WESTCHESTER CHILDREN'S ASSOCIATION, INC 470 MAMARONECK AVENUE WHITE PLAINS, NY 10605

Enclosed are the original and one copy of your income tax returns for the period ended December 31, 2013 for:

WESTCHESTER CHILDREN'S ASSOCIATION, INC as follows...

- 2013 990 Return of Organization Exempt from Income Tax
- 2013 Schedule A Public Charity Status and Public Support
- 2013 Schedule B Schedule of Contributors
- 2013 Schedule C Political Campaign and Lobbying Activities
- 2013 Schedule D Supplemental Financial Statements
- 2013 Schedule G Supplemental Info. Regarding Fundraising/Gaming
- 2013 Schedule O Supplemental Information to Form 990 or 990EZ
- 2013 8879-EO IRS e-file Signature Authorization
- 2013 New York Form 500 Annual Financial Report

Each original should be dated, signed and filed in accordance with the filing instructions. The copy should be retained for your files.

Very truly yours,

Maier Markey & Justic LLP

Instructions for filing WESTCHESTER CHILDREN'S ASSOCIATION, INC Form 8879-EO - IRS E-file Signature Authorization for the period ended December 31, 2013

Signature...

The original IRS e-file Signature Authorization form should be signed (use full name) and dated by the taxpayer.

Filing...

Return your signed Form 8879-EO to:

MAIER MARKEY & JUSTIC LLP 222 BLOOMINGDALE ROAD, STE 400 WHITE PLAINS NY 10605

Payment of tax... No payment of tax is required.

Form 8879-EO serves as a replacement for your signature that would be affixed to form 990 if you paper filed your return. Please DO NOT separately file form 990 with the Internal Revenue Service. Doing so will delay the processing of your return.

We must receive your signed form before we can electronically transmit your return which is due on August 15, 2014. We would appreciate your returning this form as soon as possible as this will expedite the processing of your return. The Internal Revenue Service will notify us when your return is accepted. Your return is not considered filed until the Internal Revenue Service confirms their acceptance, which may occur after the due date of your return.

Form **8879-EO**

IRS *e-file* Signature Authorization for an Exempt Organization

OMB	No.	1545-	1878

	For order decrease 0010, and another incident	00	
	For calendar year 2013, or fiscal year beginning, 2013, and ending	, 20	െ 4 വ
Department of the Treasury	▶ Do not send to the IRS. Keep for your records. ▶ Information about Form 8879-EO and its instructions is at www.irs.gov/formation	997000	<u> </u>
nternal Revenue Service Name of exempt organization			tification number
		' '	
	CHILDREN'S ASSOCIATION, INC	13-174	0066
Name and title of officer			
CORA GREENBE			
Part I Type of R	eturn and Return Information (Whole Dollars Only)		
check the box on line eave line 1b, 2b, 3b,	ck here b Total revenue, if any (Form 990-EZ, line 9)	filed with this forced -0- on the received. 2) 1b _ 2b	orm was blank, then
3a Form 1120-POL c	heck here ▶ b Total tax (Form 1120-POL, line 22)	3b _	
4a Form 990-PF ched			
5a Form 8868 check	here b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)		
	•		
Part II Declaration	on and Signature Authorization of Officer		
are true, correct, and organization's electron to send the organization the transmission, (b) the authorize the U.S. Trefinancial institution accreturn, and the financial Agent at 1-888-353-45 involved in the process resolve issues related	ectronic return and accompanying schedules and statements and to the best of complete. I further declare that the amount in Part I above is the amount shown ic return. I consent to allow my intermediate service provider, transmitter, or early return to the IRS and to receive from the IRS (a) an acknowledgement of references on any delay in processing the return or refund, and (c) the date of all asury and its designated Financial Agent to initiate an electronic funds withdrate ount indicated in the tax preparation software for payment of the organization all institution to debit the entry to this account. To revoke a payment, I must consider than 2 business days prior to the payment (settlement) date. I also sing of the electronic payment of taxes to receive confidential information neces to the payment. I have selected a personal identification number (PIN) as my set applicable, the organization's consent to electronic funds withdrawal.	n on the copy of electronic return eceipt or reason my refund. If app wal (direct debit is federal taxes ntact the U.S. Tro authorize the essary to answe	the originator (ERO) for rejection of blicable, I) entry to the owed on this easury Financial financial institutions r inquiries and
Of <u>fice</u> r's PIN: check o			
X Lauthorize Mi	AIER MARKEY & JUSTIC LLP $oxed{1}$ to enter my PIN $oxed{1}$	5 4 9 2	as my signature
	ERO firm name Ent	er five numbers, bu	
being filed with ERO to enter the As an officer of the I have indicates	ation's tax year 2013 electronically filed return. If I have indicated within this renal a state agency(ies) regulating charities as part of the IRS Fed/State programmy PIN on the return's disclosure consent screen. If the organization, I will enter my PIN as my signature on the organization's tated within this return that a copy of the return is being filed with a state agency tate program, I will enter my PIN on the return's disclosure consent screen.	n, I also authorize	the aforementioned ctronically filed return
Officer's signature	Date > (06/25/201	Δ
<u> </u>	ition and Authentication	. U ,	1
	r your six-digit electronic filing identification 1 3	5 5 1 3	8 7 7 0 5
iuilibei (EFIN) IOIIOWe	d by your five-digit self-selected PIN.	do not enter	
ndicated above. I conf	numeric entry is my PIN, which is my signature on the 2013 electronically filed firm that I am submitting this return in accordance with the requirements of Pulzed IRS <i>e-file</i> Providers for Business Returns.	d return for the	organization
ERO's signature ▶	Date ▶		
	ERO Must Retain This Form - See Instructions		
For Danarwark Dadus	Do Not Submit This Form To the IRS Unless Requested To Detion Act Notice, see back of form.		Form 8879-EO (2013)
roi raperwork Reduc	AION ACT NOTICE, SEE DACK OF IOTH.	F	om 0013-EU (2013)

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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 private foundations)

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public

AF	or tn	e 201	3 calendar year, or tax year begin	ining , 2013	s, and ending				, 20
ъ.			C Name of organization				D Employer ide	ntification	number
БС	heck if ap	oplicable:	WESTCHESTER CHILDREN'S	S ASSOCIATION, INC			13-1740	066	
	Addre		Doing Business As						
	Name	change	Number and street (or P.O. box if mail is	not delivered to street address)	Room/suite		E Telephone nu	mber	
	Initial	return	470 MAMARONECK AVENUE		304		(914) 946	7676	
	Termi	inated	City or town, state or province, country, a	and ZIP or foreign postal code	•		,		
	Amen		WHITE PLAINS, NY 10605	5			G Gross receipts	s \$	4,676,151.
	Applic	cation	F Name and address of principal officer:				H(a) Is this a group		Yes X No
	pendi	ng					subordinates? H(b) Are all subordin		Yes No
$\overline{}$	Tax-ex	empt st	atus: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1)	or 527		If "No," attach		
_			WWW.WCA4KIDS.ORG) (insert no.) 4347 (a)(1)	01 327		H(c) Group exempt	·	
				Association Other	1 Voor of f		on: 1923 M S		<u> </u>
			mmary	Association	L real of i	Omnanc	II. 1725 W 3	nate of lega	ai domicile. 111
F	art I			WECHC	HECMED CH	TTDE	EN'C ACCC		ON TNC
	1		y describe the organization's mission or					CIATIC	JN, INC.
nce			SION IS TO IMPROVE THE I		CHILDREN		SHAPING		
rna	_		ICIES AND PROGRAMS TO ME						
Governance	2			iscontinued its operations or dispos			1	1	2.1
			per of voting members of the governing					3	31.
Activities &			per of independent voting members of the					4	31.
ij	5	Total	number of individuals employed in cale	endar year 2013 (Part V, line 2a)				5	7.
ξį			number of volunteers (estimate if necess					6	42.
ď	7a	Total	unrelated business revenue from Part V	III, column (C), line 12				7a	0
	b	Net u	nrelated business taxable income from I	Form 990-T, line 34				7b	0
					L		Prior Year		Current Year
a	8	Contri	ibutions and grants (Part VIII, line 1h)		L		392,936	5.	891,627.
Revenue			am service revenue (Part VIII, line 2g)					0	0
eve			tment income (Part VIII, column (A), line				118,279	9.	194,380.
Œ			revenue (Part VIII, column (A), lines 5,				749	9.	786.
	12		revenue - add lines 8 through 11 (must				511,964	1.	1,086,793.
			s and similar amounts paid (Part IX, colu				•	0	
	14		its paid to or for members (Part IX, colu					0	0
"	4-		es, other compensation, employee bene				425,799	9.	466,200.
Expenses	162		ssional fundraising fees (Part IX, column				120,773	0	
ber	h	Total	fundraising expenses (Part IX, column (I	$\begin{array}{cccccccccccccccccccccccccccccccccccc$					
Ĕ	17						214,827	7	290,319.
			expenses (Part IX, column (A), lines 11						756,519.
	18		expenses. Add lines 13-17 (must equal				640,626	_	
<u>- 0</u>	19	Rever	nue less expenses. Subtract line 18 from	i line 12		D!	-128,662		330,274.
ts o					-	beginn	ing of Current Ye		End of Year
Net Assets or Fund Balances	20		assets (Part X, line 16)				2,890,110		3,204,757.
at A	21		liabilities (Part X, line 26)				47,703		32,076.
			ssets or fund balances. Subtract line 21	from line 20			2,842,407	<u>/ • </u>	3,172,681.
	rt II		gnature Block						
Und	der per	nalties o	of perjury, I declare that I have examined thi complete. Declaration of preparer (other than	is return, including accompanying sched	lules and stateme	ents, an	d to the best of	my knowle	dge and belief, it is
	5, 00110	1	complete. Boolaration of proparor (other than	i omoor) to bacoa on an information of wi	non proparor nao	arry rere	Juliougo.		
O:									
Sig			Signature of officer				Date		
He	re								
			Type or print name and title						
		Print/	Type preparer's name	Preparer's signature	Date		Check	if PTIN	
Paic		BHAI	RTI GUPTA				self-employe		0943421
	parer		s name ►MAIER MARKEY & JU	STIC LLP	I		Firm's EIN ▶ 13		
Use	Only		s address >222 BLOOMINGDALE ROAD, STE					14-644	
May	the II		saddress P222 BLOOMINGDALE ROAD, STE					X	
<u> </u>			Reduction Act Notice, see the separate	, , , , , , , , , , , , , , , , , , , ,					Form 990 (2013)
ı UI	rapel	WUIK	rieduction activolice, see the separat	C 1113U UCUUII3.					1 JIIII J J J (2013)

