

# Application for Recognition of Exemption Under Section 501(c)(3) of the Internal Revenue Code

OMB No. 1545-0056  
 Note: If exempt status is approved, this application will be open for public inspection.

Read the instructions for each Part carefully.  
**A User Fee must be attached to this application.**  
 If the required information and appropriate documents are not submitted along with Form 8718 (with payment of the appropriate user fee), the application may be returned to you.

**Complete the Procedural Checklist on page 8 of the instructions.**

**Part I Identification of Applicant**

<b>1a</b> Full name of organization (as shown in organizing document)  <b>Gaskov Clergé Foundation (GCF)</b>	<b>2</b> Employer identification number (EIN) (If none, see page 3 of the <b>Specific Instructions</b> .)  <b>510   389906</b>
<b>1b</b> c/o Name (if applicable)  <b>Pierre-Richard Jason</b>	<b>3</b> Name and telephone number of person to be contacted if additional information is needed  <b>( 516 ) 373-4920 P. Richard Jason</b>
<b>1c</b> Address (number and street) <span style="float: right;">Room/Suite</span>  <b>P.O. Box 77301</b>	
<b>1d</b> City, town, or post office, state, and ZIP + 4. If you have a foreign address, see <b>Specific Instructions</b> for Part I, page 3.  <b>Washington, DC 20013</b>	<b>4</b> Month the annual accounting period ends  <b>January</b>
<b>1e</b> Web site address <b>www.gaskov.org (currently under construction)</b>	<b>5</b> Date incorporated or formed <b>04/29/1999</b>
<b>6</b> Check here if applying under section: <b>a</b> <input type="checkbox"/> 501(e) <b>b</b> <input type="checkbox"/> 501(f) <b>c</b> <input type="checkbox"/> 501(k) <b>d</b> <input type="checkbox"/> 501(n)	
<b>7</b> Did the organization previously apply for recognition of exemption under this Code section or under any other section of the Code? If "Yes," attach an explanation. <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>	
<b>8</b> Is the organization required to file Form 990 (or Form 990-EZ)? If "No," attach an explanation (see page 3 of the <b>Specific Instructions</b> ). <span style="float: right;"><input type="checkbox"/> N/A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</span>	
<b>9</b> Has the organization filed Federal income tax returns or exempt organization information returns? If "Yes," state the form numbers, years filed, and Internal Revenue office where filed. <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>	

**10** Check the box for the type of organization. ATTACH A CONFORMED COPY OF THE CORRESPONDING ORGANIZING DOCUMENTS TO THE APPLICATION BEFORE MAILING. (See **Specific Instructions** for Part I, Line 10, on page 3.) See also Pub. 557 for examples of organizational documents.)

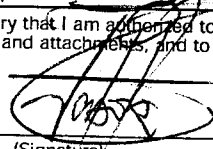
**a**  Corporation—Attach a copy of the Articles of Incorporation (including amendments and restatements) showing approval by the appropriate state official; also include a copy of the bylaws.

**b**  Trust— Attach a copy of the Trust Indenture or Agreement, including all appropriate signatures and dates.

**c**  Association— Attach a copy of the Articles of Association, Constitution, or other creating document, with a declaration (see instructions) or other evidence the organization was formed by adoption of the document by more than one person; also include a copy of the bylaws.

If the organization is a corporation or an unincorporated association that has not yet adopted bylaws, check here

I declare under the penalties of perjury that I am authorized to sign this application on behalf of the above organization and that I have examined this application, including the accompanying schedules and attachments, and to the best of my knowledge it is true, correct, and complete.

Please Sign Here **A**  **Pierre-Richard Jason - Treasurer** **12/06/99**  
 (Signature) (Type or print name and title or authority of signer) (Date)

**Part II** Activities and Operational Information

- 1 Provide a detailed narrative description of all the activities of the organization—past, present, and planned. **Do not merely refer to or repeat the language in the organizational document.** List each activity separately in the order of importance based on the relative time and other resources devoted to the activity. Indicate the percentage of time for each activity. Each description should include, as a minimum, the following: **(a)** a detailed description of the activity including its purpose and how each activity furthers your exempt purpose; **(b)** when the activity was or will be initiated; and **(c)** where and by whom the activity will be conducted.

Refer to Attachment A

- 
- 2 What are or will be the organization's sources of financial support? List in order of size.

Refer to Attachment B

- 
- 3 Describe the organization's fundraising program, both actual and planned, and explain to what extent it has been put into effect. Include details of fundraising activities such as selective mailings, formation of fundraising committees, use of volunteers or professional fundraisers, etc. Attach representative copies of solicitations for financial support.

Refer to Attachment B

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**Part II** Activities and Operational Information (Continued)

4 Give the following information about the organization's governing body:

a Names, addresses, and titles of officers, directors, trustees, etc.

b Annual compensation

Refer to Attachment F

0.00

c Do any of the above persons serve as members of the governing body by reason of being public officials or being appointed by public officials?  Yes  No  
If "Yes," name those persons and explain the basis of their selection or appointment.

d Are any members of the organization's governing body "disqualified persons" with respect to the organization (other than by reason of being a member of the governing body) or do any of the members have either a business or family relationship with "disqualified persons"? (See **Specific Instructions** for Part II, Line 4d, on page 3.)  Yes  No  
If "Yes," explain.

