

IRS e-file Signature Authorization
for an Exempt Organization

OMB No. 1545-0048

For calendar year 2019, or fiscal year beginning JUL 1, 2019, and ending JUN 30, 2020

2019

Department of the Treasury
Internal Revenue Service

Do not send to the IRS. Keep for your records.

Go to www.irs.gov/Form8879EO for the latest information.

Name of exempt organization

Employer identification number

PORT CHESTER CARVER CENTER, INC.

13-1832949

Name and title of officer

ROBERT S. KOST, TREASURER

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	3,080,609.
2a Form 990-EZ check here <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here <input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2019 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgment of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

☒ I authorize CONDON O'NEARA MCGINTY & DONNELLY LLP to enter my PIN 12345

ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature  Date 3/23/2021

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

13601807777

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2019 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature  Date 3/18/2021

ERO Must Retain This Form - See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

LHA For Paperwork Reduction Act Notice, see Instructions.

Form 8879-EO (2019)

923051 10-03-13

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2019 calendar year, or tax year beginning JUL 1, 2019 and ending JUN 30, 2020

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization PORT CHESTER CARVER CENTER, INC.		D Employer identification number 13-1832949
	Doing business as		E Telephone number (914) 305-6010
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	400 WESTCHESTER AVENUE		
	City or town, state or province, country, and ZIP or foreign postal code PORT CHESTER, NY 10573		G Gross receipts \$ 3,677,524.
F Name and address of principal officer: ROBERT S. KOST SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: WWW.CARVERCENTER.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1949	M State of legal domicile: NY

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO BUILD BRIGHTER FUTURES BY SERVING, EDUCATING, AND EMPOWERING FAMILIES IN OUR COMMUNITY.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	25
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	25
	5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	180
	6 Total number of volunteers (estimate if necessary)	6	100
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b Net unrelated business taxable income from Form 990-T, line 39	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	2,328,501.	2,265,308.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	663,967.	458,520.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	216,263.	75,679.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	298,992.	281,102.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,507,723.	3,080,609.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	2,779,831.	1,957,193.
	16b Total fundraising expenses (Part IX, column (D), line 25) ▶ 271,410.	20,000.	10,000.
Expenses	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,579,133.	1,078,458.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,378,964.	3,045,651.
	19 Revenue less expenses. Subtract line 18 from line 12	-871,241.	34,958.
	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
Net Assets or Fund Balances	21 Total liabilities (Part X, line 26)	5,746,555.	5,770,556.
	22 Net assets or fund balances. Subtract line 21 from line 20	793,652.	945,391.
		4,952,903.	4,825,165.

Part II Signature Block

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

Sign Here	Signature of officer	Date
	ROBERT S. KOST, TREASURER	3/23/2021
Paid	Print/Type preparer's name	Preparer's signature
	JAMES J. REILLY	James Reilly
Preparer Use Only	Firm's name	Firm's EIN
	CONDON O'NEARA MCGINTY & DONNELLY LLP	13-3628255
	Firm's address	PTIN
	ONE PARKWAY PLAZA NEW YORK, NY 10006	000183769
		Phone no. 212-661-7777

May the IRS discuss this return with the preparer (see instructions) ☒ Yes ☐ No

Part III Statement of Program Service Accomplishments

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

☒ X

- 1 Briefly describe the organization's mission:

SEE SCHEDULE O

- 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
- ☐
- Yes
- ☒
- No

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?
- ☐
- Yes
- ☒
- No

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 \$ 903,378. including grants of \$) (Revenue \$ 121,509.)

