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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)

Open to Public

		of the Trea		_	Open to Public Inspection
			in the second of	006	торсонон
_	heck if		C Name of organization		fication number
	oplicab	e Plea	PASSOVER LEAGUE OF PHILADELPHIA	noyor racina	
Γ.	Addre	ss labe		3-626	7034
	Name chang	typ	Number and street (or P.O. box if mail is not delivered to street address) Room/suite F.Tele	phone num	
	Initial	Spec	121 SOUTH BROAD STREET, 5TH FLOOR 2		5-9000
	Final	instr	uc-	unting method	Cash X Accrua
	Amen	ded	PHILADELPHIA, PA 19107-4544	Other (specify)	
	Applic		• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts H and Lare not applicable		527 organizations.
			must attach a completed Schedule A (Form 990 or 990-EZ). H(a) Is this a group return for	or affiliates?	Yes X N
G W	/ebsit	e: ▶ ₩V	W. PASSOVERLEAGUE. ORG H(b) If "Yes," enter number of	of affiliates	N/A
<u>J 0</u>	rganiz	ation typ	e (check only one) ► X 501(c) (3) ◀ (insert no) 4947(a)(1) or 527 H(c) Are all affiliates include	d? N /2	A Yes M
K C	heck t	iere ►	If the organization's gross receipts are normally not more than \$25,000. The (If "No," attach a list.) (If "No," attach a list.) (If "No," attach a list.)	filed by an	nr-
0	rganız	ation nee	d not file a return with the IRS; but if the organization chooses to file a return, be ganization covered by a	group rulin	g? Yes X M
S	ure to	file a cor	nplete return. Some states require a complete return.		N/A
			M Check ► X If the o		
			Add lines 6b, 8b, 9b, and 10b to line 12 Sch. B (Form 990, 990	EZ, or 990-l	PF).
Pa	rt I	Reve	nue, Expenses, and Changes in Net Assets or Fund Balances		<u></u>
	1	Contri	butions, gifts, grants, and similar amounts received:		
	í	Direct	public support 1a 44,818.		
	t	Indire	ct public support 1b		
ı	(Gover	nment contributions (grants)		
- 1	((add lines 1a through 1c) (cash \$)	1d	44,818
	2	Progr	am service revenue including government fees and contracts (from Part VII, line	2	
	3	Memb	ership dues and assessments RECEIVED =	3	
	4	Intere	st on savings and temporary cash investments	4	2,251
	5	Divide	nds and interest from securities JUN 2 1 2011 .	5	13,563
	6 8	Gross		1	
	ı		rental expenses ACCOUNTS MANAGEMENT		
	(ntal income or (loss) (subtract line 6b from line 6a) OGDEN	6c	
e e	7		investment income (describe CAPITAL GAIN DISTRIBUTIONS)	7	2,000
Revenue	8 8		amount from sales of assets other— (A) Securities (B) Other		
Š			ventory 100,455. 8a		
-	Į.		cost or other basis and sales (expenses 100,000. 8b	ľ	
	(or (loss) (attach schedule) 455 . 8c		4
		_	un or (loss) (combine line 8c, columns (A) and (B)) STMT 1	8d	455
	9		al events and activities (attach schedule). If any amount is from gaming, check here		
			revenue (not including \$ of contributions		
			ed on line 1a)		
			direct expenses other than fundraising expenses 9b		
	40		come or (loss) from special events (subtract line 9b from line 9a)	9c	
	10 8		sales of inventory, less returns and allowances		
	1		cost of goods sold 10b 1	40.	
	44		profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c	
	11		revenue (from Part VII, line 103)	11	62 007
	12		revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	63,087
83	13		am services (from line 44, column (B))	13	<u>37,350</u>
Šuš	14		gement and general (from line 44, column (C))	14	15,477
Expenses	15		alsing (from line 44, column (D)) ents to affiliates (attach schedule)	15	
ш	16	-	expenses (add lines 16 and 44, column (A))	16	E2 017
	17 18		s or (deficit) for the year (subtract line 17 from line 12)	17	<u>52,827</u>
ţ	19		sets or fund balances at beginning of year (from line 73, column (A))	18	10,260 266 193
Net ssets	20		· · ·	19	266,193
4	21		changes in net assets or fund balances (attach explanation) SEE STATEMENT 2 isets or fund balances at end of year (combine lines 18, 19, and 20)	20	<4,941 271 512
	21 31 3-06	LHA	For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.	21	271,512 Form 990 (200

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
	╁╌╁		261 A1C62	and general	
22 Grants and allocations (attach schedule)					
(cash \$ 37,350 noncash \$ 0	7 (27 250	27 250		
If this amount includes foreign grants, check here	22	37,350.	37,350.		
23 Specific assistance to individuals (attach					
schedule)	23				
24 Benefits paid to or for members (attach					
schedule)	24	0.		0.	0.
25 Compensation of officers, directors, etc	25	<u> </u>	0.	U •	<u> </u>
26 Other salaries and wages	26				
27 Pension plan contributions	27				
28 Other employee benefits	28				
29 Payroli taxes	29				
30 Professional fundraising fees	30	4,118.		4 110	
31 Accounting fees	31	4,110.		4,118.	
32 Legal fees .	32	E 0		F.0	
33 Supplies	33	50.		50.	
34 Telephone	34	7.4		7.4	
35 Postage and shipping .	35	74.		74.	
36 Occupancy	36	8,800.		8,800.	
37 Equipment rental and maintenance	37				
38 Printing and publications	38	739.		739.	
39 Travel	39	0.61			
40 Conferences, conventions, and meetings	40	261.		261.	
41 Interest	41				
42 Depreciation, depletion, etc. (attach schedule)	42				
43 Other expenses not covered above (itemize)		_		_	
a BANK CHARGES	43a	5.		5.	
b INSURANCE	43b	1,430.		1,430.	
C	43c				
d	43d				
e	43e				
1	43f				
9	43g				
44 Total functional expenses. Add lines 22					
through 43. (Organizations completing					
columns (B)-(D), carry these totals to lines			25 25		_
13-15)	44	52,827.	37,350.	15,477.	0.