5 Does the organization control or is it controlled by any other organization?  Yes  No  
Is the organization the outgrowth of (or successor to) another organization, or does it have a special relationship with another organization by reason of interlocking directorates or other factors?  Yes  No  
If either of these questions is answered "Yes," explain.

6 Does or will the organization directly or indirectly engage in any of the following transactions with any political organization or other exempt organization (other than a 501(c)(3) organization): (a) grants; (b) purchases or sales of assets; (c) rental of facilities or equipment; (d) loans or loan guarantees; (e) reimbursement arrangements; (f) performance of services, membership, or fundraising solicitations; or (g) sharing of facilities, equipment, mailing lists or other assets, or paid employees?  Yes  No  
If "Yes," explain fully and identify the other organizations involved.

7 Is the organization financially accountable to any other organization?  Yes  No  
If "Yes," explain and identify the other organization. Include details concerning accountability or attach copies of reports if any have been submitted.

**Part II** Activities and Operational Information (Continued)

8 What assets does the organization have that are used in the performance of its exempt function? (Do not include property producing investment income.) If any assets are not fully operational, explain their status, what additional steps remain to be completed, and when such final steps will be taken. If none, indicate "N/A."

N/A

9 Will the organization be the beneficiary of tax-exempt bond financing within the next 2 years? . . . .  Yes  No

10a Will any of the organization's facilities or operations be managed by another organization or individual under a contractual agreement? . . . .  Yes  No

b Is the organization a party to any leases? . . . .  Yes  No

If either of these questions is answered "Yes," attach a copy of the contracts and explain the relationship between the applicant and the other parties.

11 Is the organization a membership organization? . . . .  Yes  No

If "Yes," complete the following:

a Describe the organization's membership requirements and attach a schedule of membership fees and dues.

b Describe the organization's present and proposed efforts to attract members and attach a copy of any descriptive literature or promotional material used for this purpose.

c What benefits do (or will) the members receive in exchange for their payment of dues?

12a If the organization provides benefits, services, or products, are the recipients required, or will they be required, to pay for them? . . . .  N/A  Yes  No  
If "Yes," explain how the charges are determined and attach a copy of the current fee schedule.

b Does or will the organization limit its benefits, services, or products to specific individuals or classes of individuals? . . . .  N/A  Yes  No

If "Yes," explain how the recipients or beneficiaries are or will be selected.

13 Does or will the organization attempt to influence legislation? . . . .  Yes  No

If "Yes," explain. Also, give an estimate of the percentage of the organization's time and funds that it devotes or plans to devote to this activity.

14 Does or will the organization intervene in any way in political campaigns, including the publication or distribution of statements? . . . .  Yes  No

If "Yes," explain fully.

**Part III** Technical Requirements

1 Are you filing Form 1023 within 15 months from the end of the month in which your organization was created or formed?  Yes  No  
If you answer "Yes," do not answer questions on lines 2 through 6 below.

2 If one of the exceptions to the 15-month filing requirement shown below applies, check the appropriate box and proceed to question 7.

**Exceptions**—You are not required to file an exemption application within 15 months if the organization:

- a Is a church, interchurch organization of local units of a church, a convention or association of churches, or an integrated auxiliary of a church. See **Specific Instructions**, Line 2a, on page 4;
- b Is not a private foundation and normally has gross receipts of not more than \$5,000 in each tax year; or
- c Is a subordinate organization covered by a group exemption letter, but only if the parent or supervisory organization timely submitted a notice covering the subordinate.

3 If the organization does not meet any of the exceptions on line 2 above, are you filing Form 1023 within 27 months from the end of the month in which the organization was created or formed?  Yes  No

If "Yes," your organization qualifies under Regulation section 301.9100-2, for an automatic 12-month extension of the 15-month filing requirement. Do not answer questions 4 through 6.

If "No," answer question 4.

4 If you answer "No" to question 3, does the organization wish to request an extension of time to apply under the "reasonable action and good faith" and the "no prejudice to the interest of the government" requirements of Regulations section 301.9100-3?  Yes  No

If "Yes," give the reasons for not filing this application within the 27-month period described in question 3. See **Specific Instructions**, Part III, Line 4, before completing this item. Do not answer questions 5 and 6.

If "No," answer questions 5 and 6.

5 If you answer "No" to question 4, your organization's qualification as a section 501(c)(3) organization can be recognized only from the date this application is filed. Therefore, do you want us to consider the application as a request for recognition of exemption as a section 501(c)(3) organization from the date the application is received and not retroactively to the date the organization was created or formed?  Yes  No

6 If you answer "Yes" to question 5 above and wish to request recognition of section 501(c)(4) status for the period beginning with the date the organization was formed and ending with the date the Form 1023 application was received (the effective date of the organization's section 501(c)(3) status), check here  and attach a completed page 1 of Form 1024 to this application.

