



CGB-CC-0507

Women of Substance, Inc.

P.O. Box 117, Lindenhurst, NY 11757-0117

Telephone/Fax (631) 226-0314

1-888-4WOSMIN

24 Hr. Crisis Intervention Hotline 1-866-86 ABUSE

Mary M. Elberfeld
Founder & President

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Editor Love Express Newspaper

Rhona Silver
The New Huntington Townhouse

Ernie Deutsch
Pristine Limousine, LTD

April 6, 2006

Office of the Secretary
Federal Communications Commission
Attn: CBG Room 3-B431
455 12th Street SW
Washington, D.C. 20554

RE; Exemption request from Closed Captioning requirements under Section 79.1 of the Commissions rules 47 C.S.R. and 79.1.

Women of Substance Ministries, Inc. is a Non-profit abuse organization with a 24 hour Crisis Intervention Abuse Hotline and a weekly television show "Women of Substance" on Sky Angel One, Channel 262 on Dish Satellite Network. As an organization, we give referrals to thousands of callers each year in Domestic Violence situations. We have found shelters for scores of women and children who needed to escape their dangerous situation to a safe haven for themselves and their children. We have been instrumental in the arrest of sexual predators and are striving to lower the number of children sexually abused (now 1 in 3 girls by age 18) with workshops for child abuse prevention. Our yearly total budget was \$54,772 in 2004, most of which goes to our hotline telephone bill and related services to women and children, and comes mainly from fund raising and individual contributions. We've had some small grants but domestic violence statistically is near the bottom of the giving list.

Our 30 minute weekly television program is designed to give hope and affirmation to women and children so that they reach out for help to our hotline or other resources. We are one of the only shows of this kind on the air, which reaches out to women and children of abuse (see previous grant support letter). Our yearly airtime cost for our weekly show (\$156,000) is donated by the network, because of our work with abused women and children. We changed from a production company to a local post production editor and we do our own filming to keep the television costs to the new lower post production costs only. Our efforts have lowered our cost per show from approximately \$800 to our current cost of approximately \$200, so that we could stay on the air.

RECEIVED & INSPECTED

APR 17 2006

FCC - MAILROOM

www.womenofsubstance.org • wofsub@aol.com • mary@womenofsubstance.org
Member's of: NCCAA, NYSADV, LIWA, NCADV, CPSDV, SCWBEC,
AACC, CLS, Lindenhurst Chamber of Commerce, Copaugue Chamber of Commerce

Current total production costs:

Post production editing:	\$175
Mailing costs to network with return:	\$20
DV tape for filming:	\$ 5
Total	\$200

For closed captioning, we've checked software and encoders which would run approximately \$5,000 and \$3000 respectively for a complete system. In addition, audio conversion to text and post production costs to place the captions and encode them would be more per show using our production editor than outsourcing. Therefore this method would be cost prohibitive. The costs of outsourced closed captioning would be approximately \$250 per show, which is a 125% increase or 55.5% of the entire television budget. Any alternative to closed captioning including open caption, text or graphic display which would include audio to text conversion and post production costs would be more than outsourcing and would also be cost prohibitive. We have already cut our costs to a level that is barely affordable. Any of these options would be not only an undue hardship but would force us off the air due to our limited resources. In order to stay on the air to continue reaching women and children in these situations, we would therefore request a full exemption under 47 C.F.R. § 79.1 (f).

To solicit closed captioning assistance, we've sent hundreds of letters to local businesses and previous donors, asking for \$100 and have also put the request for support for closed captioning on our website at www.womenofsubstance.org. To date we've have a pledge of only \$100. Sky Angel Network has been contacted but cannot help in providing closed captioning. We see no other options available in order to raise these increased costs.

Thank you for your consideration of our request for exemption under 47 C.F.R. § 79.1(f).

Sincerely,

Mary Elberfeld
President and founder
Women of Substance Ministries, Inc.

Declaration:

I, Mary Elberfeld, am the President and founder of Women of Substance Ministries, Inc. and I have reviewed the Petition for Exemption for closed captioning requirements filed in behalf of Women of Substance Ministries, Inc in this matter, and upon information and belief, believe the statements regarding our organization and the preceding Women of Substance broadcast show to be true and accurate.