Form **990** (2005)

N/A

N/A

N/A

If "Yes," enter (i) the aggregate amount of these joint costs N/A

(iii) the amount allocated to Management and general \$

__ ; (ii) the amount allocated to Program services \$_

; and (iv) the amount allocated to Fundraising \$

Page 3

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

Form 990 (2005)

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.

	nat is the organization's primary exempt purpose? ► ROVIDE SEDERS AND FOOD BASKETS FOR DISDAVANTAGED PEOPLE	Program Service Expenses
che	organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of ents served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) janizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
а	PROVIDE SEDERS FOR DISADVANTAGE PEOPLE IN AND AROUND THE PHILADELPHIA AREA	
<u>_</u>	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □ PROVIDE DISADVANTAGED PEOPLE WITH FOOD BASKETS FOR PASSOVER	36,750.
D	PROVIDE DISADVANTAGED FEOFILE WITH FOOD BASKETS FOR FASSOVER	
c	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ ☐	600.
d	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	
		-
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	
e	Other program services (attach schedule)	
•	(Grants and allocations \$) If this amount includes foreign grants, check here	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)	37,350.
		Form 990 (2005)

C/O LAPENSOHN ACCOUNTING PROF. 23-6267034 Part IV Balance Sheets (See the instructions.) (A) Beginning of year Note: Where required, attached schedules and amounts within the description column End of year should be for end-of-year amounts only 507 499. 45 45 Cash · non-interest-bearing 46 274 46 Savings and temporary cash investments 47 a Accounts receivable Less: allowance for doubtful accounts 47b 47c 48 a Pledges receivable 48a b Less: allowance for doubtful accounts 48b 48c 49 Grants receivable 49 50 Receivables from officers, directors, trustees, and key employees 50 51 a Other notes and loans receivable 51a 51b b Less: allowance for doubtful accounts 51c 52 52 inventories for sale or use 53 53 Prepaid expenses and deferred charges Cost ☐ FMV 54 Investments - securities 54 55 a Investments - land, buildings, and equipment basis 55a b Less accumulated depreciation 55b 55c SEE STATEMENT 258,412 260,132. Investments - other 56 57 a Land, buildings, and equipment, basis 57a Less accumulated depreciation 57b 57c 58 Other assets (describe 58 266,193 271,512. 59 Total assets (must equal line 74). Add lines 45 through 58 60 Accounts payable and accrued expenses 60 61 Grants payable 61 62 Deferred revenue 62 63 63 Loans from officers, directors, trustees, and key employees 64 a Tax-exempt bond liabilities 64a b Mortgages and other notes payable 64b 65 Other liabilities (describe 65 0 Total liabilities. Add lines 60 through 65) Organizations that follow SFAS 117, check here > X and complete lines 67 through 69 and lines 73 and 74. Net Assets or Fund Balances 266,193. 67 Unrestricted 67 271,512. 68 68 Temporarily restricted Permanently restricted 69 Organizations that do not follow SFAS 117, check here
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

Form **990** (2005)

72

193

72

73

Retained earnings, endowment, accumulated income, or other funds

Total liabilities and net assets/fund balances. Add lines 66 and 73

column (A) must equal line 19; column (B) must equal line 21)

Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72;