**Part III** Technical Requirements (Continued)

- 7 Is the organization a private foundation?  
 **Yes** (Answer question 8.)  
 **No** (Answer question 9 and proceed as instructed.)

- 8 If you answer "Yes" to question 7, does the organization claim to be a private operating foundation?  
 **Yes** (Complete Schedule E.)  
 **No**

After answering question 8 on this line, go to line 14 on page 7.

- 9 If you answer "No" to question 7, indicate the public charity classification the organization is requesting by checking the box below that most appropriately applies:

**THE ORGANIZATION IS NOT A PRIVATE FOUNDATION BECAUSE IT QUALIFIES:**

- |   |  |  |
|---|--|--|
| a | <input type="checkbox"/> As a church or a convention or association of churches<br>(CHURCHES MUST COMPLETE SCHEDULE A.)  | Sections 509(a)(1)<br>and 170(b)(1)(A)(i)                          |
| b | <input type="checkbox"/> As a school (MUST COMPLETE SCHEDULE B.)   | Sections 509(a)(1)<br>and 170(b)(1)(A)(ii)                         |
| c | <input type="checkbox"/> As a hospital or a cooperative hospital service organization, or a<br>medical research organization operated in conjunction with a<br>hospital (These organizations, except for hospital service<br>organizations, MUST COMPLETE SCHEDULE C.)   | Sections 509(a)(1)<br>and 170(b)(1)(A)(iii)                        |
| d | <input type="checkbox"/> As a governmental unit described in section 170(c)(1).  | Sections 509(a)(1)<br>and 170(b)(1)(A)(v)                          |
| e | <input type="checkbox"/> As being operated solely for the benefit of, or in connection with,<br>one or more of the organizations described in a through d, g, h, or i<br>(MUST COMPLETE SCHEDULE D.)   | Section 509(a)(3)  |
| f | <input type="checkbox"/> As being organized and operated exclusively for testing for public<br>safety.   | Section 509(a)(4)  |
| g | <input type="checkbox"/> As being operated for the benefit of a college or university that is<br>owned or operated by a governmental unit.   | Sections 509(a)(1)<br>and 170(b)(1)(A)(iv)                         |
| h | <input type="checkbox"/> As receiving a substantial part of its support in the form of<br>contributions from publicly supported organizations, from a<br>governmental unit, or from the general public.  | Sections 509(a)(1)<br>and 170(b)(1)(A)(vi)                         |
| i | <input checked="" type="checkbox"/> As normally receiving not more than one-third of its support from<br>gross investment income and more than one-third of its support from<br>contributions, membership fees, and gross receipts from activities<br>related to its exempt functions (subject to certain exceptions). | Section 509(a)(2)  |
| j | <input type="checkbox"/> The organization is a publicly supported organization but is not sure<br>whether it meets the public support test of h or i. The organization<br>would like the IRS to decide the proper classification.  | Sections 509(a)(1)<br>and 170(b)(1)(A)(vi)<br>or Section 509(a)(2) |

**If you checked one of the boxes a through f in question 9, go to question 14. If you checked box g in question 9, go to questions 11 and 12. If you checked box h, i, or j, in question 9, go to question 10.**

**Part III** Technical Requirements (Continued)

- 10** If you checked box **h**, **i**, or **j** in question 9, has the organization completed a tax year of at least 8 months?  
 **Yes**—Indicate whether you are requesting:  
 A definitive ruling. (Answer questions 11 through 14.)  
 An advance ruling. (Answer questions 11 and 14 and attach two Forms 872-C completed and signed.)  
 **No**—You must request an advance ruling by completing and signing two Forms 872-C and attaching them to the Form 1023.
- 11** If the organization received any unusual grants during any of the tax years shown in Part IV-A, **Statement of Revenue and Expenses**, attach a list for each year showing the name of the contributor; the date and the amount of the grant; and a brief description of the nature of the grant.

N/A

- 12** If you are requesting a definitive ruling under section 170(b)(1)(A)(iv) or (vi), check here  and:  
**a** Enter 2% of line 8, column (e), Total, of Part IV-A \_\_\_\_\_  
**b** Attach a list showing the name and amount contributed by each person (other than a governmental unit or "publicly supported" organization) whose total gifts, grants, contributions, etc., were more than the amount entered on line **12a** above.
- 13** If you are requesting a definitive ruling under section 509(a)(2), check here  and:  
**a** For each of the years included on lines 1, 2, and 9 of Part IV-A, attach a list showing the name of and amount received from each "disqualified person." (For a definition of "disqualified person," see **Specific Instructions**, Part II, Line 4d, on page 3.)  
**b** For each of the years included on line 9 of Part IV-A, attach a list showing the name of and amount received from each payer (other than a "disqualified person") whose payments to the organization were more than \$5,000. For this purpose, "payer" includes, but is not limited to, any organization described in sections 170(b)(1)(A)(i) through (vi) and any governmental agency or bureau.