CHILD & ADULT PROGRAMS

CARVER CENTER CHILDREN'S PROGRAMS FOCUS ON THE NEEDS OF CHILDREN FROM PRE-SCHOOL THROUGH HIGH SCHOOL. IN COLLABORATION WITH FIVE STEPS TO FIVE, WE WORK WITH PARENTS TO ADDRESS KEY DEVELOPMENT MILESTONES FOR CHILDREN UNDER THE AGE OF FIVE. THE AFTERSCHOOL PROGRAM PROVIDES CARE FOR NEARLY 350 CHILDREN DAILY, PROVIDING ENRICHMENT, ACADEMIC SUPPORT, FITNESS, AND RECREATION. THE SUMMER PROGRAMMING PROVIDES RECREATIONAL AND EDUCATIONAL ENRICHMENT. THE SIX-WEEK FULL-DAY PROGRAMMING SERVES 160 CHILDREN. OTHER CHILDREN'S PROGRAMS INCLUDE MUSIC LESSONS, CARVER'S BOY SCOUT GROUP (TROOP 400), AND A FULL ARRAY OF AQUATICS AND WATER SAFETY OFFERINGS.

4b (Code:) (Expenses \$ 399,190. including grants of \$) (Revenue \$ 158,306.)

SEE SCHEDULE O

4c (Code:) (Expenses \$ 121,260. including grants of \$) (Revenue \$ 50,940.)

TEEN PROGRAMS

THE VISION BEHIND CARVER'S TEEN CENTER PROGRAMS FOR MORE THAN 150 MIDDLE AND HIGH SCHOOL STUDENTS IS TO CULTIVATE THE NEXT GENERATION OF SELF-DIRECTED LEARNERS WHO ENJOY GUIDED EXPLORATION FUELED BY THEIR IMAGINATION AND HEIGHTENED ENGAGEMENT. TEEN PROGRAMMING PROVIDES ACADEMIC SUPPORT, SOCIAL-EMOTIONAL DEVELOPMENT, RECREATIONAL ACTIVITIES, A STATE-OF-THE-ART MUSIC STUDIO, AND ART OPPORTUNITIES.

- 4d Other program services (Describe on Schedule O.)

(Expenses \$ 356. including grants of \$) (Revenue \$ 245,274.)

- 4e Total program service expenses \$ 2,359,849

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Form 990 (2019)

Part IV 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	<input checked="" type="checkbox"/>	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	<input checked="" type="checkbox"/>	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		<input checked="" type="checkbox"/>
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		<input checked="" type="checkbox"/>
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, Part III		<input checked="" type="checkbox"/>
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors 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		<input checked="" type="checkbox"/>
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		<input checked="" type="checkbox"/>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		<input checked="" type="checkbox"/>
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		<input checked="" type="checkbox"/>
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	<input checked="" type="checkbox"/>	
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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	<input checked="" type="checkbox"/>	
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		<input checked="" type="checkbox"/>
c 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		<input checked="" type="checkbox"/>
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		<input checked="" type="checkbox"/>
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	<input checked="" type="checkbox"/>	
f 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		<input checked="" type="checkbox"/>
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	<input checked="" type="checkbox"/>	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		<input checked="" type="checkbox"/>
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		<input checked="" type="checkbox"/>
14a Did the organization maintain an office, employees, or agents outside of the United States?		<input checked="" type="checkbox"/>
b 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		<input checked="" type="checkbox"/>
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		<input checked="" type="checkbox"/>
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		<input checked="" type="checkbox"/>
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I		<input checked="" type="checkbox"/>
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	<input checked="" type="checkbox"/>	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		<input checked="" type="checkbox"/>
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		<input checked="" type="checkbox"/>
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 3? If "Yes," complete Schedule I, Parts I and II		<input checked="" type="checkbox"/>

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
24a 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 through 24d and complete Schedule K. If "No," go to line 25a		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
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 I		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
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):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV		X
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		X
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
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		X
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		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
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		X
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		X
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	X	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
b Enter the number of Forms 990-B included in line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and withholdable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

	Yes	No
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 180		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		
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)?		X
b If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7 Organizations that may receive deductible contributions under section 170(c).		
a 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?	X	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d If "Yes," indicate the number of Forms 8282 filed during the year		
7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9 Sponsoring organizations maintaining donor advised funds.		
a Did the sponsoring organization make any taxable distributions under section 4966?		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on Part VIII, line 12	10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11 Section 501(c)(12) organizations. Enter:		
a Gross income from members or shareholders	11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a 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	13b	
c Enter the amount of reserves on hand	13c	
14a 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 on Schedule O	14b	
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15	X
If "Yes," see instructions and file Form 4720, Schedule N.		
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	X
If "Yes," complete Form 4798, Schedule O.		