Form 990 (2013) Page 2 Part III **Statement of Program Service Accomplishments** Check if Schedule O contains a response or note to any line in this Part III 1 Briefly describe the organization's mission: WESTCHESTER CHILDREN'S ASSOCIATION, INC. ("THE ORGANIZATION") WAS ESTABLISHED TO IMPROVE THE LIVES OF WESTCHESTER'S CHILDREN BY SHAPING POLICIES AND PROGRAMS TO MEET THEIR NEEDS, AND BY KEEPING THE WELL-BEING OF WESTCHESTER'S CHILDREN AT THE TOP OF PUBLIC AGENDA. 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4a (Code:) (Expenses \$ 510,998. including grants of \$) (Revenue \$ WESTCHESTER CHILDREN'S ASSOCIATION, INC. IDENTIFIES THE NEEDS OF CHILDREN AND YOUTH AND PROMOTES THEIR WELL-BEING BY ADVOCATING FOR PUBLIC POLICIES AND PROGRAMS THAT MEET THOSE NEEDS. OUR STRATEGIES INCLUDE COLLECTION AND ANALYSIS OF PUBLIC DATA, RESEARCH AND STUDY OF CURRENT LOCAL ISSUES, PUBLIC EDUCATION, COMMUNITY MOBILIZATION, COALITION BUILDING AND DIRECT ADVOCACY. **4b** (Code: including grants of \$) (Revenue \$ **4c** (Code:) (Expenses \$ including grants of \$) (Revenue \$ **4d** Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$

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4e Total program service expenses ▶

510,998.

Form 990 (2013) Page 3

Part	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			v
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	,	Х	
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Λ	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	5		Х
6	Part III	3		
6	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
'	the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>	-		
•	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			v
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Λ
ī	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
120	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"		- 1	
1 Z a	complete Schedule D, Parts XI and XII	12a	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	124		
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			17
4.0	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	10	v	
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	19		Х
20 ~	If "Yes," complete Schedule G, Part III	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		

Form 990 (2013) Page **4**

Part	V Checklist of Required Schedules (continued)			
	- · · · · · · · · · · · · · · · · · · ·		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
23				
	organization's current and former officers, directors, trustees, key employees, and highest compensated	22		Х
04	employees? If "Yes," complete Schedule J	23		Λ_
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			77
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part L	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payable to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If so, complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
		35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note . All Form 990 filers are required to complete Schedule O		Х	

Form 990 (2013) Page **5**

Par				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1 2	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 8		res	NO
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
Ū	reportable gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 7			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶			
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	F-		Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c		Λ
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		
va	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
-	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		Х
	If "Yes," indicate the number of Forms 8282 filed during the year			
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		Х
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		Х
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		Х
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
120	against amounts due or received from them.) Section 4947(a)(1) pan-exempt charitable trusts is the organization filing Form 990 in liquid Form 10412	12a		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	120		
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
-	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
-	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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Part VI

WESTCHESTER CHILDREN'S ASSOCIATION, INC

sect	ion A. Governing Body and Management				
		i		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 31			
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent	1b 31			
2	Did any officer, director, trustee, or key employee have a family relationship or a business re	ationship with			
	any other officer, director, trustee, or key employee?		2	Х	
3	Did the organization delegate control over management duties customarily performed by or ur	nder the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other	er person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was fi	led?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's	assets?	5		Х
6	Did the organization have members or stockholders?		6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to el	ect or appoint			
	one or more members of the governing body?		7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval				
	stockholders, or persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions under	ertaken during			
	the year by the following:		_	17	
а	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot				х
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O on B. Policies (This Section B requests information about policies not required by the Int		9 Code	<u> </u>	Λ
JCCII	on b. Folicies (This Section B requests information about policies not required by the int	erriai rieveriue		Yes	No
	Did the expenientian have level shorters branches as effiliates?		10a		X
	Did the organization have local chapters, branches, or affiliates?		104		
b	If "Yes," did the organization have written policies and procedures governing the activities of	-	10b		
110	affiliates, and branches to ensure their operations are consistent with the organization's exempt pr	•	11a	Х	
lla b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before find Describe in Schedule O the process, if any, used by the organization to review this Form 990.	iing the form?			
	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>		12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests to				
b	rise to conflicts?	_	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the p				
·	describe in Schedule O how this was done		12c	Х	
13	Did the organization have a written whistleblower policy?		13	Х	
14	Did the organization have a written document retention and destruction policy?		14		Х
15	Did the process for determining compensation of the following persons include a review ar				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation				
а	The organization's CEO, Executive Director, or top management official		15a	Х	
	Other officers or key employees of the organization		15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or simila	r arrangement			
	with a taxable entity during the year?		16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization				
	participation in joint venture arrangements under applicable federal tax law, and take steps to	safeguard the			
	organization's exempt status with respect to such arrangements?		16b		
Sect	ion C. Disclosure				
17	',				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and	1 990-T (Section	501(0	s)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply. Own website X Another's website X Upon request Other (explain in Sch	nadula (1)			
		,			
19	Describe in Schedule O whether (and if so, how) the organization made its governing document	s, conflict of inte	erest	oolicy	, and
	financial statements available to the public during the tax year.	and account of the			
20	State the name, physical address, and telephone number of the person who possesses the books organization: ▶ CORA GREENBERG 470 MAMARONECK AVENUE WHITE PLAINS, NY 10605 914-	and records of th	ie		
	OF STATE OF	/=0-/0/0			

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Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII.........

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Į	Check this box if neither the organization nor a	any related	organization compensate	ed any current offic	er, director, or trus	stee.