<b>14</b> Indicate if your organization is one of the following. If so, complete the required schedule. (Submit only those schedules that apply to your organization. <b>Do not submit blank schedules.</b> )	Yes	No	If "Yes," complete Schedule:
Is the organization a church? . . . . .		✓	A
Is the organization, or any part of it, a school? . . . . .		✓	B
Is the organization, or any part of it, a hospital or medical research organization? . . . . .		✓	C
Is the organization a section 509(a)(3) supporting organization? . . . . .		✓	D
Is the organization a private operating foundation? . . . . .		✓	E
Is the organization, or any part of it, a home for the aged or handicapped? . . . . .		✓	F
Is the organization, or any part of it, a child care organization? . . . . .		✓	G
Does the organization provide or administer any scholarship benefits, student aid, etc.? . . . .		✓	H
Has the organization taken over, or will it take over, the facilities of a "for profit" institution? . . .		✓	I

**Part IV Financial Data**

Complete the financial statements for the current year and for each of the 3 years immediately before it. If in existence less than 4 years, complete the statements for each year in existence. If in existence less than 1 year, also provide proposed budgets for the 2 years following the current year.

**A. Statement of Revenue and Expenses**

		Current tax year	3 prior tax years or proposed budget for 2 years			
		(a) From <u>04/29</u> to <u>11/16/99</u>	(b) <u>Budg.</u> <u>FY1999</u>	(c) <u>Budg.</u> <u>FY2000</u>	(d) _____	(e) TOTAL
<b>Revenue</b>	1 Gifts, grants, and contributions received (not including unusual grants—see page 6 of the instructions).	9,891	27,400	111,000		
	2 Membership fees received	0				
	3 Gross investment income (see instructions for definition)	0				
	4 Net income from organization's unrelated business activities not included on line 3	0				
	5 Tax revenues levied for and either paid to or spent on behalf of the organization	0				
	6 Value of services or facilities furnished by a governmental unit to the organization without charge (not including the value of services or facilities generally furnished the public without charge)	0				
	7 Other income (not including gain or loss from sale of capital assets) (attach schedule)	0				
	<b>8 Total</b> (add lines 1 through 7)	<b>9,891</b>	<b>27,400</b>	<b>111,000</b>		
	9 Gross receipts from admissions, sales of merchandise or services, or furnishing of facilities in any activity that is not an unrelated business within the meaning of section 513. Include related cost of sales on line 22	0				
	<b>10 Total</b> (add lines 8 and 9)	<b>9,891</b>				
	11 Gain or loss from sale of capital assets (attach schedule)	0				
	12 Unusual grants	0				
	<b>13 Total revenue</b> (add lines 10 through 12)	<b>9,891</b>	<b>27,400</b>	<b>111,000</b>		
<b>Expenses</b>	<b>14 Fundraising expenses</b>	<b>5,000</b>	<b>11,600</b>	<b>98,040</b>		
	15 Contributions, gifts, grants, and similar amounts paid (attach schedule)	0				
	16 Disbursements to or for benefit of members (attach schedule)	0				
	17 Compensation of officers, directors, and trustees (attach schedule)	0				
	18 Other salaries and wages	0				
	19 Interest	0				
	20 Occupancy (rent, utilities, etc.)	0				
	21 Depreciation and depletion	24				
	22 Other (attach schedule)	1,923.10	5,287			
	<b>23 Total expenses</b> (add lines 14 through 22)	<b>6,923.10</b>	<b>16,887</b>	<b>98,040</b>		
	<b>24 Excess of revenue over expenses</b> (line 13 minus line 23)	<b>2,967.90</b>	<b>10,513</b>	<b>12,690</b>		



**Part IV** Financial Data (Continued)

B. Balance Sheet (at the end of the period shown)		Current tax year Date _____
<b>Assets</b>		
1	Cash . . . . .	4,329
2	Accounts receivable, net . . . . .	1,900
3	Inventories . . . . .	0
4	Bonds and notes receivable (attach schedule) . . . . .	0
5	Corporate stocks (attach schedule) . . . . .	0
6	Mortgage loans (attach schedule) . . . . .	0
7	Other investments (attach schedule) . . . . .	0
8	Depreciable and depletable assets (attach schedule) . . . . .	623
9	Land . . . . .	0
10	Other assets (attach schedule) . . . . .	0
11	<b>Total assets</b> (add lines 1 through 10) . . . . .	<b>6,852</b>
<b>Liabilities</b>		
12	Accounts payable . . . . .	0
13	Contributions, gifts, grants, etc., payable . . . . .	0
14	Mortgages and notes payable (attach schedule) . . . . .	0
15	Other liabilities (attach schedule) . . . . .	0
16	<b>Total liabilities</b> (add lines 12 through 15) . . . . .	<b>0</b>
<b>Fund Balances or Net Assets</b>		
17	Total fund balances or net assets . . . . .	
18	<b>Total liabilities and fund balances or net assets</b> (add line 16 and line 17) . . . . .	<b>6,852</b>

If there has been any substantial change in any aspect of the organization's financial activities since the end of the period shown above, check the box and attach a detailed explanation . . . . .