Taxpayer Copy

Form 990 (2019)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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

X

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 1a 25		
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 on Schedule O.		
b Enter the number of voting members included on line 1a, above, who are independent 1b 25		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5		X
6 Did the organization have members or stockholders? 6		X
7a Did the organization have members, stockholders, or other persons who had the power to elect 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 by) members, stockholders, or persons other than the governing body? 7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body? 8a	X	
b Each committee with authority to act on behalf of the governing body? 8b	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O 9		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Did the organization have local chapters, branches, or affiliates? 10a		X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a	X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c	X	
13 Did the organization have a written whistleblower policy? 13	X	
14 Did the organization have a written document retention and destruction policy? 14	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official 15a	X	
b Other officers or key employees of the organization 15b	X	
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 similar arrangement with a taxable entity during the year? 16a		X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its 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		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ NY

18 Section 5104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶
 ANNE BRADNER, CHIEF EXECUTIVE OFFICER (410) 335-7070
 400 WESTCHESTER AVENUE PORT CHESTER, NY 12073

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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.
- See instructions for the order in which to list the persons above.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CLAIRE DIESEN STEINBERG PRESIDENT	3.00	X		X				0.	0.	0.
(2) JIM HOWLAND VICE PRESIDENT	3.00	X		X				0.	0.	0.
(3) BRIAN STERN VICE PRESIDENT	3.00	X		X				0.	0.	0.
(4) MICHAEL S. FLYNN SECRETARY	3.00	X		X				0.	0.	0.
(5) ROBERT S. KOST TREASURER	3.00	X		X				0.	0.	0.
(6) SHAKER KHAYATT BOARD MEMBER	3.00	X						0.	0.	0.
(7) ROBERT KAPLAN, ESQ. BOARD MEMBER	3.00	X						0.	0.	0.
(8) DONNA M. C. JARECKI BOARD MEMBER	3.00	X						0.	0.	0.
(9) ERICA FRITSCH BOARD MEMBER	3.00	X						0.	0.	0.
(10) MAIDA ROBINSON BOARD MEMBER	3.00	X						0.	0.	0.
(11) CHRISTOPHER PYE BOARD MEMBER	3.00	X						0.	0.	0.
(12) JENNIFER PRATHER BOARD MEMBER	3.00	X						0.	0.	0.
(13) SAMUEL ORTIZ BOARD MEMBER	3.00	X						0.	0.	0.
(14) AMY FISCH BOARD MEMBER	3.00	X						0.	0.	0.
(15) CECILIA MITCHELL BOARD MEMBER	3.00	X						0.	0.	0.
(16) DEREK E. MAHONEY BOARD MEMBER	3.00	X						0.	0.	0.
(17) RICHARD LAWRENCE BOARD MEMBER	3.00	X						0.	0.	0.

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) BRENDAN GOODHOUSE BOARD MEMBER	3.00	X						0.	0.	0.
(19) JOHN I. CONDON BOARD MEMBER	3.00	X						0.	0.	0.
(20) STEPHANIE BARRETT BOARD MEMBER	3.00	X						0.	0.	0.
(21) SONIA ALCANTARILLA BOARD MEMBER	3.00	X						0.	0.	0.
(22) JUDY DIAZ BOARD MEMBER	3.00	X						0.	0.	0.
(23) BETTY BROWN BOARD MEMBER	3.00	X						0.	0.	0.
(24) JASON KOWLOMITZ BOARD MEMBER	3.00	X						0.	0.	0.
(25) YVETTE M. HAMMEL BOARD MEMBER	3.00	X						0.	0.	0.
(26) ANNE BRADNER CEO	40.00			X				142,645.	0.	0.
1b Subtotal								142,645.	0.	0.
c Total from continuation sheets to Part VII, Section A								211,361.	0.	0.
d Total (add lines 1b and 1c)								354,006.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **3**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