Mary Elberfeld

State of New York)
County of Suffolk

On the day of in the year 2006 . before me, the undersigned, personally appeared Mary Elberfeld, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that she executed the same in her capacity.



3050 N. Horseshoe Dr. Suite 290 • Naples, Florida 34104
(239) 403-9130 Voice / (239) 403-9105 Fax

August 15, 2005

Mary Elberfeld
Women of Substance
951 N Delaware Ave.
Lindenhurst, NY 11757

Dear Ms. Elberfeld:

Please accept this as a letter of endorsement for the "Women of Substance" non-profit organization.

The Sky Angel satellite system has aired the "Women of Substance" television program for the past year on its national television service reaching 11.5 million homes across the United States and its territories. Sky Angel is pleased to hear how many lives are being impacted by the program and through the organization's toll-free hotline. I am aware of no other national TV program that specifically reaches out to women, men and children who have been victims of abuse. This not only makes "Women of Substance" unique but critical to America's families.

In my experience as an Emmy award-winning TV news producer, no other medium can touch lives for the better or worse than television. Therefore, a television program that is reaching out to abuse victims on a national basis is a powerful and cost-effective way to literally reach millions with a message of hope and change. I can think of very few causes that are truly worthy of financial support as much as "Women of Substance."

Thank you again for your service to America.

Sincerely,

Kathleen Johnson
Vice President, Programming



3050 Horseshoe Drive North, Suite 290 • Naples, Florida 34104

(239) 403-9130 Voice / (239) 403-9105 Fax

Angel One Dollar Value of Airtime, First Quarter 2005: \$39,000.00

Total 2005 Airtime Value: \$39,000.00

April 21, 2005

Mary Elberfeld
Women of Substance
951 N Delaware Ave
Lindenhurst, NY 11757

Dear Mary Elberfeld:

Now is the time to report your first quarter promotional efforts that were completed on behalf of Sky Angel in exchange for airtime received during the months of January, February and March on the Angel One channel.

Please use the attached report form and **report back on each item of promotion**. If there is a particular promotion that you were not able to complete this past quarter, **please provide a detailed explanation in the space provided on the form.**

Also be sure to note any **alternate promotions** in the appropriate fields as well – such as an article posted to your web site in lieu of print advertisements in ministry publication. This may seem simple and something we should just 'know,' but with over 200 programmers there is just no reasonable way without researching each instance and it would be much simpler if you would **please report the alternates or exceptions in as much detail as possible** each quarter on this report. I would truly appreciate this extra effort on my behalf!

I have enclosed a sample report form that should assist you in walking through how to complete the quarterly report. I know some of you are now experts at completing your forms but I include this with each quarter because we are always welcoming new programmers to the Sky Angel family who need the help.

If you have questions or require assistance to complete the report please contact me at (239) 403-9130 extension 217 or e-mail me at hope.daley@skyangel.com. If you are not able to return your completed report by **April 22nd, 2005**, please advise me as soon as possible to request an extension!

Your completed report form is due back no later than April 22, 2005

Moriches Bay Video Productions
12 Widgeon Rd
Center Moriches, New York 11934
(631) 878-7188 amil_11934@yahoo.com

January 3, 2006

Amber Washburn
Sky Angel
3050 N. Horseshoe Drive
Suite 290
Naples, Florida 34104

Dear Ms. Washburn:

Enclosed please find two Women of Substance' Beta SP tapes containing Shows #460, Part III and #461, Part IV, for airing on the Sky Angel network. Please air the shows in numerical order, #460 followed by #461 as they are the final two (2) shows of a four (4) part series. As per instructions from Pastor Mary Elberfeld, please contact me if you have any questions or need any further information.

Thank you for your attention in this matter.