	,	_						•	, ,	
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	not ch unles:	s per a di	ition more rson	e than of is both cor/trust employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1)JANET GUTTERMAN, ESQ.	5.00									
CHAIR		Х		Х				C	0	0
(2)CATHERINE A. DRAPER	5.00									
PRESIDENT		X		Х				C	0	0
(3)ADRIENNE WEISS-HARRISON, MD	5.00									
1ST VICE PRESIDENT		Х		Х				C	0	0
(4)JULIA B. ANELLO	5.00									
VICE PRESIDENT		X		Х				C	0	0
	5.00									
VICE PRESIDENT		Х		Х				С	0	0
_(6)THOMAS KYLE	5.00									_
TREASURER		Х		Х				С	0	0
_(7)FREDDA_KRAMER	5.00								_	_
SECRETARY		Х		Х				С	0	0
_(8)JOANNE AMOROSI	5.00									
DIRECTOR	5 00	Х						С	0	0
(9)ELLIE B. BECKER	5.00									
DIRECTOR	F 00	Х						C	0	0
(10)SHERYL DICKER	5.00	,								0
DIRECTOR	F 00	Х						C	0	0
(11)MYRNA FORNEY	5.00	X						0	0	0
DIRECTOR (12)JOHN A. GIACOBBE	5.00	Α.	\vdash	\dashv				-	0	
DIRECTOR		Х						С	0	0
(13)VINCENT P. GIANATASIO DIRECTOR	5.00	X						C	0	0
(14)DOUGLAS GOULD DIRECTOR	5.00	х						0	0	0
DIVICION		Λ						1	<u> </u>	U

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Part VII Section A. Officers, Directors, Tr	ustees, Ke	y En	plo	oye	es,	and I	Higl	hest Compensat	ed Employees (d	ontinue	ed)	
(A)	(B)			(0	C)			(D)	(E)		(F)	
Name and title	Average hours per week (list any hours for	box,	unle	heck ss pe	erson	e than c is both tor/trust	an	Reportable compensation from the	Reportable compensation from related organizations	an	stimated nount of other pensation	f
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	org and	om the anizatio d related anization	b
15) JODY GREENBAUM	5.00											
DIRECTOR		Х						0	0			
16) CAREY E. GROSS, MD DIRECTOR	5.00	Х						0	0			C
17) MARIS H. KRASNOW	5.00											
DIRECTOR		Х						0	0			
18) JAY LERNER DIRECTOR	5.00	X						0	0			C
19) KATHERINE S. LOBACH, MD	5.00											
DIRECTOR		Х						0	0			C
20) PATRICK MALONEY, MD	5.00											
DIRECTOR		Х						0	0	<u> </u>		
21) ELIZABETH S. MARK	5.00											
DIRECTOR		X						0	0	—		
DIRECTOR	5.00	Х						0	0			C
23) MARGIE ORELL	5.00											
DIRECTOR		Х						0	0			C
24) KENNETH A. SCHIFFER, MD	5.00											
DIRECTOR		X						0	0			C
25) BABARA HOLLAND	5.00											
DIRECTOR		X						0	0			
1b Sub-total								0	0	—		0
c Total from continuation sheets to Part VII,	=						>	71,353.	0		20,2	
d Total (add lines 1b and 1c)							<u> </u>	71,353.	0		20,2	45.
Total number of individuals (including but not reportable compensation from the organization)			liste)	ed a	bov	e) who	o re	eceived more than	\$100,000 of			
											Yes	No
3 Did the organization list any former offi employee on line 1a? If "Yes," complete Sched										3		Х
4 For any individual listed on line 1a, is the	sum of rep	oortab	le d	com	per	nsatio	n aı	nd other compens	sation from the			
organization and related organizations g												
individual										4		X
5 Did any person listed on line 1a receive of for services rendered to the organization? If "										5		Х

Section B. Independent Contractors	_

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

² Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 0

Form 990 (2013)												Page 8
Part VII Section A. Officers, Directors, Tru	ustees, Ke	y En	nplo	ye	es,	and F	ligl	hest Compensat	ed Employees (d	ontinu	ied)	
(A) Name and title	Average hours per week (list any hours for related	box,	unles er and	Pos heck ss pe	erson	e than or is both tor/truste	an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	a cor f	(F) Estimated mount of other mpensation from the	ion
	organizations below dotted line)	Individual trustee or director	Institutional trustee	cer	Key employee	Highest compensated employee	ner	(W-2/1099-MISC)		ar	ganizatio nd related ganization	d
26) LISA KAHN	5.00											
DIRECTOR		Х						0	0	<u> </u>		0
27) LINDA LANDESMAN	5.00							_		1		
DIRECTOR		Х						0	0			0
28) MARY LOEFFLER	5.00							_				
DIRECTOR		Х						0	0	<u> </u>		0
29) SALAHUDDIN RAJPUT	5.00	٠								1		•
DIRECTOR	F 00	X						0	0			0
30) LISA KATZ	5.00	.,								1		^
DIRECTOR	F 00	Х						0	0	 		0
31) LINDA F. SELIGSON	5.00	.,						0				^
DIRECTOR	40.00	Х						0	U			0
32) CORA GREENBERG OFFICER INCHARGE OF OPERATIONS	40.00	-		Х				71,353.	_	1	20,2	245
OFFICER INCHARGE OF OPERATIONS				Λ				/1,353.	0		20,2	145.
		1										
	 	1										
	 	1								1		
1h Suh-total					l		_					
1b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)	ection A						>					
Total number of individuals (including but not reportable compensation from the organization)	limited to t	hose				e) who	re	eceived more than	\$100,000 of			
			-								Yes	No
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched										3		Х
4 For any individual listed on line 1a, is the organization and related organizations groups	sum of rep	oortab	ole c	com	per	nsation	n ar	nd other compens	sation from the			
individual										4		Х
5 Did any person listed on line 1a receive or												
for services rendered to the organization? If "Y										5		Х
Section B. Independent Contractors	,											
Complete this table for your five highest component compensation from the organization. Report of year.											(

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (D) Related or Unrelated Revenue Total revenue business exempt excluded from tax revenue function under sections 512-514 revenue Contributions, Gifts, Grants and Other Similar Amounts 1a Federated campaigns 1b **b** Membership dues c Fundraising events 78,421. d Related organizations 1d 1e e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above . 1f 813,206. g Noncash contributions included in lines 1a-1f: \$ _ Total. Add lines 1a-1f 891,627 Program Service Revenue **Business Code** 2a b f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) ATTACHMENT 1 58,776. Income from investment of tax-exempt bond proceeds . . . > 0 4 5 (ii) Personal (i) Real 6a Gross rents **b** Less: rental expenses Rental income or (loss) . . d Net rental income or (loss) (ii) Other (i) Securities Gross amount from sales of 3,687,895. assets other than inventory **b** Less: cost or other basis and sales expenses 3,552,291. 135,604. c Gain or (loss) 135,604. 135,604. Other Revenue Gross income from fundraising ATCH 2 events (not including \$ _______78,421. of contributions reported on line 1c). See Part IV, line 18 a 18,414. c Net income or (loss) from fundraising events .ATCH .3 .▶ -18,653 -18,653. 9a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses 10a Gross sales of inventory, returns and allowances b Less: cost of goods sold b Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** CALENDARS SALE 3,975 3,975 11a b CONSULTING FEES 15,000 15,000 c PIN SALES 464 d All other revenue 19,439. e Total. Add lines 11a-11d Total revenue. See instructions 1,086,793 19,439 175,727.

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a resp	onse or note to any lir	ne in this Part IX		
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	0			
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22	0			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	91,597.	59,388.	10,340.	21,869.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0	224 722	2= 100	
7	Other salaries and wages	310,922.	201,588.	35,100.	74,234.
8	Pension plan accruals and contributions (include section	11 100	7.054	1 060	0 671
	401(k) and 403(b) employer contributions)	11,188.	7,254.	1,263.	2,671.
9	Other employee benefits	22,412.	14,531.	2,530.	5,351.
10	Payroll taxes	30,081.	19,503.	3,396.	7,182.
	Fees for services (non-employees):	112 405	100 461	10 104	1 020
	Management	112,405.	100,461.	10,124.	1,820.
	Legal	16 702	15 000	1 512	272
	Accounting	16,792.	15,008.	1,512.	272.
	Lobbying	0			
	Professional fundraising services. See Part IV, line 17.	27,460.		27,460.	
	Investment management fees	27,400.		27,400.	
g	Other. (If line 11g amount exceeds 10% of line 25, column	0			
10	(A) amount, list line 11g expenses on Schedule O.)	1,185.			1,185.
	Advertising and promotion	61,404.	37,503.	3,190.	20,711.
	Office expenses	4,354.	3,572.	391.	391.
	Royalties	0		0,11	
	Occupancy	37,713.	28,285.	4,714.	4,714.
	Travel	10,393.	7,682.	96.	2,615.
	Payments of travel or entertainment expenses	.,	.,		,
. 5	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	3,595.	3,134.		461.
	Interest	0	·		
	Payments to affiliates	0			
	Depreciation, depletion, and amortization	2,002.	1,502.	250.	250.
23	Insurance	5,526.	4,628.	403.	495.
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
	PROGRAM_ACTIVITIES	6,717.	6,717.		
b	CREDIT CARD CHARGES	773.	242.	154.	377.
c					
d					
	All other expenses				
	Total functional expenses. Add lines 1 through 24e	756,519.	510,998.	100,923.	144,598.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here if	-			
	following SOP 98-2 (ASC 958-720)	0			