## **Gaskov Clergé Foundation (GCF) Activities and Operational Information**

In support of its mission, the Gaskov Clergé Foundation will:

- promote education through various programs and scholarships both in the United States and in Haiti
- support and develop preventive health care programs in Haiti
- Sponsor young Haitian athletes both in the United States and in Haiti

### **Education & Sciences:**

- In the year 2000 and beyond, the foundation will implement an education and science awareness program through a series of workshops, seminars and career planning sessions in inner city schools. This is intended to promote and stimulate the interest of under-represented students in higher education and in various career options with an emphasis in sciences and technology.
- The foundation will be disbursing scholarship funds both in the United States and Haiti. Currently in the planning, is the establishment of an endowment fund at Howard University for the 2000-2001 school year. To be eligible for the endowment's scholarship, an undergraduate student must demonstrate excellence in the field of Biological Sciences and have an overall average of at least 3.0. As the foundation grows, one of its objectives is to provide scholarship funds to students in inner city schools. The eligibility criteria for those funds have been set forth by the Education and Sciences committee (for more details, refer to attachment A.1). The money to feed those funds is being provided by supporters of the Gaskov Clergé Foundation. Upon approval of its tax-exempt status, the foundation will pursue grants that will support this program.
- The foundation has begun the selection process for ten children in Haiti as recipients of GCF Scholarship funds for the 1999 -2000 school year. Those children's full tuition, uniforms, and books will be paid in full by the foundation. The qualification criteria are: 1) the children have to come from economically disadvantaged families; 2) at the end of the school year, they must meet the requirements to be promoted to the next level; 3) they must adhere to the rules and regulations of their respective schools. The foundation will work closely with the various participating Haitian schools to monitor the selected children's progress. This is a pilot program for the organization, as its success rate increases, the program will accommodate more participants. The organization's goal is to nurture and encourage those students' pursuit of academic excellence.
- Members of the Science and Education Committee are currently conducting a feasibility study on an annual program entitled "The Cultural Bridge" to be implemented in the United States. The objective of such program would be to establish a rapport between the US born children of Haitian parents and Haitian born children who have recently migrated to the United States. We hope to use a "buddy system model" to match each US born child with a Haitian child for one or two weeks. Since the program's emphasis will be on Cultural identity and the Arts and Sciences, the children would be exposed to museums, Historical sites, as well as the science laboratories in the metropolitan area. What we hope to accomplish through age appropriate dialogues and round table discussions, is to possibly instill the foundation of a mutual respect for similarities and differences among the two groups, as well as an understanding and sense of pride in a Haitian rooted identity. If the foundation is granted a 501c3 status, it will pursue grants that will make such program available to those children by Summer 2000.

**Health:**

The foundation is strongly committed to preventive health care. Since Haiti is in dire need of medical assistance, our health programs will focus mainly on that country.

- For example, GCF's Health committee is in the process of planning the first "Annual GCF Mobile Clinic", to be held in one of the poorest neighborhoods of a city called Les Cayes, in Haiti. The staff for the Mobile clinic will include at least six doctors, two dentists, three nurses, one dental assistant, and a support staff. For a period of five days, that team will provide FREE pediatric and medical screening, FREE dental assistance (including filling and extraction). The goal is to service at least five hundred people in five days. The upcoming event is tentatively scheduled for the month of March 2000.
- Furthermore, according to local physicians in Les Cayes, there is a high incidence of HIV infection in the southern part of Haiti. In the spirit of prevention and with the support of the AIDS Council of New York, GCF has distributed free condoms to individuals who are currently living a high-risk life style in the city of Les Cayes Haiti. That initiative was extremely well received by the local folks and by popular demand, we are looking into ways of scheduling monthly distribution of condoms in various parts of Haiti. In that respect, one of the doctors on our board is currently developing a plan that will help the foundation provide counseling and reproductive health education to the city of Les Cayes. Our objective is to replicate that program in all major cities of Haiti by year 2005.

**Sports:**

GCF's Sports committee is in the process of identifying young athletes that would be eligible for GCF's sponsorship. Already, a young and promising mid-distance and marathon runner from Bergeaud, ranked 2<sup>nd</sup> nationally in Haiti, is receiving technical and financial help from the Foundation to further his athletic development.

## **Gaskov Clergé Foundation (GCF)**

### **GCF's current and future sources of financial support:**

- Corporate Donations and Grants
- Fundraising Parties/Picnics
- Raffles, Auctions, etc.
- Solicitation letters (to selected group of supporters)
- Board members donations
- Other donations.

### **Fund Raising Programs**

For the short term, the Gaskov Clergé Foundation's fundraising program centers around 2 major group of activities.

- a- Fundraising parties and picnics.
- b- Raffles.

All fundraising activities are planned and executed by the Fundraising committee. The committee is composed of a group of totally dedicated and inexperienced volunteers – none of whom is a professional fundraiser-, nominated and empowered by the board of directors to act on its behalf.