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
NONE		

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

SEE PART VII, SECTION A FOR CONTINUATION SHEETS

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Part VII

Total to Part VII, Section A, line 1c

9

Part VIII Statement of RevenueCheck if Schedule Q contains a response or note to any line in this Part VIII ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a			
	b	Membership dues	1b			
	c	Fundraising events	1c	41,030.		
	d	Related organizations	1d			
	e	Government grants (contributions)	1e	203,033.		
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	2,021,245.		
	g	Noncash contributions included in lines 1a-1f	1g	\$ 19,703.		
	h	Total. Add lines 1a-1f		2,265,308.		
Program Service Revenue	2 a		Business Code			
	PROGRAM FEES		900099	300,214.	300,214.	
	b		FOOD SERVICE	900099	158,306.	158,306.
	c					
	d					
	e					
	f		All other program service revenue			
g	Total. Add lines 2a-2f		458,520.			
Other Revenue	3		Investment income (including dividends, interest, and other similar amounts)	53,755.		53,755.
	4		Income from investment of tax-exempt bond proceeds			
	5		Royalties			
	6 a	Gross rents	(i) Real	(ii) Personal		
			6a	167,604.		
			6b	0.		
	c	Rental income or (loss)	6c	167,604.		
	d	Net rental income or (loss)		167,604.		167,604.
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		
			7a	610,828.		
			7b	588,904.		
	c	Gain or (loss)	7c	21,924.		
	d	Net gain or (loss)		21,924.		21,924.
	8 a	Gross income from fundraising events (not including \$ 41,030. of contributions reported on line 1c). See Part IV, line 18	8a	0.		
			8b	8,011.		
c			Net income or (loss) from fundraising events		-8,011.	
9 a	Gross income from gaming activities. See Part IV, line 19	9a				
		9b				
		c	Net income or (loss) from gaming activities			
10 a	Gross sales of inventory, less returns and allowances	10a				
		10b				
		c	Net income or (loss) from sales of inventory			
Miscellaneous Revenue	11 a		Business Code			
	OTHER		900099	121,509.	121,509.	
	b					
	c					
	d		All other revenue			
e	Total. Add lines 11a-11d		121,509.			
12	Total revenue. See instructions			3,080,609.	300,099.	0.

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 response or note to any line in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	147,000.	127,312.	6,701.	12,987.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,594,213.	1,358,538.	71,502.	164,173.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	12,263.	10,621.	559.	1,083.
9 Other employee benefits	64,751.	56,079.	2,952.	5,720.
10 Payroll taxes	138,966.	120,355.	6,334.	12,277.
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	141,832.	134,740.	7,092.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	10,000.			10,000.
f Investment management fees	14,744.		14,744.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	11,620.	11,039.	581.	
12 Advertising and promotion	2,695.	2,440.	128.	127.
13 Office expenses	116,530.	93,792.	4,941.	17,797.
14 Information technology				
15 Royalties				
16 Occupancy	267,022.	253,443.	13,339.	240.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	434.	53.	3.	378.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	193,641.	167,402.	8,811.	17,428.
23 Insurance	126,275.	119,934.	6,312.	29.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PROGRAM EXPENSES	139,586.	132,436.	6,970.	180.
b BAD DEBT EXPENSE	28,743.		28,743.	
c DONATED SUPPLIES	19,703.		6,345.	13,358.
d FUNDRAISING EXPENSES	15,633.			15,633.
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	3,045,651.	2,588,184.	186,057.	271,410.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs for a combined educational campaign and fundraising solicitation.				