Yours truly,

Al Milian

cc: Pastor Mary Elberfeld

Weddings * Commercials * Special Events * Digital Video * Live Productions *

Editing Invoice – Women of Substance

1. Show #460	- \$175.00
2. Show #461	- \$175.00
3. Postage (mailings)	- \$ 4.30
Priority mail with Confirmation receipt \$4.30 both Shows (460, 461)	

Total- \$353.30

Al Milian
January 3, 2006

Dear Pastor Mary,

In regard to your inquiry concerning the FCC ruling requiring closed captioning, I see three alternatives, each of which is cost prohibitive:

1. If I were to produce the closed captioning using *your* software and hardware, there would be an additional expense of approximately \$250-300 over and above the present editing fee of \$175.00 for the editing of each program. This would entail getting a transcript from each show and then encoding it so that it will add line-21 closed captioning to the Beta SP output tape which I send to the Sky Angel network for airing. A significant amount of time has to be spent in this processing; *i.e.*, syncing the captions to the audio, fixing errors during the captioning process, fixing typos found during the captioning process, and re-positioning the captions to the top of the screen because your program has many lower thirds for the graphics that you require.
2. If I were to buy and use *my own* hardware/software, in addition to above mentioned additional expense in just the editing, transcribing, and encoding, I would have to pass along an additional amount to the per-show fee because of my purchase of the closed captioning hardware/software, which would be somewhere in the amount of \$8,000. Presently, I do not edit any other program requiring cc, consequently I am not dealing in volume and would have to recoup the significant expense solely with your program. And the same editing process that I described in #1 above would exist for this situation;
3. Outputting the finished show to an outside company that has the necessary equipment to handle closed captioning would entail, under most circumstances, a cost of \$250 per show. This, of course, would be in addition to my present editing fee.

In regard to options #1 & #2, it must be understood that adding text graphics, a form of subtitling, or "open" captioning into the program (which, in itself, would require a lengthy editing process) would not be considered "closed captioning," which is the FCC requirement. It is very time consuming and it would be approximately \$300-\$350 per show in cost, which is more expensive than closed captioning whether you bought the equipment or I did.

Thank you for your inquiry; if I may of any other assistance, please do not hesitate to give me a call.

Yours truly,
Al Milian
Moriches Bay Video Productions

CLOSEDCAPTIONMAKER

822 Guilford Avenue #148 • Baltimore, MD 21202

E-mail: wGallant@CCmaker.com • Web Site:

www.CCmaker.com

1-800-527-0551

Our Services

Professional closed-captioning services.

Cost is \$10 per video minute plus \$50; includes encoding, videotape, and 2nd day FedEx. Client will be sent an open-captioned VHS proof copy at no charge.

Client sends us a professionally produced "master video" on BetaSP, DV/DVcam, or DVCpro25 and we create a closed-captioned professional master on BetaSP or DVcam.

Example: A ten minute video using 'pop-on captions' would cost \$150.

Add \$2/minute if verbatim script is not supplied. Subtract \$4/minute if roll-up captions are used instead of pop-on captions.

TV Spots are \$100 per spot (:10 to :60); plus \$50 for tapestock and shipping.

Script must be supplied on disk or emailed. Turnaround is two business days.

Music Videos (up to 5 minutes) are \$175, includes BetaSP/DVcam videotape and shipping.

Script must be supplied on disk. Additional BetaSP/DVcam copy is \$35 (includes tape).

TECHNICAL DETAILS FOR PROFESSIONAL CAPTIONING

We normally use "Pop-on" type closed-captions; the captions "pop-on" the screen in groups of words and are positioned so that they do not cover-up material being discussed.

Our encoder (hardware which adds the captions) uses component video in/out.

DV formats: we can accept DV, DVcam, DVCpro25 and master to DVcam. (all are small or large cassettes). Please call concerning details.

New Lower Price: As noted above, "roll-up captions" are \$4/minute less; reason is that "roll-up captions" require less production time. For an example of using "roll-up captions" watch 'The History Channel', they use this format for most of their programming.