C/O LAPENSOHN ACCOUNTING PROF. LLC 23-6267034 Page 5

	art IV-A Reconciliation of Revenue per Audited Fi	nancial Statements W	ith Revenue po	er Retu	i rn (Se	e the
а	Total revenue, gains, and other support per audited financial state	ments	·	a		N/A
b	Amounts included on line a but not on Part I, line 12	•	•			
1	Net unrealized gains on investments		b1			
2	Donated services and use of facilities		b2			
3	Recoveries of prior year grants		b3			
4			b4			
	Add lines b1 through b4			ь		
C	Subtract line b from line a			C		
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		
	Total revenue (Part I, line 12) Add lines c and d			▶ e		
Pa	art IV-B Reconciliation of Expenses per Audited F	inancial Statements V	Vith Expenses	per Re	turn	
а	Total expenses and losses per audited financial statements			a		N/A
b	Amounts included on line a but not on Part I, line 17:	1	1			
	Donated services and use of facilities	·	01			
		· -	02		1	
3	Losses reported on Part I, line 20	· -	53		1	
4			04			
	Add lines b1 through b4			b	+	
C	Subtract line b from line a	•		<u>_c</u>	+	
ď	Amounts included on Part I, line 17, but not on line a:	ı	1			
1			d1			
2	Other (specify)	U	12			
	Add lines d1 and d2	•		_ <u>d</u>		
	Total expenses (Part I, line 17) Add lines c and d art V-A Current Officers, Directors, Trustees, and	Key Employees (Let as	ob poroon who was	P e		
1 0	or key employee at any time during the year even if they			an onic	er, airec	ctor, trustee,
	(A) Name and address					
		(B) Title and average hours	(C) Compensation	(D) Contrib employee	utions to benefit	(E) Expense
	(A) Maine and address	per week devoted to position	(C) Compensation (If not paid, enter -0)	(D) Contrib employee plans & d compensat	leterred	(E) Expense account and other allowances
PA	AUL PERLSTEIN, ESQUIRE	` 'per week devoted to	I to not bara, outor	pians & d	leterred	account and
		per week devoted to position	I to not bara, outor	pians & d	leterred	account and
$\overline{40}$	AUL PERLSTEIN, ESQUIRE	per week devoted to position	I to not bara, outor	pians & d	leterred	account and other allowances
40 DO	AUL PERLSTEIN, ESQUIRE 013 SMOKE ROAD	per week devoted to position PRESIDENT	0.	pians & d	leferred ion plans	account and
40 DO MA	AUL PERLSTEIN, ESQUIRE 013 SMOKE ROAD 0YLESTOWN, PA 18901	PRESIDENT 0.00 VICE PRESIDEN	0.	pians & d	leferred ion plans	account and other allowances
40 DO MA C/ PH	AUL PERLSTEIN, ESQUIRE 013 SMOKE ROAD 0YLESTOWN, PA 18901 ARC FELLER, ESQUIRE 0 DILWORTH PAXSON, 1735 MARKET ST	PRESIDENT 0.00 VICE PRESIDEN	0.	pians & d	leferred ion plans	account and other allowances
40 DO MA C/ PH	AUL PERLSTEIN, ESQUIRE 013 SMOKE ROAD 0YLESTOWN, PA 18901 ARC FELLER, ESQUIRE 0 DILWORTH PAXSON, 1735 MARKET ST	PRESIDENT 0.00 VICE PRESIDEN	0. 0.	pians & d	leterred ion plans	account and other allowances
40 DO MA C/ PH RO 83	AUL PERLSTEIN, ESQUIRE 013 SMOKE ROAD 0YLESTOWN, PA 18901 ARC FELLER, ESQUIRE 00 DILWORTH PAXSON, 1735 MARKET ST HILADELPHIA, PA 19103 0BERTA ESCOURT 0347 ALGON AVENUE	PRESIDENT 0.00 VICE PRESIDEN 0.00 VICE PRESIDEN 0.00 VICE PRESIDEN	0. 0.	pians & d	leterred ion plans	account and other allowances
40 DO MA C/ PH RO 83 PH	AUL PERLSTEIN, ESQUIRE 013 SMOKE ROAD 0YLESTOWN, PA 18901 ARC FELLER, ESQUIRE 70 DILWORTH PAXSON, 1735 MARKET ST HILADELPHIA, PA 19103 0BERTA ESCOURT 0347 ALGON AVENUE HILADELPHIA, PA 19152	PRESIDENT 0.00 VICE PRESIDEN 0.00 VICE PRESIDEN 0.00 VICE PRESIDEN	0. 0.	pians & d	leterred ion plans	account and other allowances
40 MA C/ PH RO PH RI	AUL PERLSTEIN, ESQUIRE 013 SMOKE ROAD 0YLESTOWN, PA 18901 ARC FELLER, ESQUIRE 70 DILWORTH PAXSON, 1735 MARKET ST HILADELPHIA, PA 19103 0BERTA ESCOURT 0347 ALGON AVENUE HILADELPHIA, PA 19152 1CHARD CHAITT	PRESIDENT 0.00 VICE PRESIDEN 0.00 VICE PRESIDEN 0.00 VICE PRESIDEN 0.00 SECRETARY	0. 0.	pians & d	0 •	account and other allowances 0 •
40 MA CH RO 81 R14	AUL PERLSTEIN, ESQUIRE 013 SMOKE ROAD 0YLESTOWN, PA 18901 ARC FELLER, ESQUIRE 70 DILWORTH PAXSON, 1735 MARKET ST HILADELPHIA, PA 19103 0BERTA ESCOURT 0347 ALGON AVENUE HILADELPHIA, PA 19152 1CHARD CHAITT 164 WINDSOR PARK LANE	PRESIDENT 0.00 VICE PRESIDEN 0.00 VICE PRESIDEN 0.00 VICE PRESIDEN 0.00 SECRETARY	0. 0.	pians & d	0 •	account and other allowances 0 •
40 DO MA C / PH RO 83 PH RI 14 HA	AUL PERLSTEIN, ESQUIRE 013 SMOKE ROAD 0YLESTOWN, PA 18901 ARC FELLER, ESQUIRE 70 DILWORTH PAXSON, 1735 MARKET ST HILADELPHIA, PA 19103 0BERTA ESCOURT 0847 ALGON AVENUE HILADELPHIA, PA 19152 1CHARD CHAITT 164 WINDSOR PARK LANE AVERTOWN, PA 19083	PRESIDENT 0.00 VICE PRESIDEN 0.00 VICE PRESIDEN 0.00 VICE PRESIDEN 0.00 SECRETARY	0. 0.	pians & d	0 •	account and other allowances 0 •
400 MA CPH RO 83 PH RI 14 HA FR	AUL PERLSTEIN, ESQUIRE 113 SMOKE ROAD 124 STOWN, PA 18901 ARC FELLER, ESQUIRE 125 O DILWORTH PAXSON, 1735 MARKET ST 114 HILADELPHIA, PA 19103 126 DERTA ESCOURT 1347 ALGON AVENUE 114 HILADELPHIA, PA 19152 126 CHARD CHAITT 136 WINDSOR PARK LANE AVERTOWN, PA 19083 RANK BRODSKY	PRESIDENT 0.00 VICE PRESIDEN 0.00 VICE PRESIDEN 0.00 VICE PRESIDEN 0.00 SECRETARY 0.00 TREASURER	0. T 0.	pians & d	0.	other allowances 0.
40 DO MA C / PH RO 83 PH RI 14 HA FR 10	AUL PERLSTEIN, ESQUIRE 013 SMOKE ROAD 0YLESTOWN, PA 18901 ARC FELLER, ESQUIRE 00 DILWORTH PAXSON, 1735 MARKET ST HILADELPHIA, PA 19103 0BERTA ESCOURT 0847 ALGON AVENUE HILADELPHIA, PA 19152 1CHARD CHAITT 164 WINDSOR PARK LANE AVERTOWN, PA 19083 RANK BRODSKY 06 MCCLENAGHAN MILL ROAD	PRESIDENT 0.00 VICE PRESIDEN 0.00 VICE PRESIDEN 0.00 VICE PRESIDEN 0.00 SECRETARY 0.00 TREASURER	0. T 0.	pians & d	0.	other allowances 0.
40 DO MA C / PH RO 83 PH RI 14 HA FR 10	AUL PERLSTEIN, ESQUIRE 113 SMOKE ROAD 124 STOWN, PA 18901 ARC FELLER, ESQUIRE 125 O DILWORTH PAXSON, 1735 MARKET ST 114 HILADELPHIA, PA 19103 126 DERTA ESCOURT 1347 ALGON AVENUE 114 HILADELPHIA, PA 19152 126 CHARD CHAITT 136 WINDSOR PARK LANE AVERTOWN, PA 19083 RANK BRODSKY	PRESIDENT 0.00 VICE PRESIDEN 0.00 VICE PRESIDEN 0.00 VICE PRESIDEN 0.00 SECRETARY 0.00 TREASURER	0. T 0.	pians & d	0.	other allowances 0.
40 DO MA C / PH RO 83 PH RI 14 HA FR 10	AUL PERLSTEIN, ESQUIRE 013 SMOKE ROAD 0YLESTOWN, PA 18901 ARC FELLER, ESQUIRE 00 DILWORTH PAXSON, 1735 MARKET ST HILADELPHIA, PA 19103 0BERTA ESCOURT 0847 ALGON AVENUE HILADELPHIA, PA 19152 1CHARD CHAITT 164 WINDSOR PARK LANE AVERTOWN, PA 19083 RANK BRODSKY 06 MCCLENAGHAN MILL ROAD	PRESIDENT 0.00 VICE PRESIDEN 0.00 VICE PRESIDEN 0.00 VICE PRESIDEN 0.00 SECRETARY 0.00 TREASURER	0. TT 0.	pians & d	0. 0.	other allowances 0 . 0 .
400 MA/ PHO83 PHI14A FROWY	AUL PERLSTEIN, ESQUIRE 013 SMOKE ROAD 0YLESTOWN, PA 18901 ARC FELLER, ESQUIRE 70 DILWORTH PAXSON, 1735 MARKET ST HILADELPHIA, PA 19103 0BERTA ESCOURT 0847 ALGON AVENUE HILADELPHIA, PA 19152 1CHARD CHAITT 164 WINDSOR PARK LANE AVERTOWN, PA 19083 RANK BRODSKY 06 MCCLENAGHAN MILL ROAD 7NNEWOOD, PA 19096	PRESIDENT 0.00 VICE PRESIDEN 0.00 VICE PRESIDEN 0.00 VICE PRESIDEN 0.00 SECRETARY 0.00 TREASURER	0. TT 0.	pians & d	0. 0.	other allowances 0 . 0 .
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400 MA/ PH R03 PH R14 HA FR0 W	AUL PERLSTEIN, ESQUIRE 013 SMOKE ROAD 0YLESTOWN, PA 18901 ARC FELLER, ESQUIRE 70 DILWORTH PAXSON, 1735 MARKET ST HILADELPHIA, PA 19103 0BERTA ESCOURT 0847 ALGON AVENUE HILADELPHIA, PA 19152 1CHARD CHAITT 164 WINDSOR PARK LANE AVERTOWN, PA 19083 RANK BRODSKY 06 MCCLENAGHAN MILL ROAD 7NNEWOOD, PA 19096	PRESIDENT 0.00 VICE PRESIDEN 0.00 VICE PRESIDEN 0.00 VICE PRESIDEN 0.00 SECRETARY 0.00 TREASURER 0.00	0. TT 0.	pians & d	0. 0.	other allowances 0 . 0 .
400 MA/ PH R03 PH R14 HA FR0 W	AUL PERLSTEIN, ESQUIRE 113 SMOKE ROAD 214 STOWN, PA 18901 ARC FELLER, ESQUIRE 125 O DILWORTH PAXSON, 1735 MARKET ST 114 HILADELPHIA, PA 19103 226 DBERTA ESCOURT 2347 ALGON AVENUE 114 HILADELPHIA, PA 19152 126 CHARD CHAITT 136 WINDSOR PARK LANE AVERTOWN, PA 19083 RANK BRODSKY 26 MCCLENAGHAN MILL ROAD 17 MNEWOOD, PA 19096	PRESIDENT 0.00 VICE PRESIDEN 0.00 VICE PRESIDEN 0.00 VICE PRESIDEN 0.00 SECRETARY 0.00 TREASURER 0.00	0. TT 0.	pians & d	0. 0.	other allowances 0 . 0 .
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PASSOVER LEAGUE OF PHILADELPHIA Form 990 (2005) C/O LAPENSOHN ACCOUNTING PROF. 23-6267034 Part V-A Current Officers, Directors, Trustees, and Key Employees (continued) 75 a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board 0 b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) X 75b c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to this organization through common supervision or common control? 75c X Note. Related organizations include section 509(a)(3) supporting organizations If "Yes," attach a statement that identifies the individuals, explains the relationship between this organization and the other organization(s), and describes the compensation arrangements, including amounts paid to each individual by each related organization. d Does the organization have a written conflict of interest policy? Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.) (D) Contributions to (E) Expense (A) Name and address (B) Loans and Advances (C) Compensation account and compensation plans other allowances NONE Part VI Other Information (See the instructions.) Yes No Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity 76 77 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 78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b If "Yes," has it filed a tax return on Form 990-T for this year? N/A 78b Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement 79 79 80 a Is the organization related (other than by association with a statewide or nationwide organization) through common X membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? 80a b If "Yes," enter the name of the organization ► N/A and check whether it is _ exempt or _