Check here ☐ if following SOP 8-2 (GFC 15-7-20)

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	177,718.	1	930,098.
	2 Savings and temporary cash investments	120,710.	2	34,366.
	3 Pledges and grants receivable, net	123,006.	3	61,066.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	52,935.	9	20,297.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 6,046,008.		
	b Less: accumulated depreciation	10b 2,832,674.		
		3,354,964.	10c	3,213,334.
	11 Investments - publicly traded securities	1,917,221.	11	1,511,395.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11		15		
16 Total assets. Add lines 1 through 15 (must equal line 33)	5,746,555.	16	5,770,556.	
Liabilities	17 Accounts payable and accrued expenses	314,901.	17	115,081.
	18 Grants payable		18	
	19 Deferred revenue	111,418.	19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	17,333.	23	10,610.
	24 Unsecured notes and loans payable to unrelated third parties	350,000.	24	350,000.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	0.	25	469,700.
	26 Total liabilities. Add lines 17 through 25	793,652.	26	945,391.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	2,865,443.	27	3,121,504.
	28 Net assets with donor restrictions	2,087,460.	28	1,703,661.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	4,952,903.	32	4,825,165.
	33 Total liabilities and net assets/fund balances	5,746,555.	33	5,770,556.

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Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,080,609.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,045,651.
3	Revenue less expenses. Subtract line 2 from line 1	3	34,958.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,952,903.
5	Net unrealized gains (losses) on investments	5	-162,696.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	4,825,165.

Part XII Financial Statements and ReportingCheck 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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.		

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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,919,853.	3,136,481.	3,027,425.	2,328,501.	2,265,308.	13,677,568.
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	2,919,853.	3,136,481.	3,027,425.	2,328,501.	2,265,308.	13,677,568.
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)						4,037,712.
6 Public support. Subtract line 5 from line 4.						9,639,856.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4	2,919,853.	3,136,481.	3,027,425.	2,328,501.	2,265,308.	13,677,568.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	347,624.	274,694.	247,837.	285,593.	221,359.	1,377,107.
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 VI.)	36,906.	46,993.	97,786.	96,942.	121,509.	400,136.
11 Total support. Add lines 7 through 10						15,454,811.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	62.37	%
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	57.60	%
16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>			
b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>			
17a 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>			
b 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>			
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>			

Schedule A (Form 990 or 990-EZ) 2019

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

(Complete only if you checked the box on line 10 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
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						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b 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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7b from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
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 VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2019.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests - 2018.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check any box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.		
b Did the organization have any excess business holdings in the tax year? If "Yes," complete Schedule C, Form 990, to determine whether the organization had excess business holdings.		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
11a		
b A family member of a person described in (a) above?		
11b		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
3		

Section E. Type III Functionally Integrated Supporting Organizations

	Yes	No
1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
2a		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
2b		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.		
3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the way in which the organization exercised that direction.		
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2019

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

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Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

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Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

- ▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Name of the organization

PORT CHESTER CARVER CENTER, INC.

Employer identification number

13-1832949

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and III. See instructions for determining a contributor's total contributions.

Special Rules

- ☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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Name of organization

Employer identification number

PORT CHESTER CARVER CENTER, INC.

13-1832949

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	R.J. AND D.A. MUNZER FOUNDATION [REDACTED] [REDACTED]	\$ 60,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	THE DALIO FOUNDATION [REDACTED] [REDACTED]	\$ 350,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	WAYNE LEMLEY [REDACTED] [REDACTED]	\$ 100,678.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	TUDOR FOUNDATION [REDACTED] [REDACTED]	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	JOAN TOEPFER TRUST [REDACTED] [REDACTED] [REDACTED]	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Name of organization

Employer identification number

PORT CHESTER CARVER CENTER, INC.

13-1832945

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

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Name of organization PORT CHESTER CARVER CENTER, INC.	Employer identification number 13-1832949
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

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SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**▶ Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019
Open to Public
Inspection

Name of the organization

PORT CHESTER CARVER CENTER, INC.

