<u>-</u>	<u>3,143</u>
Net cash used by operating activities	<u>246,655</u>	<u>-</u>	<u>246,655</u>
<u>Cash flows from investing activities</u>			
Stock donations	(92,006)	-	(92,006)
Increase in market value of investments	<u>(45,570)</u>	<u>-</u>	<u>(45,570)</u>
Net cash used by investing activities	<u>(137,576)</u>	<u>-</u>	<u>(137,576)</u>
<u>Cash flows from financing activities</u>			
Assets released from restriction	<u>56,005</u>	<u>(56,005)</u>	<u>-</u>
Net increase (decrease) in cash and cash equivalents	165,084	(56,005)	109,079
Cash and cash equivalents, beginning of year	<u>113,465</u>	<u>56,005</u>	<u>169,470</u>
Cash and cash equivalents, end of year	<u>\$ 278,549</u>	<u>\$ -</u>	<u>\$ 278,549</u>

See accompanying notes to financial statements.

CRY - CHILD RELIEF AND YOU, INC.

NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 1999

NOTE A - NATURE OF ACTIVITIES

CRY - Child Relief and You, Inc., (CRY-USA) is an independent, non-political, non-religious not-for-profit organization, incorporated in New Jersey in 1991, that raises funds in order to support child welfare programs in India and the United States. Its objective is to restore to children their basic right to food, shelter, health and education by supporting projects which meet these goals.

The primary sources of revenue for CRY - Child Relief and You, Inc., are from direct public donations, fund raising projects and programs, and proceeds from the sale of greeting cards and miscellaneous items.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Presentation

Financial statement presentation follows the recommendations of the Financial Accounting Standards Board in its Statement of Financial Accounting Standards (SFAS) No. 117. The organization is required to report its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets and permanently restricted net assets. CRY-USA currently has no temporarily or permanently restricted net assets.

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Property and Equipment

CRY-USA has not acquired or received, as donation, any property and equipment during 1999 or any prior year and, accordingly, does not carry any depreciable assets on its Statement of Net Assets.

Inventories

Inventories are valued at the lower of cost or market, with cost determined by the first-in, first-out method.

Revenue Recognition

Contributions from donors are recognized as they are received and are reflected as increases in unrestricted or temporarily restricted net assets, depending on the existence or nature of donor-imposed restrictions. When a restriction expires, for example, when a purpose restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions.

CRY - CHILD RELIEF AND YOU, INC.

NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 1999

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - (Continuation)

CRY-USA receives a substantial amount of services donated by volunteers carrying out the goals of the organization. No amounts have been reflected in the financial statements for those services, since there is no objective way to set their value and, as such, do not meet the criteria for recognition under SFAS 116, Accounting for Contributions Received and Contributions Made.

Grants Payable

Grants payable represents all unconditional grants that have been authorized prior to year-end, but remain unpaid as of the statement of financial position date.

Income Taxes

CRY-USA is exempt from federal and state income taxes under Internal Revenue Code Section 501(c)(3) and applicable code sections from the State of New Jersey.

Cash and Cash Equivalents

CRY-USA maintains cash balances at several banks. Accounts at each institution are insured by the Federal Deposit Insurance Corporation up to \$100,000. CRY-USA Also maintains an account with a brokerage firm. The account contains a money market fund and is insured by the Security Investor Protection Corporation up to 75 million dollars in assets.

Investments

CRY-USA's investments in marketable securities are held for an indefinite period of time, and thus are classified as available for sale. Available-for-sale securities are recorded at their fair value on the Statement of Assets, Liabilities and Net Assets, with the change in fair value during the period included in operating earnings. All marketable securities held by CRY-USA are in an account with Bernard Herold & Co., Inc. and Merrill Lynch brokerage firms, and are detailed as follows:

	<u>Cost or Donation Basis</u>	<u>Market Value at 12/31/99</u>	<u>Gross Unrealized Gain</u>
<u>Available-for-sale securities:</u>			
Common stock	<u>\$103,990</u>	<u>\$149,560</u>	<u>\$ 45,570</u>
Totals	<u>\$103,990</u>	<u>\$149,560</u>	<u>\$ 45,570</u>