523161/02-03-06

81 a Enter direct or indirect political expenditures (See line 81 instructions)

Did the organization file Form 1120-POL for this year?

Form 990 (2005)

PASSOVER LEAGUE OF PHILADELPHIA

Form	990 (2005) C/O LAPENSOHN ACCOUNTING PROF., L	<u>LC</u>	<u>23-6267</u>	703 <u>4</u>		age 7
Pa	rt VI Other Information (continued)				Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities	at no charge or at	substantially			
	less than fair rental value?		••	82a	Х	
b	If "Yes," you may indicate the value of these items here. Do not include this					
	amount as revenue in Part I or as an expense in Part II.					
	(See instructions in Part III.)	82b		_		
83 a	Did the organization comply with the public inspection requirements for returns and exemptic	on applications?		83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contrib	utions?		83b	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?			84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such c	ontributions or gift	s were not			1
	tax deductible?		N/A	84b		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		N/A	85a		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		Ņ/A	85b		<u> </u>
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless t	he organization red	ceived a			
	waiver for proxy tax owed for the prior year.					
C	Dues, assessments, and similar amounts from members	85c	N/A	_		
ď	Section 162(e) lobbying and political expenditures	85d	N/A	╛		
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A	╛		ł
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f `	N/A			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		N/A	85g		<u></u>
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount	nt on line 85f				
	to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditu	ures for the				İ
	following tax year?		N/A	85h		Ĺ
86	501(c)(7) organizations. Enter. a Initiation fees and capital contributions included on					1
	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	1				
	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 co	orporation or partn	ership,			
	or an entity disregarded as separate from the organization under Regulations sections 301.77	701-2 and 301.770	1-3?			
	If "Yes," complete Part IX			88		X
89 a	501(c)(3) organizations Enter: Amount of tax imposed on the organization during the year unc	der:				
	section 4911▶	55 ►	0.	1		ĺ
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess	benefit		1		ĺ
	transaction during the year or did it become aware of an excess benefit transaction from a pr	or year?				1
	If "Yes," attach a statement explaining each transaction			89b		X
C	Enter Amount of tax imposed on the organization managers or disqualified persons during th	ne year under				
	sections 4912, 4955, and 4958		>			0.
d	Enter Amount of tax on line 89c, above, reimbursed by the organization		>			0.
90 a	List the states with which a copy of this return is filed ▶NONE					
b	Number of employees employed in the pay period that includes March 12, 2005	9	ОЬ			0
91 a	The books are in care of ▶ PRESIDENT	Telephone no.	► 610 66	50-0	510	
	Located at > 215 PRESIDENTIAL BLVD, BALA CYNWYD PA		ZIP + 4 ▶ 1	L900	4	
b	At any time during the calendar year, did the organization have an interest in or a signature of	r other authority	_			
	over a financial account in a foreign country (such as a bank account, securities account, or o	-			Yes	No
	account)?			91b		Х
	If "Yes," enter the name of the foreign country ▶ N/A					
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of	Foreign Bank		1		
	and Financial Accounts.	-				1
C	At any time during the calendar year, did the organization maintain an office outside of the Ur	nited States?		91c		x
-	If "Yes," enter the name of the foreign country ▶ N/A					
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check he	ere			▶ 「	
	and enter the amount of tax-exempt interest received or accrued during the tax year	1)2	N/	Ā	_
			•		990	(2005)