GCF's first annual Fundraising Picnic-à-la-Gaskov was held at Prospect Park, in Brooklyn NY, on August 1, 1999. The goal of the event was to raise funds for the Foundation's education program. To that effect, Foundation members and volunteers solicited contributions from their friends and families. An invitation "flyer" was also sent to a selected group of supporters, living outside the Tri-State area (See Attachment B1 and Fundraising Budget).

The first annual fundraising dinner/party will be held on December 11, 1999, in Hollis, NY. For this event, 400 invitations/solicitations were mailed to GCF supporters in different parts of the country. The proceeds of the dinner/party will go toward the foundation's Health Prevention Program and the Scholarship Fund (Attachment B2 and Fundraising Budget).

Note: The Gaskov Clergé Scholarship Fund will be endowed at Howard University in Washington, D.C., and will benefit students who demonstrated excellence in the field of Biological Sciences.

Raffles constitute the other major source of funding for the foundation. Raffles are held during most GCF events and prizes range from a DVD player –valued at \$350.00- to a car CD player kit – valued at \$100.00.

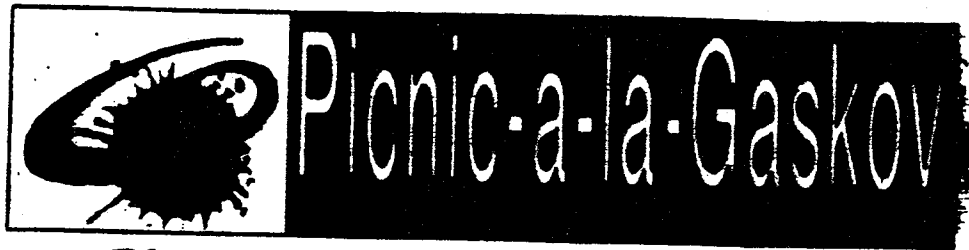
It should be noted also that each of the 13 board members volunteered to each contribute \$200.00, and Gaskov Clergé's parents, as his beneficiaries, donated \$2,500.00 to the start-up funds of GCF.

GCF will continue to rely on annual dinner/parties and picnics to galvanize support for its programs and energize its supporters. However, the Fundraising committee is anticipating that, as soon as GCF's tax-exempt status is approved, corporate donations and grants will become the primary source of funding of the foundation's philanthropic activities. The committee is currently developing letters of inquiry and grant proposals that will be sent out to selected corporations and private institutions.

## Fundraising Projected Revenue

The following is the GCF Fundraising Budget for the fiscal periods February 1999 – January 2000 and February 2000 – January 2001.

#	Activity/Event	Date	Projected Revenue (\$)	Actual (YTD) (\$)
1.	1 <sup>st</sup> Annual Picnic-A-La-Gaskov	08/01/1999	4,000.00	6,000.00
2.	Raffle of DVD Player	08/01/1999	300.00	541.00
3.	Board Members Donation	On-going	2,600.00	850.00
4.	Donation from Gaskov Clergé's parents	09/04/1999	2,500.00	2,500.00
5.	1 <sup>st</sup> Annual Dinner/Party	12/11/1999	18,000.00	-
<b>1999 Fundraising Budget Total</b>			<b>27,400.00</b>	<b>9,891.00</b>
6.	2 <sup>nd</sup> Annual Picnic-A-La-Gaskov	07/30/2000	6,000.00	-
7.	2 <sup>nd</sup> Annual Dinner/Party	12/09/2000	20,000.00	-
8.	Education Grant	12/2000	20,000.00	-
9.	Health Prevention /Family Planning Grant	12/2000	50,000.00	-
10.	Corporate Donations	12/2000	10,000.00	-
11.	Board members /supporters donation	01-12/2000	5,000.00	-
<b>2000 Fundraising Budget Total</b>			<b>111,000.00</b>	



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Please join us for an afternoon of fun at the  
1st Annual Picnic-à-la-Gaskov to benefit the  
**Gaskov Clergé Foundation**

**Date:** August 1, 1999 (no rain date)

**Time:** 12:00 (noon) to 5pm

**Where:** Prospect Park Plaza Area  
Prospect Park West, 7th St. entrance  
(Near the Sugar Bowl)

**Contribution:** Cash or Check payable to:  
Gaskov Clergé Foundation .

**ATTACHMENT B2**

*The Gaskov Clergé Foundation*

*requests the pleasure of your presence*

*at its first Annual Dinner Party*

*on December Eleventh 1999*

*Nine Thirty in the evening*

*Temple Israel of Jamaica*

*188-15 McLaughlin Avenue*

*Holliswood, New York*

*Proceeds will benefit the*

*"GCF Clinique Mobile 2000 in Haiti"*

**RSVP**

*\_\_ I would like to reserve \_\_ tickets at \$50.00 each.  
\_\_ I am unable to attend, but enclosed is my contribution.  
Total enclosed \$ \_\_*