30 min x (\$10-\$4/ min) =	\$180
Tape stock & shipping =	\$50
Overnight shipping w/ tracking =	\$20

Total \$250

CPC Computer Prompting & Captioning Co.
1010 Rockville Pike, Suite 306
Rockville, MD 20852, USA

**Caption/Subtitle Rates
Made Simple**

Pop-on mode: \$7/min. of video
+ \$150 setup fee

Roll-up mode: \$5/min. of video
+ \$150 setup fee

(You provide transcript & blank tape)

.....
Add \$3/min. of video if CPC transcribes.

30 min x \$7 per minute =	\$210
Setup fee =	\$150
Overnight shipping with tracking	\$20
Total	\$380

Internal Revenue Service**Date:** March 15, 2005

WOMEN OF SUBSTANCE INC
% MARY M ELBERFELD
PO BOX 117
LINDENHURST NY 11757-0117

Department of the Treasury
P. O. Box 2508
Cincinnati, OH 45201

Person to Contact:

Tracy Garrigus #31-07307
Customer Service Representative

Toll Free Telephone Number:

8:30 a.m. to 5:30 p.m. ET
877-829-5500

Fax Number:

513-263-3756

Federal Identification Number:

██████████

Dear Sir or Madam:

This is in response to your request of March 15, 2005, regarding your organization's tax-exempt status.

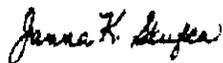
In May 2000 we issued a determination letter that recognized your organization as exempt from federal income tax. Our records indicate that your organization is currently exempt under section 501(c)(3) of the Internal Revenue Code.

Our records indicate that your organization is also classified as a public charity under sections 509(a)(1) and 170(b)(1)(A)(vi) of the Internal Revenue Code.

Our records indicate that contributions to your organization are deductible under section 170 of the Code, and that you are qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Internal Revenue Code.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely,



Janna K. Skufca, Director, TE/GE
Customer Account Services

Return of Organization Exempt from Income Tax

2004

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 Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2004 calendar year, or tax year beginning 2004, and ending

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

Please use IRS label or print or type. See specific instructions. Women of Substance Ministries, Inc. P.O. Box 117 Lindenhurst, NY 11757

D Employer Identification Number, E Telephone number, F Accounting method: X Cash, Accrual, Other (specify)

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

G Web site: www.womenofsubstance.org

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

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

- H and I are not applicable to section 527 organizations. H (a) Is this a group return for affiliates? Yes No X. H (b) If 'Yes,' enter number of affiliates. H (c) Are all affiliates included? Yes No. H (d) Is this a separate return filed by an organization covered by a group ruling? Yes No X.

I Group Exemption Number. M Check X if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 61,998.

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

Table with columns for Revenue, Expenses, and Assets. Rows include: 1 Contributions, gifts, grants, and similar amounts received; 2 Program service revenue including government fees and contracts; 3 Membership dues and assessments; 4 Interest on savings and temporary cash investments; 5 Dividends and interest from securities; 6a Gross rents; 6b Less: rental expenses; 6c Net rental income or (loss); 7 Other investment income; 8a Gross amount from sales of assets other than inventory; 8b Less: cost or other basis and sales expenses; 8c Gain or (loss); 8d Net gain or (loss); 9 Special events and activities; 9a Gross revenue; 9b Less: direct expenses other than fundraising expenses; 9c Net income or (loss) from special events; 10a Gross sales of inventory, less returns and allowances; 10b Less: cost of goods sold; 10c Gross profit or (loss) from sales of inventory; 11 Other revenue; 12 Total revenue; 13 Program services; 14 Management and general; 15 Fundraising; 16 Payments to affiliates; 17 Total expenses; 18 Excess or (deficit) for the year; 19 Net assets or fund balances at beginning of year; 20 Other changes in net assets or fund balances; 21 Net assets or fund balances at end of year.