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C	:/0	L	APEN	ISOHN	ACCO'	UNTING	PROF.	LLC

Part VI	I Analysis of Income-I						
Note: En	ter gross amounts unless other	wise		ed business income		led by section 512, 513, or 514	(E)
ındıcated	<i>t.</i>		(A)	(B)	(C)	(D)	Related or exempt
93 Prog	ram service revenue:		usiness code	Amount	sion	Amount	function income
_					1000	· · · · · · · · · · · · · · · · · · ·	
<u> </u>	•		-		+		
					+		
c	•						
d					1		
e							
f Med	care/Medicaid payments				ļI		
g Fees	and contracts from governmen	nt agencies		·			
94 Mem	bership dues and assessments						
95 Intere	est on savings and temporary cash i	nvestments			14	2,251.	
	lends and interest from securities	i			14	13,563.	
	rental income or (loss) from real				 		
	, ,	estate.			1 1		
	financed property				† †		
	debt-financed property	. •			 		
	ental income or (loss) from pers	onal property					
	r investment income				14	2,000.	
100 Gain	or (loss) from sales of assets						
othe	r than inventory			<u> </u>	14	455.	
101 Net i	ncome or (loss) from special eve	ents					
102 Gros	s profit or (loss) from sales of in	ventory					
	r revenue:	, <u> </u>					
2							
					├		
					 		
a					+		
е						10.000	
104 Subt	otal (add columns (B), (D), and ((F))				וא יאני	
	, , , , , , , , , , , , , , , , , , , ,			0.	<u> </u>	18,269.	
105 Tota	I (add line 104, columns (B), (D)	, and (E))			<u> </u>	10,209.	18,269.
105 Tota Note: Line	I (add line 104, columns (B), (D) e 105 plus line 1d, Part I, should	, and (E)) I equal the amount		2, Part I.	•	•	18,269.
105 Tota Note: Line	I (add line 104, columns (B), (D)	, and (E)) I equal the amount		2, Part I.	•	•	18,269.
105 Tota Note: Line	I (add line 104, columns (B), (D) e 105 plus line 1d, Part I, should	, and (E)) I equal the amount Vities to the Ac	compl	2, Part I. ishment of Exemp	ot Pur	poses (See the instructi	18,269.
105 Tota Note: Line Part VI	I (add line 104, columns (B), (D) e 105 plus line 1d, Part I, should III Relationship of Activ	, and (E)) I equal the amount Vities to the Ac ch income is reported	compl	2, Part I. ishment of Exemp n (E) of Part VII contribute	ot Pur	poses (See the instructi	18,269.
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105 Tota Note: Line Part VI Line No.	I (add line 104, columns (B), (D) a 105 plus line 1d, Part I, should III Relationship of Activ Explain how each activity for while exempt purposes (other than by N/A	, and (E)) I equal the amount vities to the Ac ch income is reported providing funds for si	compl I in columi uch purpo	2, Part I. ishment of Exemp n (E) of Part VII contribute ses).	ot Pur	poses (See the instruction antly to the accomplishment	18,269.
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105 Tota Note: Line Part VI Line No. Part IX Name, a	I (add line 104, columns (B), (D) to 105 plus line 1d, Part I, should III Relationship of Active Explain how each activity for white exempt purposes (other than by N/A Information Regarding (A) (A) to corporation,	, and (E)) I equal the amount Vities to the Ac ch income is reported providing funds for st ng Taxable Sul (B) Percentage of ownership interest	compl I in columi uch purpo	2, Part I. ishment of Exemp (E) of Part VII contribute ses). ies and Disregard	ot Pur	poses (See the instruction antities (See the instruction (D)	18,269.
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Part X (a) Did (b) Did Note: If	I (add line 104, columns (B), (D) to 105 plus line 1d, Part I, should Explain how each activity for while exempt purposes (other than by N/A Information Regarding (A) Information Regarding (A) Information Regarding (B) Information Re	nand (E)) I equal the amount Vities to the Acchincome is reported providing funds for standard for summer and the following funds for summer and the following funds for summer and funds for summer funds funds for summer funds for summer funds funds for summer funds fun	bsidiar ssocia ctty or indicestruction city including	ishment of Exemple (E) of Part VII contribute ses). ies and Disregard (C) Nature of activities ted with Personal rectly, to pay premiums or tity, on a personal benefit const. g accompanying schedules and all information of which preparall the pate of the preparall pate.	led En Bene a a perso ontract? d statemerer has any HOWA	poses (See the instruction antities (See the instruction (D)) Total income efit Contracts (See the instruction (D)) Total income	18,269. cons.) of the organization's cons.) End-of-year assets e instructions) Yes X No Yes X No
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Part X Name, a partr Part X (a) Did (b) Did Note: If Please Sign Here Paid Preparer's	I (add line 104, columns (B), (D) to 105 plus line 1d, Part I, should Explain how each activity for while exempt purposes (other than by N/A Information Regarding and EIN of corporation, tership, or disregarded entity N/A Information Regarding the organization, during the year, rethe organization, during the year, party to (b), file Form 8870 and Complete Declaration of the Signature of officer Preparer's signature Firm's name (or I.APENSO)	ng Taxable Sul (B) Percentage of ownership interest with any funds for sul (B) Percentage of ownership interest % % % mg Transfers A ceive any funds, directly a premiums, directly a premiums, directly a premium officer) of the parer (other than other than officer) of the parer (other than other t	bsidiar ssocial cty or indirect control in including in the large of	ishment of Exemple (E) of Part VII contribute ses). ies and Disregard (C) Nature of activities ted with Personal rectly, to pay premiums or thy, on a personal benefit case. g accompanying schedules and all information of which preparally the preparation of which preparation of w	Bene a perso ontract? d statemerer has any ype or pute	poses (See the instruction antities (See the instruction (D)) Total income Position of the best of my knowledge (P) Total to the best of my knowl	18,269. ons.) of the organization's ins.) End-of-year assets e instructions) Yes X No Yes X No OHN, CPA
Part IX Name, a part Part X (a) Did (b) Did Note: If Please Sign Here	I (add line 104, columns (B), (D) to 105 plus line 1d, Part I, should Explain how each activity for white exempt purposes (other than by N/A Information Regarding (A)	ng Taxable Sul (B) Percentage of ownership interest with any funds for sul (B) Percentage of ownership interest % % % mg Transfers A ceive any funds, directly a premiums, directly a premiums, directly a premium officer) of the parer (other than other than officer) of the parer (other than other t	bsidiar ssocia ctty or indirect in including in page of including including in page of including including in page of including	ishment of Exemple (E) of Part VII contribute ses). ies and Disregard (C) Nature of activities ted with Personal rectly, to pay premiums or thy, on a personal benefit cost. g accompanying schedules an all information of which preparation of which preparations are considered in the preparation of which preparations of which pr	Bene a perso ontract? d statemerer has any ype or pute	poses (See the Instruction antities (See the Instruction (D) Total Income Pefit Contracts (See the Instruction (D) Total Income	18,269. ons.) of the organization's ins.) End-of-year assets e instructions) Yes X No Yes X No OHN, CPA
Part X Name, a part Part X (a) Did (b) Did Note: If Please Sign Here Paid Preparer's	I (add line 104, columns (B), (D) to 105 plus line 1d, Part I, should III Relationship of Active Explain how each activity for white exempt purposes (other than by N/A Information Regarding (A) and (A) address, and EIN of corporation, nership, or disregarded entity N/A Information Regarding the organization, during the year, rethe organization, during the year, particularly and complete Declaration of the Signature of officer Preparer's signature of officer Preparer's signature of officer Preparer's signature of LAPENSO	mg Taxable Sulperscript of the Arcount (B) Percentage of ownership interest "Manager of the Arcount (B) Percentage of ownership interest "Manager of the Arcount (B) "Ma	bsidiar ssocia etty or indicestruction in inectiding in page on incident or	ishment of Exemple (E) of Part VII contribute ses). ies and Disregard (C) Nature of activities ted with Personal rectly, to pay premiums or thy, on a personal benefit cost. g accompanying schedules an all information of which preparation of which preparations are considered in the preparation of which preparations of which pr	Bene a perso ontract? d statemerer has any ype or pute	poses (See the Instruction antities (See the Instruction (D) Total Income Pefit Contracts (See the Instruction (D) Total Income	18,269. ons.) of the organization's ins.) End-of-year assets e instructions) Yes X No Yes X No OHN, CPA