*Entrée Selection (one per ticket)*

*\_\_ Filet aux Pommes*

*\_\_ Poulet Chasseur*

*\_\_ Poisson*

*Please make check payable to: Gaskov Clergé Foundation*

*Limited Seating Available  
RSVP by November 11, 1999*

*Cocktails at:  
9:30 PM*

**Gaskov Clergé Foundation (GCF)**

*Please Provide us with a few of your friends and/or family members  
who would be interested in the work of GCF*

*Name: \_\_\_\_\_*

*Address: \_\_\_\_\_*

*City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_*

*Phone \_\_\_\_\_ Email \_\_\_\_\_*

*Name: \_\_\_\_\_*

*Address: \_\_\_\_\_*

*City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_*

*Phone \_\_\_\_\_ Email \_\_\_\_\_*

**Gaskov Clergé Foundation (GCF)  
Proposed Budget for FY 1999 & 2000**

ITEM	FISCAL YEAR	
	1999	2000
Incorporation filing fees	208	
Corporate Seal	30	
The Non-Profit Hand Book	30	
<b>One-Time Incorporation SUBTOTAL</b>	<b>268</b>	
Deleware State Registered Agent fee	45	45
Deleware State Taxes	-	100
Post Office Box	45	45
Telephone Services	150	200
Postage	300	500
Office Supplies & Equipment	700	800
Subscriptions	60	100
Books	50	100
Printing and copying	100	250
Licenses/Application Fees	584	-
Miscellaneous	50	100
<b>Annual Expenses SUBTOTAL</b>	<b>1,450</b>	<b>2,140</b>
<b>FUND RAISING EXPENSES</b>		
Annual Picnic	2,600	3,000
Annual Dinner	9,000	15,000
Grant Seeking	-	1,000
<b>Fund Raising Expense TOTAL</b>	<b>11,600</b>	<b>19,000</b>
<b>PROGRAMS EXPENSES</b>		
Scholarships	3,100	10,000
Education Programs	-	10,000
Sports Programs	350	3,000
Health Programs	-	50,000
<b>Programs TOTAL</b>	<b>3,450</b>	<b>73,000</b>
<b>PROFESSIONAL SERVICES</b>		
CPA tax Audit	-	500
Attorney retainer	-	1,000
Insurance fees	-	1,500
<b>Professional Services TOTAL</b>	<b>-</b>	<b>3,000</b>
<b>WEB PRESENCE</b>		
Website Domain Registration (InterNIC)	119	-
Website Design & Hosting	-	900
<b>Web Presence TOTAL</b>	<b>119</b>	<b>900</b>
<b>FISCAL YEAR GRAND TOTAL</b>	<b>16,887</b>	<b>98,040</b>

Notes: Fiscal Year starts February and ends on January 31 of each year; All Expenses are projected



**Gaskov Clergé Foundation (GCF)  
Schedule of Other Expenses**

<b>Date</b>	<b>Expense</b>	<b>Amount</b>	<b>Explanation</b>
04/01/1999	The Non-Profit Handbook	30.00	Purchase book for guidance
04/29/1999	Incorporation and Filing Fees	208.00	Paid to Registered Agents Ltd in DE
09/01/1999	Image Checks	29.50	Check Book (Desk Set)
09/01/1999	Subscription	40.00	Subscription to Non-Profit Database
09/05/1999	Purchase of 5 chairs	45.00	09/05/99 Board Meeting
09/05/1999	09/05 Board Meeting	32.00	Refreshment & Room Rental for meeting
09/05/1999	Athlete Sponsorship	350.00	Athlete Sponsorship
09/09/1999	Color Printer	476.92	Purchase of color printer
09/09/1999	Office Supplies	20.58	Paper Supplies
10/08/1999	Staples	12.71	Endorsment Stamp
10/08/1999	Staples	31.79	Corporate Seal
11/09/1999	ATT (Electronic Payment)	36.98	800 Services
11/12/1999	11/06 Board Meeting	68.62	Room Rental & Refreshment for 11/06/99 Meeting
11/26/1999	United Postal Services	41.00	Semi Annual PO Box Fee
12/31/1999	501c3 Filing Fees	500.00	Fees associated with filing for tax exempt status
	<b>Total</b>	<b>1,923.10</b>	

**ATTACHMENT E**

**Gaskov Clergé Foundation (GCF)  
Depreciation Expense Report  
As of 11/30/1999**

<b>Equipment</b>	<b>In Svc. Date</b>	<b>Acquired Value</b>	<b>Dep. Method</b>	<b>Current YTD</b>	<b>Cumm Accum Depreciation</b>	<b>Net</b>
Cooler	08/01/1999	125.00	SLM	6.25	6.25	118.75
Furniture (Set of chairs)	09/05/1999	45.00	SLM	1.50	1.50	43.50
Color Printer	09/09/1999	476.92	SLM	15.90	15.90	461.02
<b>TOTAL</b>		<b>646.92</b>		<b>23.65</b>	<b>23.65</b>	<b>623.27</b>