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (att sch) (cash \$ _____ non cash \$ _____)	22			
23	Specific assistance to individuals (att sch)	23			
24	Benefits paid to or for members (att sch)	24			
25	Compensation of officers, directors, etc	25			
26	Other salaries and wages	26			
27	Pension plan contributions	27			
28	Other employee benefits	28			
29	Payroll taxes	29	15.	15.	
30	Professional fundraising fees	30			
31	Accounting fees	31	1,711.	1,711.	
32	Legal fees	32			
33	Supplies	33	8,243.	2,275.	3,841.
34	Telephone	34	5,239.	2,770.	395.
35	Postage and shipping	35	1,332.	941.	70.
36	Occupancy	36			
37	Equipment rental and maintenance	37	2,135.	679.	
38	Printing and publications	38	585.	585.	
39	Travel	39			
40	Conferences, conventions, and meetings	40			
41	Interest	41			
42	Depreciation, depletion, etc (attach schedule)	42	2,288.	2,288.	
43	Other expenses not covered above (itemize)				
a	See Statement 2	43a	33,224.	26,734.	210.
b		43b			
c		43c			
d		43d			
e		43e			
44	Total functional expenses (add lines 22 - 43). Organizations completing columns (B) - (D), carry these totals to lines 13 - 15	44	54,772.	33,984.	4,516.

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

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____; (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____.

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? Crisis Outreach to Women	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; but optional for others.)
a Outreach to Women through abuse crisis intervention, referral and shelter, education, edification and training. Approximately 35 volunteers service the hot line phone. (Grants and allocations \$ _____)	33,984.
b _____ (Grants and allocations \$ _____)	
c _____ (Grants and allocations \$ _____)	
d _____ (Grants and allocations \$ _____)	
e Other program services (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	33,984.

Part IV Balance Sheets (See instructions)

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

		(A) Beginning of year		(B) End of year
ASSETS	45 Cash - non-interest-bearing	3,158.	45	5,806.
	46 Savings and temporary cash investments	10,122.	46	
	47 a Accounts receivable	47 a		
	b Less: allowance for doubtful accounts	47 b	47 c	
	48 a Pledges receivable	48 a		
	b Less: allowance for doubtful accounts	48 b	48 c	
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51 a Other notes & loans receivable (attach sch)	51 a		
	b Less: allowance for doubtful accounts	51 b	51 c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges		53	
	54 Investments - securities (attach schedule)	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	54	
	55 a Investments - land, buildings, & equipment: basis	55 a		
b Less: accumulated depreciation (attach schedule)	55 b	55 c		
56 Investments - other (attach schedule)		56		
57 a Land, buildings, and equipment: basis	57 a	13,097.		
b Less: accumulated depreciation (attach schedule)	57 b	6,493.	57 c	6,604.
58 Other assets (describe ▶)	Statement 3	5,842.	58	
59 Total assets (add lines 45 through 58) (must equal line 74)		19,122.	59	12,410.
LIABILITIES	60 Accounts payable and accrued expenses		60	
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)	621.	63	621.
	64 a Tax exempt bond liabilities (attach schedule)		64 a	
	b Mortgages and other notes payable (attach schedule)		64 b	
65 Other liabilities (describe ▶)		65		
66 Total liabilities (add lines 60 through 65)		621.	66	621.
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted		67	
	68 Temporarily restricted		68	
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds	18,501.	72	11,789.
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	18,501.	73	11,789.
	74 Total liabilities and net assets/fund balances (add lines 66 and 73)	19,122.	74	12,410.

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.

BAA

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

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

a	Total revenue, gains, and other support per audited financial statements	a	48,060.
b	Amounts included on line a but not on line 12, Form 990:		
(1)	Net unrealized gains on investments \$		
(2)	Donated services and use of facilities \$		
(3)	Recoveries of prior year grants \$		
(4)	Other (specify):		
	\$		
	Add amounts on lines (1) through (4)	b	
c	Line a minus line b	c	48,060.
d	Amounts included on line 12, Form 990 but not on line a :		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify):		
	\$		
	Add amounts on lines (1) and (2)	d	
e	Total revenue per line 12, Form 990 (line c plus line d)	e	48,060.

a	Total expenses and losses per audited financial statements	a	54,772.
b	Amounts included on line a but not on line 17, Form 990:		
(1)	Donated services and use of facilities \$		
(2)	Prior year adjustments reported on line 20, Form 990 \$		
(3)	Losses reported on line 20, Form 990 \$		
(4)	Other (specify):		
	\$		
	Add amounts on lines (1) through (4)	b	
c	Line a minus line b	c	54,772.
d	Amounts included on line 17, Form 990 but not on line a :		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify):		
	\$		
	Add amounts on lines (1) and (2)	d	
e	Total expenses per line 17, Form 990 (line c plus line d)	e	54,772.