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information-(See separate instructions.)

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

2005

OMB No 1545-0047

name of the org	anization PASSOVER LEAGUE OF PH				Employer Identif	
	C/O LAPENSOHN ACCOUNT			<u></u>	23 62670	
Part I	Compensation of the Five Highest Pa			Officers, Dire	ctors, and T	rustees
	(See page 1 of the instructions. List each one. If there ar	re none, en	(b) Title and average hours	1	(d) Contributions to	(e) Expense
(1	a) Name and address of each employee paid more than \$50,000		per week devoted to position	(c) Compensation	employee benefit plans & deferred compensation	account and other allowances
NONE						-
Total number of over \$50,000	other employees paid	•	0			
Part II-A	Compensation of the Five Highest Pa		•		ional Service	es
	(See page 2 of the instructions. List each one (whether i	individuals	or firms). If there are none, e	nter "None.")	····	
	(a) Name and address of each independent contractor pai	id more tha	an \$50,000	(b) Type of s	service	(c) Compensation
NONE						
NONE						
						
		· – – –				
	f others receiving over					
	fessional services	مام ما المام	0	for Other C		<u></u>
Part II-B	Compensation of the Five Highest Pa (List each contractor who performed services other than				ervices	
	firms. If there are none, enter "None." See page 2 of the	•	•	3413 01		
	(a) Name and address of each independent contractor pair			(b) Type of :	service	(c) Compensation
	· · · · · · · · · · · · · · · · · · ·					
NONE						
		· -				
Total number of \$50,000 for oth	f other contractors receiving over er services		0		<u></u>	
,						

PASSOVER LEAGUE OF PHILADELPHIA

Schedule A (Form 990 or 990-EZ) 2005 C/O LAPENSOHN ACCOUNTING PROF., 23-6267034 Page 2 Part III | Statements About Activities (See page 2 of the instructions.) Yes No 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 > \$ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) X 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. During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, 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? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.) a Sale, exchange, or leasing of property? 2a X b Lending of money or other extension of credit? 2b c Furnishing of goods, services, or facilities? 2c d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? e Transfer of any part of its income or assets? 2e 3 a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.) 3a b Do you have a section 403(b) annuity plan for your employees? 3b c During the year, did the organization receive a contribution of qualified real property interest under section 170(h)? Зс 4 a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds? 4a b Do you provide credit counseling, debt management, credit repair, or debt negotiation services? Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.) The organization is not a private foundation because it is: (Please check only ONE applicable box.) A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i). A school. Section 170(b)(1)(A)(ii). (Also complete Part V.) A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii). A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v). 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.) An organization that normally receives a substantial part of its support from a governmental unit or from the general public. 11a 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.) 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) sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization: Type 1 Type 2 Provide the following information about the supported organizations. (See page 6 of the instructions.) (b) Line number (a) Name(s) of supported organization(s) from above An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.) Schedule A (Form 990 or 990-EZ) 2005