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Part X Balance Sheet

Пе	III	Datance Street			
		Check if Schedule O contains a response or note to any line in this	Part X		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	137,139.	1	491,751.
	2	Savings and temporary cash investments	29,016.	2	2,228,630.
	3	Pledges and grants receivable, net	2,325.	3	455,938.
	4	Accounts receivable, net		4	0
	5	Loans and other receivables from current and former officers, directors	,		
		trustees, key employees, and highest compensated employees	i.		
		Complete Part II of Schedule L		5	0
	6	Loans and other receivables from other disqualified persons (as defined under section of the disqualified persons).			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employer and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiar			
ဟ		organizations (see instructions). Complete Part II of Schedule L		6	0
Assets	7	Notes and loans receivable, net		7	0
As	8	Inventories for sale or use Prepaid expenses and deferred charges ATCH 4		8	0
	9	Prepaid expenses and deferred charges ATCH 4	17,677.	9	17,952.
	10 a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 57,013			
	b	Less: accumulated depreciation 10b 52,787 Investments - publicly traded securities ATCH 5	6,228.		4,226.
		Investments - publicly traded securities ATCH 5	2,691,465.	_	0
	12	Investments - other securities. See Part IV, line 11	•	12	0
	13	Investments - program-related. See Part IV, line 11	•	13	0
	14	Intangible assets		14	0
	15	Other assets. See Part IV, line 11	6,260.		6,260. 3,204,757.
-	16 17	Total assets. Add lines 1 through 15 (must equal line 34)			32,076.
	18	Accounts payable and accrued expenses	•	18	32,070.
	19	Grants payable Deferred revenue	•		0
	20	Tax-exempt bond liabilities	•	20	0
တ	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	0
Liabilities	22	Loans and other payables to current and former officers, directors	•		_
Ιġ		trustees, key employees, highest compensated employees, and			
Ë		disqualified persons. Complete Part II of Schedule L		22	0
	23	Secured mortgages and notes payable to unrelated third parties		23	0
	24	Unsecured notes and loans payable to unrelated third parties		24	0
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part 2	(
		of Schedule D			0
	26	Total liabilities. Add lines 17 through 25		26	32,076.
es		Organizations that follow SFAS 117 (ASC 958), check here X an complete lines 27 through 29, and lines 33 and 34.	d		
anc	27	Unrestricted net assets	593,777.	27	545,938.
Bal	28	Temporarily restricted net assets	20,000.	28	398,113.
Fund Balances	29	Permanently restricted net assets	2,228,630.	29	2,228,630.
or Fu		Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34.	d		
ţ	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ne	33	Total net assets or fund balances	2,842,407.	33	3,172,681.
_	34	Total liabilities and net assets/fund balances	2,890,110.	34	3,204,757.
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Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u> .	<u></u> .			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,0	86,7	93.
2	Total expenses (must equal Part IX, column (A), line 25)	2		7	56,5	19.
3	Revenue less expenses. Subtract line 2 from line 1	3		3	30,2	274.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2,8	42,4	07.
5	Net unrealized gains (losses) on investments	5				0
6	Donated services and use of facilities	6				0
7	Investment expenses	7				0
8	Prior period adjustments	8				0
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10		3,1	72,6	81.
Part						
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain	in			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were con	npiled	or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
h	Were the organization's financial statements audited by an independent accountant?			2b	Х	
D	If "Yes," check a box below to indicate whether the financial statements for the year were audi					
	separate basis, consolidated basis, or both:	.00 01	۱ ۵			
	X Separate basis Consolidated basis Both consolidated and separate basis					
•	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for overs	eiaht				
·	of the audit, review, or compilation of its financial statements and selection of an independent account	•		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, e		in			
	Schedule O.	λριαιιι	""			
3.0	As a result of a federal award, was the organization required to undergo an audit or audits as se	t forth	in			
Ja	the Single Audit Act and OMB Circular A-133?	i ioitii	""	3a		Х
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	erac i	the			
D	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au			3b		

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ. ►Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number Name of the organization WESTCHESTER CHILDREN'S ASSOCIATION, INC 13-1740066 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 Х An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3 % 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). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. Type II c Type III-Functionally integrated d Type III-Non-functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? No Yes (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). (iii) Type of organization (i) Name of supported (ii) EIN (vii) Amount of monetary (iv) Is the (v) Did you notify (vi) Is the organization in organization (described on lines 1-9 the organization organization in support col. (i) listed in above or IRC section in col. (i) of your col. (i) organized your governing support? (see instructions)) in the U.S.? document? Yes No Yes No Yes No (A) (B) (C) (D) (E)

Form 990 or 990-EZ.

For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2013

Schedule A (Form 990 or 990-EZ) 2013

Par	Complete only if you checked Part III. If the organization fair	ed the box on	line 5, 7, or 8	of Part I or if t	the organization	n failed to qua	
Sec	tion A. Public Support			,		,	
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.						
	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12 13	Gross receipts from related activities, etc. (First five years. If the Form 990 is f	,				12 ear as a section	501(c)(3)
	organization, check this box and stop here						
Sec	tion C. Computation of Public Sup	port Percenta	ige				
14	Public support percentage for 2013 (li						%
15	Public support percentage from 2012						%
16a	331/3% support test - 2013. If the o						
	this box and stop here . The organizati	•		-			
b	331/3% support test - 2012. If the						
	check this box and stop here. The org						
17a	10%-facts-and-circumstances test - 10% or more, and if the organization Part IV how the organization meets organization	meets the "fa the "facts-and-o	cts-and-circums	stances" test, cl test. The organ	neck this box a ization qualifies	nd stop here. It as a publicly s	Explain in
b	10%-facts-and-circumstances test - 15 is 10% or more, and if the organization in Part IV how the organization	2012. If the organization meet	ganization did ı s the "facts-an	not check a box d-circumstances	x on line 13, 16 s" test, check t	Sa, 16b, or 17a his box and s t	top here.
18	supported organization Private foundation. If the organization	did not check	a box on line 13	3, 16a, 16b, 17a	a, or 17b, check	this box and se	e

Schedule A (Form 990 or 990-EZ) 2013

Schedule A (Form 990 or 990-EZ) 2013

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

<u> </u>	tion A. Dodelio Commont				<u>'</u>	,	
	tion A. Public Support	(a) 2000	(b) 2010	(a) 2011	(d) 2012	(a) 2012	(f) Total
_	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees						
2	received. (Do not include any "unusual grants.")	345,336.	286,227.	1,933,881.	392,936.	891,627.	3,850,007.
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
_	organization's tax-exempt purpose						0
3	Gross receipts from activities that are not an						
_	unrelated trade or business under section 513						(
4	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf						(
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5	345,336.	286,227.	1,933,881.	392,936.	891,627.	3,850,007
7 a	Amounts included on lines 1, 2, and 3						
L	received from disqualified persons						
ь	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						(
8	Public support (Subtract line 7c from						
	line 6.)						3,850,007
Sec	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6.	345,336.	286,227.	1,933,881.	392,936.	891,627.	3,850,007
10 a	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties and income from similar						
	sources	34,084.	54,802.	90,714.	99,123.	194,380.	473,103
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						(
С	Add lines 10a and 10b	34,084.	54,802.	90,714.	99,123.	194,380.	473,103.
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly						
	carried on						(
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)	2,221.	519,870.	9,023.	16,050.	786.	547,950.
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	381,641.	860,899.	2,033,618.	508,109.	1,086,793.	4,871,060.
14	First five years. If the Form 990 is for	the organization	n's first, second,	third, fourth, or	fifth tax year a	s a section 501(d	2)(3)
	organization, check this box and stop here						▶ 🔲
Sec	tion C. Computation of Public Sup	port Percenta	ige				
15	Public support percentage for 2013 (line 8	, column (f) divide	ed by line 13, colum	nn (f))		15	79.04%
16	Public support percentage from 2012 Sche					16	79.65%
Sec	tion D. Computation of Investmen	nt Income Per	centage				
17	Investment income percentage for 2013 (li			3, column (f))		17	9.71%
18	Investment income percentage from 2012					18	7.81%
	331/3% support tests - 2013. If the org						
	17 is not more than 331/3%, check th	-					
h	331/3% support tests - 2012. If the orga	-	-	•			
	line 18 is not more than 331/3%, check						
20	Private foundation. If the organization						<u> </u>
				, ,			

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Schedule A (Form 990 or 990-EZ) 2013

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule C (Form 990 or 990-EZ) and its See separate instructions. instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No. 1545-0047