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances
Mary M. Elberfeld 951 N. Delaware Ave. Lindenhurst, NY 11757	Pres/Trea/Trust 50	0.	0.	0.
Richard J. Elberfeld 951 N. Delaware Ave. Lindenhurst, NY 11757	Secr/Trustee 5	0.	0.	0.
Deborah Mitchell 1420 Union Blvd. Bayshore, NY 11706	Trustee As Needed	0.	0.	0.
Michael J. Menken 95 Street New York, NY 10002	Trustee As Needed	0.	0.	0.
Phyllis Rose Popodopolous 404 Route 109 Babylon, NY 11704	Trustee As Needed	0.	0.	0.
Delores Smith Esq. 45 Gordon Ave. West Babylon, NY 11704	Trustee As Needed	0.	0.	0.

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? Yes No

If 'Yes,' attach schedule - see instructions.

Part VI Other Information (See instructions.)		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity.		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes.		X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
78b	If 'Yes,' has it filed a tax return on Form 990-T for this year?		N/A
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement.		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?		X
80b	If 'Yes,' enter the name of the organization ▶ <u>N/A</u>		
81a	Enter direct and indirect political expenditures. See line 81 instructions. <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.	81a	0.
81b	Did the organization file Form 1120-POL for this year?		X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
82b	If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b	N/A
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
83b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
84b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		N/A
85a	501(c)(4), (5), or (6) organizations: Were substantially all dues nondeductible by members?		N/A
85b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		N/A
85c	Dues, assessments, and similar amounts from members.	85c	N/A
85d	Section 162(e) lobbying and political expenditures.	85d	N/A
85e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices.	85e	N/A
85f	Taxable amount of lobbying and political expenditures (line 85d less 85e).	85f	N/A
85g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		N/A
85h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		N/A
86a	501(c)(7) organizations: Enter: a Initiation fees and capital contributions included on line 12.	86a	N/A
86b	Gross receipts, included on line 12, for public use of club facilities.	86b	N/A
87a	501(c)(12) organizations: Enter: a Gross income from members or shareholders.	87a	N/A
87b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX.		X
89a	501(c)(3) organizations: Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0.; section 4912 ▶ 0.; section 4955 ▶ 0.		
89b	501(c)(3) and 501(c)(4) organizations: Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction.		X
89c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.		0.
89d	Enter: Amount of tax on line 89c, above, reimbursed by the organization.		0.
90a	List the states with which a copy of this return is filed ▶ <u>New York</u>		
90b	Number of employees employed in the pay period that includes March 12, 2004 (See instructions.)	90b	0
91	The books are in care of ▶ <u>Richard J. Elberfeld</u> Telephone number ▶ <u>[REDACTED]</u> Located at ▶ <u>P.O. Box 117, Lindenhurst, NY</u> ZIP + 4 ▶ <u>11757</u>		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ <u>92</u>		N/A

Part VII Analysis of Income-Producing Activities (See instructions.)

Note: Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a					
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings & temporary cash invmnts			14	39.	
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from pers prop.					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events			1	28,235.	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				28,274.	
105 Total (add line 104, columns (B), (D), and (E))					28,274.

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

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
N/A	

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See instructions.)

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

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See instructions.)

- a Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- b Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If 'Yes' to (b), file Form 8870 and Form 4720 (see instructions)

Under penalties of perjury, I declare that I have examined this return including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Please Sign Here

Signature of officer: Lewis H. Fink CPA Date: 11/12/05

Type or print name and title: Lewis H. Fink, CPA

Paid Preparer's Use Only

Preparer's signature: Lewis H. Fink CPA Date: 11/12/05 Check if self-employed: Preparer's SSN or PTIN (See General Instruction W): N/A

Firm's name (or yours if self-employed) address and ZIP + 4: Lewis H. Fink, CPA
340 Veterans Hwy #5
Commack, NY 11725

EIN: N/A Phone no: [REDACTED]

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under
Section 501(c)(3)

OMB No 1545-0047

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

2004

Department of the Treasury
Internal Revenue Service

Supplementary Information — (See separate instructions.)