,	3_	_	2	5	7	Λ	2	A	Page
1	3 —	n		n	•	u	- 5	4	ı ayı

Pa	Note: You may use the	e worksheet in the instru	ctions for converting fr	om the accrual to the	nethod of acc	of acco	ng. Dunting.
Caler begir	ndar year (or fiscal year nning in)	(a) 2004	(b) 2003	(c) 2002	(d) 2001		(e) Total
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	41,151.	37,399.	35,737.	29,9	942.	144,229.
16	Membership fees received						
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose						
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	14,444.	14,142.	15,255.	18,	306.	62,147.
19	Net income from unrelated business						
	activities not included in line 18				·		
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge						
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets						
23	Total of lines 15 through 22	55,595.	51,541.	50,992.	48,2	248.	206,376.
24	Line 23 minus line 17	55,595.	51,541.	50,992.	48,2	248.	206,376.
25	Enter 1% of line 23	556.	515.	510.	4	182.	
26	Organizations described on lines 16	O or 11: a Enter 2% of an	nount in column (e), line :	24.	•	26a	N/A
b	Prepare a list for your records to sho	w the name of and amount	contributed by each pers	on (other than a governi	mental		
	unit or publicly supported organization	on) whose total gifts for 200	01 through 2004 exceede	d the amount shown in I	ıne 26a.		
	Do not file this list with your return.	Enter the total of all these	excess amounts		>	26b	N/A
C	Total support for section 509(a)(1) to	est: Enter line 24, column (e	е)		>	26c	N/A
d	Add: Amounts from column (e) for li	nes: 18	19				
		22	26b		_ ▶	26d	N/A
е	Public support (line 26c minus line 2	?6d total)			_ ▶	26e	N/A
f	Public support percentage (line 26	e (numerator) divided by li	ne 26c (denominator))		>	26f	N/A %
27	Organizations described on line 12			were received from a "di	squalified perso		
	records to show the name of, and to						-
	such amounts for each year:			•	•	•	
	(2004)	• (2003)	0. (200	2)	0. (20	01)	0.
b			person (other than "disqu	Ialified persons"), prepar	e a list for vour	records	to show the name of.
	and amount received for each year, t				-		•
	described in lines 5 through 11b, as	well as individuals.) Do not	file this list with your ret	urn. After computing the	e difference bet	veen the	amount received and
	the larger amount described in (1) o	r (2), enter the sum of these	e differences (the excess	amounts) for each year:			
		. (2003)	• • • • • • • • • • • • • • • • • • • •		0 . (20	01)	0.
C	Add: Amounts from column (e) for li		·	16		,	•••
	17			21		27c	144,229.
d	Add: Line 27a total		line 27b total		0.	27d	0.
e	Public support (line 27c total minus					27e	144,229.
f	Total support for section 509(a)(2) t	•	3, column (e)	271 2	206,376		
g	Public support percentage (lin				•	270	69.8865%
_	Investment income percentage	-	- •	**	or)) .	27h	30.1135%
	Unusual Grants: For an organization						
	show, for each year, the name of the co	ontributor, the date and am	ount of the grant, and a bi	rief description of the nat	ture of the grant	. Do not	file this list with your
	return. Do not include these grants in l	NO	NE			Sched	ule A (Form 990 or 990-EZ) 2005

Part V Private School Questionnaire (See page 7 of the instructions.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV) Yes No Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing 29 29 instrument, or in a resolution of its governing body? Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, 30 and other written communications with the public dealing with student admissions, programs, and scholarships? 30 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of 31 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? 31 If "Yes." please describe: if "No." please explain. (If you need more space, attach a separate statement.) Does the organization maintain the following: a Records indicating the racial composition of the student body, faculty, and administrative staff? 32a Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 32b c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 32c d Copies of all material used by the organization or on its behalf to solicit contributions? 32d If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: a Students' rights or privileges? 33a Admissions policies? 33b Employment of faculty or administrative staff? 33c Scholarships or other financial assistance? 33d Educational policies? 33e Use of facilities? 33f Athletic programs? 33g Other extracurricular activities? 33h If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) 34 a Does the organization receive any financial aid or assistance from a governmental agency? 34a b Has the organization's right to such aid ever been revoked or suspended? 34b If you answered "Yes" to either 34a or b, please explain using an attached statement.

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

Schedule A (Form 990 or 990-EZ) 2005

Schedule A (Form 990 or 990-EZ) 2005 C/O LAPENSOHN ACCOUNTING PROF., LLC

23-6267034 Pa

Page 5

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)

N/A

	(To be completed ONLY by an eligible organization that filed Form 5768) theck ▶ a if the organization belongs to an affiliated group. Check ▶ b if you checked "a" and "limited control" provisions apply. Limits on Lobbying Expenditures (a) Affiliated group To be completed for ALL totals electing organizations									
Che	eck ▶ a_	if the organization belong	s to an affiliated group.	Check ►	ь 🗆	ıf you che	cked "a" and "limited contr	of provisions apply.		
							Affiliated group	To be completed for ALL		
36 37 38 39 40 41 42 43 44	Total lobb Other exe Total exer Lobbying If the ame Not over \$5 Over \$10,00 Over \$17,00 Grassroot Subtract I	oying expenditures to influence playing expenditures to influence abying expenditures (add lines 36 mpt purpose expenditures mpt purpose expenditures (add nontaxable amount. Enter the abount on line 40 is - 100,000 but not over \$1,000,000	in the latest state of the exception of	obying) le - e amount is - cess over \$500,000 cess over \$1,000,000		36 37 38 39 40 41 42 43 44	N/A			
	Caution:	If there is an amount on eitl	er line 43 or line 44, you i	nust file Form 4	720.					

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

		Lobbying Exp	enditures During 4-Year A	veraging Period	N/A
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
45 Lobbying nontaxable amount					0
46 Lobbying ceiling amount (150% of line 45(e))					0
47 Total lobbying expenditures					0
48 Grassroots nontaxable amount					0
49 Grassroots ceiling amount (150% of line 48(e))					0
50 Grassroots lobbying expenditures					0

| Part VI-B | Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 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:

- 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
- 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.

Yes	No	Amount				
-						
	L	0.				