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

● Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of organization WESTCHESTER CHILDREN'S ASSOCIATION, INC 13-1740066 Part FA Complete if the organization is exempt under section 501(c) or is a section 527 organization 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political expenditures. 3 Volunteer hours. Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955. 2 Enter the amount of any excise tax incurred by organization managers under section 4955. 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4a Was a correction made? b If "Yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,	1.
Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political expenditures	Yes No
Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political expenditures	Yes No
Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization managers under section 4955. ▶ 2 Enter the amount of any excise tax incurred by organization managers under section 4955. ▶ 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4a Was a correction made? b If "Yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. ▶ 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. ▶ 3 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. ▶ 4 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. ▶ 4 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. ▶ 5 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities.	Yes No
Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955. ▶ \$ 2 Enter the amount of any excise tax incurred by organization managers under section 4955. ▶ \$ 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4a Was a correction made? b If "Yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. ▶ \$ 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. ▶ \$	Yes No
Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955	Yes No
Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 .	Yes No
1 Enter the amount of any excise tax incurred by the organization under section 4955. ▶ \$ 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4a Was a correction made? b If "Yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. ▶ \$ 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. ▶ \$	Yes No
2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4a Was a correction made? b If "Yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$	Yes No
2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4a Was a correction made? b If "Yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$	Yes No
4a Was a correction made? b If "Yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. ▶ \$ 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$	
b If "Yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. > \$	Yes No
Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities * ** ** ** ** ** ** ** ** *	
 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities.	
activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities **Section** **S	
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	
527 exempt function activities	
3 Total exampt function expanditures Add lines 1 and 2 Enter here and an Earm 1120 DOI	
line 17b	Yes No
 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to 	
organization made payments. For each organization listed, enter the amount paid from the filing organization's to	
the amount of political contributions received that were promptly and directly delivered to a separate political o	rganization, suc
as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide informat	ion in Part IV.
	nount of political
	itions received and ptly and directly
	red to a separate
	al organization. If
nc nc	one, enter -0
(1)	
(2)	
(3)	
(4)	
(5)	
[]	
(6)	

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2013

F	section 501(h)).	on is exempt under section 501(c)(3) and	illed Form 5766 (elect	lion under
A		belongs to an affiliated group (and list in Pa enses, and share of excess lobbying expend		oup member's
В	Check ▶ if the filing organization	checked box A and "limited control" provisi	ons apply.	
		ying Expenditures	(a) Filing	(b) Affiliated
	(The term "expenditures" me	eans amounts paid or incurred.)	organization's totals	group totals
18	a Total lobbying expenditures to influence	e public opinion (grass roots lobbying)	13,520.	
k	b Total lobbying expenditures to influence	e a legislative body (direct lobbying)	11,830.	
(c Total lobbying expenditures (add lines	1a and 1b)	25,350.	
(d Other exempt purpose expenditures		727,498.	
•		dd lines 1c and 1d)	752,848.	
f	f Lobbying nontaxable amount. Enter	the amount from the following table in both		
	columns.		137,927.	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	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.		
Ç	g Grassroots nontaxable amount (enter	25% of line 1f)	34,482.	
ŀ	h Subtract line 1g from line 1a. If zero or	less, enter -0-	0	
i	Subtract line 1f from line 1c. If zero or	less, enter -0-	0	
j	J If there is an amount other than zer	o on either line 1h or line 1i, did the organiz	ation file Form 4720	
	reporting section 4911 tax for this yea	r?		Yes No
	,	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 2a through 2f on page 4.)

		Lobbying Expen	ditures During 4-Ye	ear Averaging Period		
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount	3,423.	104,861.	121,094.	137,927.	367,305.
b	Lobbying ceiling amount (150% of line 2a, column (e))					550,958.
С	Total lobbying expenditures	17,115.	17,000.	10,655.	25,350.	70,120.
d	Grassroots nontaxable amount	856.	26,215.	30,274.	34,482.	91,827.
е	Grassroots ceiling amount (150% of line 2d, column (e))					137,741.
f	Grassroots lobbying expenditures	9,575.	9,500.	6,175.	13,520.	38,770.

Schedule C (Form 990 or 990-EZ) 2013

Schedule C (Form 990 or 990-EZ) 2013

Page 3

Pai	t II-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	T file	d For	m 5768		
For	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(8	a)	(b)	
	cription of the lobbying activity.	Yes	No	Amo	unt	
1	During the year, did the filing organization attempt to influence foreign, national, state or local					
	legislation, including any attempt to influence public opinion on a legislative matter or					
а	referendum, through the use of: Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
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? Direct contact with legislators, their staffs, government officials, or a legislative body?					
g h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total. Add lines 1c through 1i					
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
c d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
$\overline{}$	t III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	. or s	ection		
	501(c)(6).	(-/(-/				
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?					
2	Did the organization make only in-nouse lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year?			2		
Pai	t III-B Complete if the organization is exempt under section 501(c)(4), section 501					
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No,"	OR (b) Pa	rt III-A, line	3, is	
	answered "Yes."					
1	Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts)			1		
2	political expenses for which the section 527(f) tax was paid).	uiits (OI			
а	Current year			2a		
b	Carryover from last year			2b		
С	Total			2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du	es .		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible I					
	and political expenditure next year?			4		
5	Taxable amount of lobbying and political expenditures (see instructions)			5		
	t IV Supplemental Information					
	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated	group	list); F	Part II-A, line	2; and	
Pari	II-B, line 1. Also, complete this part for any additional information.					

Schedule C (Form 990 or 990-EZ) 2013

Part IV Supplemental Information (continued)

SCHEDULE D (Form 990)

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name	of the organization			Employer identification number
WES	TCHESTER CHILDREN'S ASSOCIATION, II			13-1740066
Par	Organizations Maintaining Donor Advis Complete if the organization answered			counts.
		(a) Donor advised	l funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor	advisors in writing that th	ne assets held in de	onor advised
	funds are the organization's property, subject to the	_		
6	Did the organization inform all grantees, donors, a	_	-	
	only for charitable purposes and not for the benef		-	
	conferring impermissible private benefit?			Yes No
Par		the organization answer	ed "Yes" to Form	990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the	e organization (check all tha	at apply).	
	Preservation of land for public use (e.g., recr	reation or education)	Preservation of a	an historically important land area
	Protection of natural habitat		Preservation of a	a certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization h	neld a qualified conservation	on contribution in th	ne form of a conservation
	easement on the last day of the tax year.		_	
				Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easement	ts		2b
С	Number of conservation easements on a certified	historic structure included	in (a)	2c
d	Number of conservation easements included in (c	c) acquired after 8/17/06, a	and not on a	
	historic structure listed in the National Register			2d
3	Number of conservation easements modified, tran	nsferred, released, extingu	uished, or terminate	ed by the organization during the
	tax year ▶			
4	Number of states where property subject to conse	ervation easement is locate	ed ▶	
5	Does the organization have a written policy regard	ding the periodic monitorin	g, inspection, hand	dling of
	violations, and enforcement of the conservation ea	asements it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, i	nspecting, and enforcing of	conservation easer	ments during the year
	>			
7	Amount of expenses incurred in monitoring, inspe-	cting, and enforcing conse	ervation easements	s during the year
	▶ \$			
8	Does each conservation easement reported on lin			
	(i) and section 170(h)(4)(B)(ii)?			Yes 📖 No
9	In Part XIII, describe how the organization reports	conservation easements	in its revenue and e	expense statement, and
	balance sheet, and include, if applicable, the text	•	ınization's financial	statements that describes the
	organization's accounting for conservation easeme			
Par	Organizations Maintaining Collections Complete if the organization answered			Similar Assets.
	If the organization elected as permitted under S	FAS 116 (ASC 958) not	to report in its re-	venue statement and halance shee
	If the organization elected, as permitted under S works of art, historical treasures, or other simil public service, provide, in Part XIII, the text of the f	lar assets held for public ootnote to its financial sta	exhibition, educatements that descr	ation, or research in furtherance of ibes these items.
b	If the organization elected, as permitted under works of art, historical treasures, or other simil	lar assets held for public		
	public service, provide the following amounts relat	•		. Φ
	(i) Revenues included in Form 990, Part VIII, line			
_	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of a			
	following amounts required to be reported under S			
a	Revenues included in Form 990, Part VIII, line 1 .			
b	Assets included in Form 990, Part X			5