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

Name of the organization

Employer identification number

Women of Substance Ministries, Inc.

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

(See instructions. List each one. If there are none, enter 'None'.)

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

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

(See instructions. List each one (whether individuals or firms). If there are none, enter 'None'.)

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

Part III Statements About Activities (See instructions.)

	Yes	No
<p>1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid or incurred in connection with the lobbying activities. \$ N/A</p> <p>(Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)</p> <p>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.</p>		X
<p>2 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.)</p>		
<p>a Sale, exchange, or leasing of property?</p>		X
<p>b Lending of money or other extension of credit?</p>		X
<p>c Furnishing of goods, services, or facilities?</p>		X
<p>d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?</p>		X
<p>e Transfer of any part of its income or assets?</p>		X
<p>3a 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.)</p>		X
<p>b Do you have a section 403(b) annuity plan for your employees?</p>		X
<p>4a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?</p>		X
<p>b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?</p>		X

Part IV Reason for Non-Private Foundation Status (See instructions.)

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

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

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

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

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

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

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

Calendar year (or fiscal year beginning in)	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	39,979.	55,527.	31,924.	47,316.	174,746.
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	20,446.	21,807.	16,100.	22,151.	80,504.
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	122.				122.
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	60,547.	77,334.	48,024.	69,467.	255,372.
24 Line 23 minus line 17	40,101.	55,527.	31,924.	47,316.	174,868.
25 Enter 1% of line 23	605.	773.	480.	695.	
26 Organizations described on lines 10 or 11:	a Enter 2% of amount in column (e), line 24				▶ 26a 3,497.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					▶ 26b 1,503.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					▶ 26c 174,868.
d Add: Amounts from column (e) for lines:	18	122.	19		▶ 26d 1,625.
	22		26b	1,503.	▶ 26e 173,243.
e Public support (line 26c minus line 26d total)					▶ 26f 173,243.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					▶ 26g 99.07 %
27 Organizations described on line 12: N/A					
a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' Do not file this list with your return. Enter the sum of such amounts for each year:	(2003)	(2002)	(2001)	(2000)	
b For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:	(2003)	(2002)	(2001)	(2000)	
c Add: Amounts from column (e) on lines:	15		16		▶ 27c
	17	20	21		▶ 27d
d Add: Line 27a total and line 27b total					▶ 27e
e Public support (line 27c total minus line 27d total)					▶ 27f
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)					▶ 27g 271
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					▶ 27h %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					▶ 27i %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

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

N/A

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If 'Yes,' please describe; if 'No,' please explain. (If you need more space, attach a separate statement.)		
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.)		
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities? If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.)		
34a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered 'Yes' to either 34a or b, please explain using an attached statement.		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation.		

Part VI-A Lobbying Expenditures by Electing Public Charities (See instructions.)
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

N/A

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked 'a' and 'limited control' provisions apply.

Limits on Lobbying Expenditures

(The term 'expenditures' means amounts paid or incurred.)

		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table --		
	If the amount on line 40 is --		
	Not over \$500,000	20% of the amount on line 40	
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	
	Over \$17,000,000	\$1,000,000	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	
Caution: If there is an amount on either line 43 or line 44, you must file Form 4720			

4-Year Averaging Period Under Section 501(h)

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

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
45	Lobbying nontaxable amount				
46	Lobbying ceiling amount (150% of line 45(e))				
47	Total lobbying expenditures				
48	Grassroots non-taxable amount				
49	Grassroots ceiling amount (150% of line 48(e))				
50	Grassroots lobbying expenditures				

Part VI-B Lobbying Activity by Nonelecting Public Charities
 (For reporting only by organizations that did not complete Part VI-A) (See instructions.)

N/A

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

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

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