02-03-0

Schedule A (Form 990 or 990-EZ) 2005

52 a	Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the					
	Code (other than section 501(c)(3)) or in section 527?		▶ ☐ Yes	X		
b	If "Yes," complete the following schedule:	N/A				

(a) Name of organization	(b) Type of organization	(c) Description of relationship

523151

Schedule A (Form 990 or 990-EZ) 2005

FORM 990	GAIN (LOSS) F	ROM PUBLICLY T	RADED SECURIT	'IES	STATEMENT	1
DESCRIPTION '		GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN	
DISCOVER BANG BANCWEST CAP MCI INC WASHINGTON MC CUSTODIAL TRU CUSTODIAL TRU VERIZON - CAS	JTUAL CD JST CD JST CD	30,000. 5,000. 441. 25,000. 30,000. 10,000. 14.	30,000. 5,000. 0. 25,000. 30,000. 10,000.	0. 0. 0. 0. 0.		0. 0. 41. 0. 0. 0. 14.
FORM 990		IN NET ASSETS		Nana	STATEMENT	
DESCRIPTION UNREALIZED LO	OSS ON INVESTMENT	rs		_	AMOUNT	—— 41.>
TOTAL TO FORM	M 990, PART I, L	INE 20		_	<4,9	11.> ===
FORM 990		OTHER INVESTM	IENTS		STATEMENT	3
DESCRIPTION			VALUATI METHO	•	AMOUNT	
OTHER - SEE	ATTACHED		MARKET	VALUE -	260,1	32.
TOTAL TO FORM	M 990, PART IV, I	LINE 56, COLUMN	1 B	_	260,1	32.

PASSOVER LEAGUE OF PHILADELPHIA FORM: 990-0608 YEAR ENDED AUGUST 31, 2006 EIN: 23-6267034

Page 4, Line 56 - Investments

	# of				
SECURITY	SHS	RATE	MATURITY	COST	MARKET VALUE
Preferred Stock					
Toledo Edison Company	200	2 37%	N/A	5,500	5,952
General Motors Corp Preferred	400	7 25%	N/A	10,000	7,144
				15,500	13,096
Common Stock					
Five Star Quality Care	10	N/A	N/A	73	103
Senior HSG PPTY TR	50	N/A	N/A	747	1,018
HRPT Properties Trust	500	N/A	N/A	9,895	5,800
Venzon	92	N/A	N/A	9,839	3,237
Bank of America Corp	90	N/A	N/A	4,238	4,632
Danda and Natas				24,792	14,789
Bonds and Notes GNMA Pool - 007922	35000	7 50%	09/15/05		
GNMA Pool - 007922 GNMA Pool - 010178	50000	8 25%	05/15/06	-	•
GNMA Pool - 010176 GNMA Pool - 009113	25000	8 00%	12/15/05	-	-
GNMA Pool - 009173 GNMA Pool - 012438X	25000 25000	8 00%	10/15/06	-	-
GNMA F001 - 012430A	25000	0 00%	10/13/06		\$0
Other					
Davis NY Venture Fund - Class B	271 639	N/A	N/A	8,155	9,173
Blackrock Core BD TR BEN INT	350	N/A	N/A	5,250	4,406
Bank HAPOALIM B M CD	25000	N/A	11/09/06	25,000	25,000
Putnam Investment Funds - Growth Opp Class B	259 395	N/A	N/A	7,502	3,211
Putnam High Yield Trust II Class B	1219 73	N/A	N/A	10,391	9,563
Franklin High Income Trust Age Fund Class A	22297 081	N/A	N/A	63,253	46,378
Dryden High Yield Fund-CL A	6104 651	N/A	N/A	38,284	34,613
Prudential Jennison Equity Opportunity Fund Class B	199 479	N/A	N/A	3,124	3,198
Seligman High Yield Fund - Class B	4654 881	N/A	N/A	26,752	15,315
Strategic Partners Oppty FDS - Mid Cap Value CI B	820 5690	N/A	N/A	13,556	13,449
Delaware Group Delchester High Yield Bond Fund C	13746 475	N/A	N/A	85,755	45,501
Nuveen	400	N/A	N/A	4,878	5,364
Davis NY Venture Fund - Class A	482 633	N/A	N/A	15,911	17,076
				307,811	232,247
				\$348,103	260,132
DELAWARE GROUP				85,755	45,501
PRUDENTIAL				41,408	45,501 37,811
FRANKLIN FUND				63,253	46,378
GNMA				03,233	40,376
OTHER SECURITIES				157,687	130,442
				348,103	260,132



COMMONWEALTH OF PENNSYLVANIA GOVERNOR'S OFFICE OF GENERAL COUNSEL DEPARTMENT OF STATE OFFICE OF CHIEF COUNSEL 302 NORTH OFFICE BUILDING HARRISBURG, PA 17120

Christal Pilœ-Nase Assistant Counsel Telephone (717) 787-6802 FAX (717) 787-1734 E-Mail. cpikenase@state.pa us Department's Website www dos state pa us

April 9, 2002

Howard C. Lapensohn, Certified Public Accountant Accredited Personal Financial Specialist, President Lapensohn & Associates 1530 Chestnut Street, Suite 500 Philadelphia, PA 19102-2742

Dear Mr Lapensohn:

I have been requested to respond to your March 26, 2002 letter addressed to Mr. Karl Emerson, Director of the Department of State's Bureau of Charitable Organizations, requesting a letter confirming that our Office has determined that the Passover League of Philadelphia (League) would be classified as a religious organization and is, thus, exempt from the filing requirements of the Solicitation of Funds for Charitable Purposes Act (Act), 10 P.S. § 162.1 et seq. I serve as an Assistant Counsel to the Department of State's Office of Chief Counsel and as Counsel to the Bureau of Charitable Organizations.

Our Office does not issue advisory opinions or rulings. However, based on a review of the documentation that you submitted regarding the League, our Office has concluded that the League would qualify for the exemption for the following major reasons: 1) the League is tax-exempt under the Internal Revenue Code, 2) no part of the League's net income inures to the direct benefit of any individual; 3) the League's conduct is primarily supported by funds solicited from its own membership or previous donors; 4) the League is organized and operated exclusively for religious purposes, 5) the particular religious beliefs of the League are truly and sincerely held, and 6) the practices and rituals associated with the League's religious belief or creed are not illegal or contrary to clearly defined public policy

I am pleased to have been of assistance to you Thank you for your attention to this matter.

Sincerely,

7:5-

Christal Pike-Nase Assistant Counsel Department of State

Christol Pike Mase

cc Mr Karl E. Emerson, Director, Bureau of Charitable Organizations