Schedule D (Form 990) 2013

Page 2

Schedule D (Form 990) 2013

Par	t III Organizations Maintainir	ng Collections of	Art, Hist	orical T	reasures,	or Oth	er Similar As	ssets (con	tınue	<u>d)</u>
3	Using the organization's acquisitic collection items (check all that app		ther recor	ds, check	any of the	e follow	ing that are a	significant ι	ise of	f its
а	a Public exhibition d Loan or exchange programs									
b	b Scholarly research e Other									
С	Preservation for future gene	rations								
4	Provide a description of the organ	nization's collections	and expla	ain how t	hey further	the org	janization's exe	mpt purpos	e in [Part
	XIII.									
5	During the year, did the organization	on solicit or receive d	onations o	f art, histo	orical treasu	ires, or o	other similar			
	assets to be sold to raise funds rath	ner than to be mainta	ined as pa	rt of the c	organization	's collec	tion?	Yes		No
Par	t IV Escrow and Custodial Ar or reported an amount or			e organi	ization ans	wered '	"Yes" to Form	990, Part I	V, lin	e 9,
	Is the organization an agent, truste included on Form 990, Part X? If "Yes," explain the arrangement in							Yes		No
							Amour	nt		
	Beginning balance									
d	Additions during the year									
е	Distributions during the year									
f	Ending balance				· · · · <u> 1f</u>					
2a	5									No
	If "Yes," explain the arrangement in									
Par	t V Endowment Funds. Com	(a) Current year	zauon ans (b) Prio		(c) Two yea		(d) Three years ba			
1a	Beginning of year balance	2,720,481.	2,65		1,283		1,302,50		381,	
b	Contributions	2,720,401.	2,05	1,700.	1,500		1,302,30	2.	,01,	700
	Net investment earnings, gains,				1/300	,000.				
•	and losses	166,920.	30	1,967.	-54	,501.	127,88	4.	50,	410
d	Grants or scholarships	200/5200				70020	12,700			
е	Other expenditures for facilities									
	and programs	257,400.	20	8,749.	57	,500.	135,00	0.	119,	154
f	Administrative expenses	28,600.		7,445.		,391.	12,28		10,	
g	End of year balance	2,601,401.	2,72	0,481.	2,654	,708.	1,283,10	0. 1,3	302,	502
2	Provide the estimated percentage	of the current year e	nd balance	(line 1g,	column (a))	held as:		<u> </u>		
а	Board designated or quasi-endown	nent ▶ 14.3300	%							
b	Permanent endowment ▶ 85.6		_							
С	Temporarily restricted endowment	•								
	The percentages in lines 2a, 2b, ar	•								
3a	Are there endowment funds not in	the possession of th	ie organiza	tion that	are held an	d admin	istered for the	_		
	organization by:								Yes	No
	(i) unrelated organizations							3a(i)	Х	
_	(ii) related organizations							3a(ii)	\rightarrow	X
b	If "Yes" to 3a(ii), are the related org		•					3b		
4	Describe in Part XIII the intended u		on's endov	vment fur	nas.					
Par	t VI Land, Buildings, and Equi Complete if the organiza	ipment. fion answered "Ye	s" to Form	990 Pa	art IV line	11a Se	e Form 990 F	Part X line	10	
	Description of property	(a) Cost or			or other basis		umulated	(d) Book val		
	Land	(invest	ment)		ther)		eciation			
1a	Land									
b	Buildings									
Q C	Leasehold improvements				0 010		0 010			
d	Equipment				8,810. 48,203.		8,810. 43,977.		4,2	26
e Tota	I. Add lines 1a through 1e. (Column		1990 Part	X column					4,2	
· ota	iiilougii 16. (Ooluiiii	(u) musi eyuar i Ulli	i ooo, i ail.	A, COIGITII	י <i>וווו פווו</i> ן, <i>ווע</i> ן, וווו	(4)./	-		7,4	<u> </u>

Page 3 Schedule D (Form 990) 2013

Part VII	Investments - Other Securities. Complete if the organization answere	ed "Yes" to Form 990;	, Part IV, line 11b. See Form 990, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financia	al derivatives		
(2) Closely	-held equity interests		
(3) Other			
(A)			
(B)		_	
(C)			
(D)			
(E)		_	
(F)		_	
<u>(G)</u> (H)		+	
	/b) must a sual Farma 000 Bart V and (B) line 10)		
Part VIII	In (b) must equal Form 990, Part X, col. (B) line 12.) Investments - Program Related.		
Pait VIII		nd "Yes" to Form 990	, Part IV, line 11c. See Form 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation:
	(a) Description of investment	(b) DOOK Value	Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column	n (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX	Other Assets. Complete if the organization answere	ed "Yes" to Form 990	, Part IV, line 11d. See Form 990, Part X, line 15.
	(8	a) Description	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	umn (h) must squal Form 000, Part V, sol. (P)	lino 15)	
	umn (b) must equal Form 990, Part X, col. (B) Other Liabilities.	line 15.)	
Part X		ed "Yes" to Form 990	, Part IV, line 11e or 11f. See Form 990, Part X,
1.	(a) Description of liability	(b) Book valu	e
(1) Feder	ral income taxes		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Colum	mn (b) must equal Form 990, Part X, col. (B) line 25	.) ▶	
•	•		e organization's financial statements that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

JSA
3E1270 1.000

Schedule D (Form 990) 2013

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Schedule D (Form 990) 2013 Page 4

Joneau	C D (1 0111 030) 2010				rage i
Part	Reconciliation of Revenue per Audited Financial Statements W Complete if the organization answered "Yes" to Form 990, Part IV			٦.	
1	Total revenue, gains, and other support per audited financial statements	, 11110	12a.	1	1,096,400.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			•	1,030,1001
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	37,067.		
е	Add lines 2a through 2d			2e	37,067.
3	Subtract line 2e from line 1			3	1,059,333.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	27,460.		
b	Other (Describe in Part XIII.)	4b			27 460
С 5	Add lines 4a and 4b Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)			4c	27,460. 1,086,793.
Part				5 rn	1,000,793.
гагі	Complete if the organization answered "Yes" to Form 990, Part IV				
1	Total expenses and losses per audited financial statements	,		1	766,126.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				· · · · · · · · · · · · · · · · · · ·
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	37 , 067.		
е	Add lines 2a through 2d			2e	37,067.
3	Subtract line 2e from line 1			3	729,059.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	_	27.460		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	27,460.		
b c	Other (Describe in Part XIII.) Add lines 4a and 4b	4b		40	27,460.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			4c 5	756,519.
Part				<u> </u>	73073131
Provid	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; F	Part I	/, lines 1b and 2b; Pa	ırt V, li	ne 4; Part X, line
2; Par	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to p	rovide	any additional inforn	nation.	
SEE	PAGE 5				

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Part XIII Supplemental Information (continued)

RECONCILIATION ITEMS

PART XI, LINE 2D, PART XII, LINE 2D

DIRECT FUNDRAISING EXPENSES IN THE AMOUNT OF \$37,067 ARE INCLUDED IN THE STATEMENT OF FUNCTIONAL EXPENSES ON THE AUDITED FINANCIAL STATEMENTS. IN ACCORDANCE WITH THE INSTRUCTIONS FOR FORM 990, PART VIII, LINE 8B, THESE EXPENSES ARE REPORTED AS A REDUCTION OF GROSS REVENUE FROM FUNDRAISING EVENTS ON LINE 8B.

ASC 740 FOOTNOTE

FORM 990, SCHEDULE D, PART X, LINE 2

THE ORGANIZATION HAS ADOPTED THE FINANCIAL ACCOUNTING STANDARDS BOARD

("FASB") ISSUED CODIFICATION TOPIC 740, ON ACCOUNTING FOR UNCERTAINTY IN

INCOME TAXES, WHICH ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS

CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN

THE FINANCIAL STATEMENTS. UNDER THIS GUIDANCE, THE ORGANIZATION MAY

RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IS MORE

LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY

TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. THE

TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION

ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50%

LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. THE GUIDANCE ON

ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ALSO ADDRESSES DERECOGNITION,

CLASSIFICATION, INTEREST AND PENALTIES ON INCOME TAXES, AND ACCOUNTING IN

INTERIM PERIODS.

MANAGEMENT EVALUATED THE ORGANIZATION'S TAX POSITIONS AND CONCLUDED THAT
THE ORGANIZATION HAVE TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE

Schedule D (Form 990) 2013

Part XIII Supplemental Information (continued)

ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE. GENERALLY THE ORGANIZATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY U.S. FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE 2010, WHICH IS THE STANDARD STATUTE OF LIMITATIONS LOOK-BACK PERIOD.