**Board Members**

<b>Cosy Clergé</b> <b>Chairperson</b>	41 Stillwell Court Bridgewater, New Jersey 08807 Tel: 908-231-7809 Email: <a href="mailto:cosy@att.net">cosy@att.net</a>
<b>Pierre Richard Jason</b> <b>Treasurer</b>	148-53 262 Pl. Rosedale, NY 11422 Tel: 718-527-8049 Email: <a href="mailto:ricarti@aol.com">ricarti@aol.com</a>
<b>Marie Elizabeth Ledan</b> <b>Secretary</b>	14639 Almanac Dr. Burtonsville, MD 20866 Tel: 301-847-3259 Email: <a href="mailto:mell@att.net">mell@att.net</a>
<b>Augustus Billy</b>	7150 Natures Rd Columbia, MD 21046 Tel: 301-589-3152 Email: <a href="mailto:gusbilly@hotmail.com">gusbilly@hotmail.com</a>
<b>Dr. Charles Gervais</b>	41 F Knightbridge Guilderland, NY 12084 Tel: 518-464-2669 Email: <a href="mailto:charlesingrid@cs.com">charlesingrid@cs.com</a>
<b>Claude Gerard Ferrer Ph.D</b>	13211 Cabinwood Dr. Silver Spring, MD 20904 Tel: 301-879-0808 Email: <a href="mailto:gclaudef@aol.com">gclaudef@aol.com</a>
<b>Herzen Clerge</b>	1580 E 17th St. Brooklyn, New York 11226 Tel: 718-284-6277 Email: <a href="mailto:hclerge@aol.com">hclerge@aol.com</a>
<b>Homere Rene</b>	36 Dahill Road 5N Brooklyn, New York 11218 Tel: 718-438-4565 Email: <a href="mailto:rene@cooper.edu">rene@cooper.edu</a>
<b>Picard Clerge</b>	17 Cedar St Elmont, New York 11003 Tel: 516-352-6296 Email: <a href="mailto:soufou13@aol.com">soufou13@aol.com</a>
<b>Robert Remy</b>	1512 Heather Hollow Circle Apt. 13 Silver Spring, MD 20904 Tel: 301-593-4766 Email: <a href="mailto:remyl@bellatlantic.net">remyl@bellatlantic.net</a>

**Consent Fixing Period of Limitation Upon  
Assessment of Tax Under Section 4940 of the  
Internal Revenue Code**

(Rev. September 1998)

Department of the Treasury  
Internal Revenue Service

(See instructions on reverse side.)

**To be used with  
Form 1023. Submit  
in duplicate.**

Under section 6501(c)(4) of the Internal Revenue Code, and as part of a request filed with Form 1023 that the organization named below be treated as a publicly supported organization under section 170(b)(1)(A)(vi) or section 509(a)(2) during an advance ruling period,

**Gaskov Clergé Foundation (GCF)**

*(Exact legal name of organization as shown in organizing document)*

**P.O. Box 77301, Washington, DC, 20013**

*(Number, street, city or town, state, and ZIP code)*

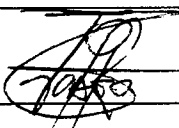
and the

District Director of  
Internal Revenue, or  
Assistant  
Commissioner  
(Employee Plans and  
Exempt Organizations)

consent and agree that the period for assessing tax (imposed under section 4940 of the Code) for any of the 5 tax years in the advance ruling period will extend 8 years, 4 months, and 15 days beyond the end of the first tax year.

However, if a notice of deficiency in tax for any of these years is sent to the organization before the period expires, the time for making an assessment will be further extended by the number of days the assessment is prohibited, plus 60 days.

Ending date of first tax year January 31, 2000  
*(Month, day, and year)*

Name of organization (as shown in organizing document)	Date
<b>Gaskov Clergé Foundation</b>	<b>11/15/1999</b>
Officer or trustee having authority to sign	Type or print name and title
Signature ► 	<b>Pierre-Richard Jason</b>
<b>For IRS use only</b>	
District Director or Assistant Commissioner (Employee Plans and Exempt Organizations)	Date

By ►

You must complete Form 872-C and attach it to the Form 1023 if you checked box **h**, **i**, or **j** of Part III, question 9, and the organization has not completed a tax year of at least 8 months.

For example: If the organization incorporated May 15 and its year ends December 31, it has completed a tax year of only 7½ months. Therefore, Form 872-C must be submitted.

- (a) Enter the name of the organization. This must be entered exactly as it appears in the organizing document. Do not use abbreviations unless the organizing document does.
- (b) Enter the current address.
- (c) Enter the ending date of the first tax year.  
For example:
  - (1) If the organization was formed on June 15 and it has chosen December 31 as its year end, enter December 31, \_\_\_\_\_.
  - (2) If the organization was formed June 15 and it has chosen June 30 as its year end, enter June 30, \_\_\_\_\_. In this example, the organization's first tax year consists of only 15 days.
- (d) The form must be signed by an authorized officer or trustee, generally the president or treasurer. The name and title of the person signing must be typed or printed in the space provided.
- (e) Enter the date that the form was signed.

DO NOT MAKE ANY OTHER ENTRIES.