SCHEDULE G

(Form 990 or 990-EZ) Department of the Treasury

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Inspection Internal Revenue Service Name of the organization Employer identification number WESTCHESTER CHILDREN'S ASSOCIATION, INC 13-1740066 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. 1 Mail solicitations Solicitation of non-government grants а Internet and email solicitations f Solicitation of government grants Phone solicitations Special fundraising events C g In-person solicitations d Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (iv) Gross receipts (or retained by) custody or control of (or retained by) (ii) Activity or entity (fundraiser) from activity fundraiser listed in organization contributions? col. (i) Yes No 1 2 3 6 8 9 10 Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990 or 990-EZ) 2013

Schedule G (Form 990 or 990-EZ) 2013

Part II	Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more
	than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with
	gross receipts greater than \$5,000.

		gross receipts greater than \$5,00	00.			
			(a) Event #1 SPRING ADVOCACY	(b) Event #2 FALL ADVOCACY	(c) Other events 2.	(d) Total events (add col. (a) through
_			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts	88,110.	8,725.		96,835
ш	2	Less: Contributions	69,696.	8,725.		78,421
		Gross income (line 1 minus				
		line 2)	18,414.			18,414
	4	Cash prizes				
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs		1,240.		1,240
ot Exp	7	Food and beverages	21,537.			21,537
Dire	8	Entertainment				
	9	Other direct expenses	13,030.	1,260.		14,290
	10	Direct expense summary. Add lines 4	through 9 in column (d)	•	37,067
	11		0 from line 3, column (d)		-18,653
Pa	rt I	Gaming. Complete if the orga	anization answered "Y			rted more
		than \$15,000 on Form 990-E	:Z, IINe 6a.			
nue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue				
ses		Cash prizes				
Expen	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses				
		Volunteer labor	Yes%	Yes% No	Yes% No	
	7	Direct expense summary. Add lines 2	2 through 5 in column (d))	>	
	8	Net gaming income summary. Subtra	act line 7 from line 1, col	umn (d)		
	ı İs	nter the state(s) in which the organizate the organization licensed to operate of "No," explain:		of these states?		. Yes No
		ere any of the organization's gaming l	icenses revoked, suspe			Yes No

Sched	fule G (Form 990 or 990-EZ) 2013 Page 3
11	Does the organization operate gaming activities with nonmembers?
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming?
13	Indicate the percentage of gaming activity operated in:
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name ▶
	Address ▶
15 a	Does the organization have a contract with a third party from whom the organization receives gaming
	revenue?
b	
С	amount of gaming revenue retained by the third party ► \$ If "Yes," enter name and address of the third party:
C	in res, enter hame and address of the tillid party.
	Name ►
	Address ►
16	Gaming manager information:
	Name ▶
	Gaming manager compensation ▶ \$
	Description of services provided ▶
	Director/officer Independent contractor
17	Mandatory distributions:
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations
	or spent in the organization's own exempt activities during the tax year \$
Par	Supplemental Information. Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Schedule G (Form 990 or 990-EZ) 2013

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2013
Open to Public Inspection

OMB No. 1545-0047

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Name of the organization

Employer identification number

WESTCHESTER CHILDREN'S ASSOCIATION, INC 13-1740066

PT VI, LINE 11A

PROCESS FOR REVIEW OF FORM 990

BASED ON THE AUDITED FINANCIAL STATEMENTS, AN INITIAL DRAFT IS PREPARED BY AN INDEPENDENT ACCOUNTANT; THE DRAFT IS THEN REVIEWED BY THE EXECUTIVE DIRECTOR AND THE FINANCE COMMITTEE, CHANGES ARE DISCUSSED WITH THE ACCOUNTANT AND AGREED UPON ITEMS THAT CHANGE THE FORM 990; THE SECOND DRAFT IS THEN REVIEWED BY THE FINANCE COMMITTEE. UPON ACCEPTANCE AND APPROVAL, THE FORM 990 IS REVIEWED BY THE EXECUTIVE COMMITTEE AND SIGNED BY THE PRESIDENT. FORM 990 IS THEN SHARED WITH ALL THE BOARD MEMBERS, WHO HAVE UP TO 5 BUSINESS DAYS TO COMMENT OR QUESTION THE RETURN. IF THERE ARE NO MATERIAL SUGGESTIONS OR CHANGES, THE FORM 990 IS THEN FILED WITH THE INTERNAL REVENUE SERVICE.

PT VI, LINE 12C

COMPLIANCE WITH THE POLICY

EACH BOARD MEMBER COMPLETES A CONFLICT OF INTEREST DISCLOSURE FORM ONCE
EACH CALENDAR YEAR. THESE FORMS ARE REVIEWED BY THE EXECUTIVE COMMITTEE
AND FURTHER INFORMATION IS SOUGHT IF WARRANTED. FORMS ARE KEPT ON FILE
IN THE WESTCHESTER CHILDREN'S ASSOCIATION, INC. OFFICE.

PT VI, LINE 15

PROCESS FOR DETERMINING COMPENSATION

COMPENSATION FOR THE EXECUTIVE DIRECTOR IS DETERMINED BY THE BOARD OF DIRECTORS. COMPENSATION FOR ALL THE OTHER EMPLOYEES IS DETERMINED BY THE

BOARD OF DIRECTORS AT THE SUGGESTION OF THE EXECUTIVE DIRECTOR. ALL COMPENSATION IS APPROVED AS PART OF THE ANNUAL BUDGET WITH THE APPROVAL OF THE BOARD OF DIRECTORS. COMPENSATION LEVELS ARE REVIEWED PERIODICALLY THROUGH COMPARISON WITH PUBLISHED SURVEYS OF NON-PROFIT ORGANIZATIONS, REVIEW OF FORM 990 FROM COMPARABLE NON-PROFIT ADVOCACY ORGANIZATIONS AND WITH INFORMATION SOLICITED INDIVIDUALLY FROM COMPARABLE ORGANIZATIONS.

PT VI, LINE 19

ALL DOCUMENTS AND STATEMENTS ARE AVAILABLE UPON REQUEST.

AVAILABILITY IS PUBLICIZED IN THE WESTCHESTER CHILDREN'S ASSOCIATION,

INC. ANNUAL REPORT, WEBSITE, AND OTHER PUBLICATIONS.

PT XII, LINE 2C

OVERSIGHT COMMITTEE

THE ORGANIZATION HAS AN OVERSIGHT COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSITE OF THE AUDIT AND OTHER FINANCIAL FUNCTIONS.

PT VI, LINE 2C

PT VI, LINE 2C

ONE BOARD MEMBER IS THE FINANCIAL ADVISOR OF ANOTHER BOARD MEMBER.

PT VI, SCE B, LINE 14

DOCUMENT RETENTION AND DESTRUCTION POLICY

WESTCHESTER CHILDREN'S ASSOCIATION, INC. HAS PREPARED THE POLICY.

HOWEVER, THE POLICY IS NOT APPROVED BY THE BOARD YET.

Schedule O (Form 990 or 990-EZ) 2013				Page 2
Name of the organization			Employer identification	number
WESTCHESTER CHILDREN'S ASSOCIATION,	INC		13-1740066	
			ATTACHMENT 1	
FORM 990, PART VIII - INVESTMENT INCO	<u> </u>			
	(7)	(D)	(0)	(5)
	(A)	(B)	(C)	(D)
DEGGETON	TOTAL	RELATED OR	UNRELATED	EXCLUDED
DESCRIPTION	REVENUE	EXEMPT REVENUE	BUSINESS REV.	REVENUE
INTEREST AND DIVIDENDS	58,77	6.		58,776.
TOTALS	58,77	6.	_	58,776.
			_	
			ATTACHMENT 2	
FORM 990, PART VIII - EXCLUDED CONTR	IBUTIONS			
DEGGDIDETON	AMOUNT			
DESCRIPTION	AMOUNT			
SPRING ADVOCACY	69,696.			
SIKING ADVOCACI	07,070.			
FALL ADVOCACY	8,725.			
	.,			
TOTAL	78,421.			
			ATTACHMENT 3	
FORM 990, PART VIII - FUNDRAISING EV	ENTS			
	GROSS	DIRECT	1	NET
DESCRIPTION	INCOME	EXPENSE		INCOME
<u> </u>	11100112			
SPRING ADVOCACY	18,4	14.	4,567.	-16,153.
FALL ADVOCACY			2,500.	-2,500.
TOTALS	18,4	143	7,067.	-18,653.
		7.0		
		<u>A'.</u>	TTACHMENT 4	

Schedule O (Form 990 or 990-EZ) 2013

Name of the organization Employer identification number WESTCHESTER CHILDREN'S ASSOCIATION, INC 13-1740066 ATTACHMENT 4 (CONT'D) FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES **ENDING** BOOK VALUE DESCRIPTION PREPAID INSURANCE 9,321. PREPAID SPRING F/R DEPOSIT 8,631. TOTALS 17,952. ATTACHMENT 5 FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES COST ENDING DESCRIPTION BOOK VALUE OR FMV MUTUAL FUNDS FMV TOTALS

WESTCHESTER CHILDREN'S ASSOCIATION, INC 2013

Description of Property

DEPRECIATION

A d d dt	Date placed in	Unadjusted Cost	Bus.	179 exp. reduction	Basis	Basis for	Beginning Accumulated	Ending Accumulated depreciation	Me-		ACRS	MA CRS	Current-year 179	Current-year
Asset description	service	or basis	%	in basis	Reduction	depreciation				Conv. Life		class	expense	depreciation
EQUIPMENT	01/01/1991	3,000.	100.000			3,000.	3,000.	3,000.	DDB	7.000				
EQUIPMENT	06/01/1992	1,887.	100.000			1,887.	1,887.	1,887.	DDB	7.000				
COPIER	01/01/1993		100.000			1,695.	1,695.	1,695.	DDB	5.000				
EQUIPMENT	01/01/1993	, , , , , , , , , , , , , , , , , , ,	100.000			3,378.	3,378.	3,378.	DDB	7.000				
COMPUTER	01/01/1993	4,300.	100.000			4,300.	4,300.	4,300.	DDB	5.000				
PURCHASES	01/01/1993		100.000			3,317.	3,317.	3,317.		5.000				
COMPUTER GATEWAY	01/01/1995	, , , , , , , , , , , , , , , , , , ,	100.000			3,413.	3,413.	3,413.	DDB	5.000				
COMPUTER	01/31/1999	6,991.	100.000			6,991.	6,991.	6,991.	DDB	5.000				
PHONE SYSTEM	06/01/1999		100.000			3,930.	3,930.	3,930.	DDB	7.000				
FURNITURE	07/05/2000	2,898.	100.000			2,898.	2,898.	2,898.	DDB	7.000				
FURNTIURE	03/28/2001	1,198.	100.000			1,198.	1,198.	1,198.	DDB	7.000				
EQUIPMENT	03/01/2003	1,213.	100.000			1,213.	1,213.	1,213.	DDB	7.000				
COMPUTER	03/01/2005	2,768.	100.000			2,768.	2,768.	2,768.	DDB	5.000				
EQUIPMENT	06/01/2006	3,101.	100.000			3,101.	2,963.	3,101.	DDB	7.000				138.
COMPUTER SOFTWARE	01/01/2007	1,332.	100.000			1,332.	1,332.	1,332.	DDB	5.000				
EQUIPMENT	01/01/2008	2,785.	100.000			2,785.	2,625.	2,785.	DDB	5.000				160.
FURNITURE	07/01/2010	5,882.	100.000			5,882.	3,310.	4,045.	DDB	7.000				735.
OFFICE FURNITURE	07/01/2012	3,885.	100.000			3,885.	555.	1,506.	DDB	7.000				951.
COMPUTER SOFTWARE	07/01/2012	40.	100.000			40.	13.	31.	DDB	3.000				18.
Less: Retired Assets									_					
Subtotals		57,013.				57,013.	50,786.	52,788.						2,002.
Listed Property														
Less: Retired Assets													'	
Subtotals			-						1					
TOTALS		57,013.	-			57,013.	50,786.	52,788.	-					2,002.
AMORTIZATION		37,013.				37,013.	30,780.	32,766.						2,002.
	Date placed in	Cost or					Accumulated	Ending Accumulated						Current-year
Asset description	service	basis	-				amortization	amortization	Code	Life				amortization
			-											
			-											
TOTALS			-											

*Assets Retired JSA 3X9024 1.000

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Instructions for filing WESTCHESTER CHILDREN'S ASSOCIATION, INC NY Form 500 New York 500 - Annual Filing for Charitable Org. for the period ended December 31, 2013

Signature...

The original return should be dated and signed by two officers of organization.

The signed return should be filed on or before June 30, 2014 with...

> NYS Department of Law (Office of the Attorney General) Charities Bureau - Registration Section 120 Broadway New York, New York 10271

A filing fee of \$275. must be submitted with the report payable to the NYS Department of Law.

Form CHAR500

This form used for Article 7-A, EPTL and dual filers (replaces forms CHAR 497, CHAR 010 and CHAR 006)

Annual Filing for Charitable Organizations

New York State Department of Law (Office of the Attorney General)
Charities Bureau - Registration Section
120 Broadway
New York, NY 10271
http://www.charitiesnys.com

2013

Open to Public Inspection

1. General Information						
a. For the fiscal year beginning (m	m/dd/yyyy)	/ 2 0 1 3 and ending (mm/dd/yyyy)				
b. Check if applicable for NYS: Address change Name change	c. Name o	f organization	organization HESTER CHILDREN'S ASSOCIATION, INC			
Initial filing	Initial filing					
Final filing		and street (or P.O. box if mail not delivered to street address)	Room/suite	f. Telephone number		
Amended filing		MAMARONECK AVENUE own, state or country and zip + 4	304	(914) 946-7676 g. Email		
NY registration pending	•	E PLAINS, NY, 10605		g. Linaii		
	WILLI	E FLAINS, NI, 10005				
2. Certification - Two Signatu	res Require	ed				
correct and complete in accordan	ce with the	reviewed this report, including all attachments, and to laws of the State of New York applicable to this report.	the best of ou	r knowledge and belief, they are true,		
a. President or Authorized Officer	•	Signature Printed Name		Title Date		
b. Chief Financial Officer or Treas		g				
S. G.M.G. F. M. G.M. G. M. G.G.		Signature Printed Name		Title Date		
3. Annual Report Exemption	Information	1				
Check Lift total contributions from NY State (including residents, foundations, corporations, government agencies, etc.) did not exceed \$25,000 and the organization did not engage a professional fund raiser (PFR) or fund raising counsel (FRC) to solicit contributions during this fiscal year. NOTE: An organization may claim this exemption if no PFR or FRC was used and either: 1) it received an allocation from a federated fund, United Way or incorporated community appeal and contributions from other sources did not exceed \$25,000 or 2) it received all or substantially all of its contributions from one government agency to which it submitted an annual report similar to that required by Article 7-A. b. EPTL annual report exemption (EPTL registrants and dual registrants) Check If gross receipts did not exceed \$25,000 and assets (market value) did not exceed \$25,000 at any time during this fiscal year. For EPTL or Article-7A registrants claiming the annual report exemption under the one law under which they are registered and for dual registrants claiming the annual report exemptions under both laws, simply complete part 1 (General Information), part 2 (Certification) and part 3 (Annual Report Exemption Information) above. Do not submit a fee, do not complete the following schedules and do not submit any attachments to this form.						
4. Article 7-A Schedules						
If you did not check the Article 7-A annual report exemption above, complete the following for this fiscal year: a. Did the organization use a professional fund raiser, fund raising counsel or commercial co-venturer for fund raising activity in NY State? **If "Yes", complete Schedule 4a. **D. Did the organization receive government contributions (grants)? **If "Yes", complete Schedule 4b.						
5. Fee Submitted: See last page	e for summa	ry of fee requirements.				
Indicate the filing fee(s) you are a. Article 7-A filing fee b. EPTL filing fee c. Total fee	submitting a	Sundang with this form:	al fee, payab	e check or money order for the le to "NYS Department of Law"		
6. Attachments - For organizat	ions that are	e not claiming annual report exemptions under both la	ws, see last pa	ge for required attachments \Rightarrow 🔷		

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Schedule 4b: Government Contributions (Grants)

If you checked the box in question **4.b.** on page 1, complete the following schedule for **each** government contribution (grant). Use additional copies of this page if necessary to list each government contribution (grant) separately.

Government Agency Name	Grant Amount
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
Total Government Contributions (Grants)	\$

5. Fee Instructions

The filing fee depends on the organization's Registration Type. For details on Registration Type and filing fees, see the Instructions for Form CHAR500.

Organization's Registration Type Article 7-A Calculate the Article 7-A filling fee using the table in part a below. The EPTL filling fee is \$0. EPTL Calculate the EPTL filling fee using the table in part b below. The Article 7-A filling fee is \$0. Calculate both the Article 7-A and EPTL filling fees using the tables in parts a and b below. Add the Article 7-A and EPTL filling fees together to calculate the total fee. Submit a single check or money order for the total fee.

a) Article 7-A filing fee

Total Support & Revenue	Article 7-A Fee
more than \$250,000	\$25
up to \$250,000 *	\$10

^{*} Any organization that contracted with or used the services of a professional fund raiser (PFR) or fund raising counsel (FRC) during the reporting period must pay an Article 7-A filing fee of \$25, regardless of total support and revenue.

b) EPTL filing fee

Net Worth at End of Year	EPTL Fee
Less than \$50,000	\$25
\$50,000 or more, but less than \$250,000	\$50
4050.000	****
\$250,000 or more, but less than \$1,000,000	\$100
#4 000 000 but less the # #40 000 000	6050
\$1,000,000 or more, but less than \$10,000,000	\$250
\$10,000,000 or more but lose than \$50,000,000	6750
\$10,000,000 or more, but less than \$50,000,000	\$750
\$50,000,000 or more	\$1500
\$50,000,000 or more	\$1500

6. Attachments - Document Attachment Check-List

Check the boxes for the documents you are attaching.

For All Filers		
Filing Fee X Single check or money order payable	to "NYS Department of Law"	
Copies of Internal Revenue Service Forms		
X IRS Form 990 X All required schedules (including Schedule B) IRS Form 990-T	IRS Form 990-EZ All required schedules (including Schedule B) IRS Form 990-T	IRS Form 990-PF All required schedules (including Schedule B) IRS Form 990-T

Additional Article 7-A Document Attachment Requirement		
Independent Accountant's Report		
Audit Report (total support & revenue more than \$250,000) Review Report (total support & revenue \$100,001 to \$250,000) No Accountant's Report Required (total support & revenue not more than \$100,000)		

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