Employer identification number

13-1832949

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 5.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply): <input type="checkbox"/> Preservation of land for public use (for example, recreation or education) <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of open space <input type="checkbox"/> Preservation of a historically important land area <input type="checkbox"/> Preservation of a certified historic structure	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.	
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/08, and not on a historic structure listed in the National Register	2d
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶	
4 Number of states where property subject to conservation easement is located ▶	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶	
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$	
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.	
b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:	
(i) Revenue included on Form 990, Part VIII, line 1	▶ \$
(ii) Assets included in Form 990, Part X	▶ \$
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:	
a Revenue included on Form 990, Part VIII, line 1	▶ \$
b Assets included in Form 990, Part X	▶ \$

LHA For Paperwork Reduction Act Notice see the instructions for Form 990.

Schedule D (Form 990) 2019

932051 10-02-19

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations

- d ☐ Loan or exchange program
 e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? _____

☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? _____

☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

c Beginning balance _____

d Additions during the year _____

e Distributions during the year _____

f Ending balance _____

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? _____

☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII _____

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	2,087,460.	2,680,843.	2,704,688.	2,265,566.	2,229,049.
b Contributions	157,962.	987,470.	1,541,260.	1,886,330.	1,837,139.
c Net investment earnings, gains, and losses	-101,761.	130,152.	226,401.	183,479.	151,868.
d Grants or scholarships					
e Other expenditures for facilities and programs	-440,000.	1,711,005.	1,791,506.	1,630,687.	1,952,490.
f Administrative expenses					
g End of year balance	2,583,661.	2,087,460.	2,680,843.	2,704,688.	2,265,566.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶ _____ %

b Permanent endowment ▶ 67.26 %

c Term endowment ▶ 32.74 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) Unrelated organizations _____

(ii) Related organizations _____

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" on line 3a(i), are the related organizations listed as required on Schedule R? _____

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		705,000.	470,939.	234,061.
c Leasehold improvements		4,879,099.	1,937,348.	2,941,751.
d Equipment		461,909.	424,387.	37,522.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				3,213,334.

Schedule D (Form 990) 2019

Taxpayer Copy

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on 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) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) TERM NOTE-PPP	469,700.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ☐

Schedule D (Form 990) 2019

Taxpayer Copy

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	2,911,180.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-162,696.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	8,011.
e	Add lines 2a through 2d	2e	-154,685.
3	Subtract line 2e from line 1	3	3,065,865.
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	14,744.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	14,744.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	3,080,609.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	3,038,918.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	8,011.
e	Add lines 2a through 2d	2e	8,011.
3	Subtract line 2e from line 1	3	3,030,907.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VII, line 7b	4a	14,744.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	14,744.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	3,045,651.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4:

THE CENTER CLASSIFIES AS PERMANENT RESTRICTED NET ASSETS THE ORIGINAL

VALUE OF GIFTS DONATED TO THE PERMANENT ENDOWMENT. THE PORTION OF THE

DONOR-RESTRICTED ENDOWMENT FUND THAT IS NOT CLASSIFIED AS PERMANENTLY

RESTRICTED NET ASSETS IS CLASSIFIED AS UNRESTRICTED AND TEMPORARILY

RESTRICTED NET ASSETS BASED ON DONOR STIPULATIONS. PERMANENTLY RESTRICTED

NET ASSETS AS OF JUNE 30, 2020 ARE RESTRICTED TO INVESTMENTS IN

PERPETUITY, WITH INVESTMENT RETURN ON THE PROGRAM ENDOWMENT FUND TO

SUPPORT PROGRAMS OF THE CENTER AT THE DIRECTION OF THE EXECUTIVE DIRECTOR

AND THE BOARD OF DIRECTORS, INCLUDING THE BOARD'S PROGRAM COMMITTEE.

INVESTMENT RETURN ON THE BALANCE OF \$654,000 IN THE ENDOWMENT FUND IS TO

BE USED TO SUPPORT ANY ACTIVITIES OF THE CENTER.

Part XIII Supplemental Information *(continued)*

PROGRAM ENDOWMENT FUND: \$750,000.

ENDOWMENT FUND: \$654,000.

TOTAL: \$1,404,000.

TEMPORARILY RESTRICTED NET ASSETS: THESE NET ASSETS CONTAIN DONOR-IMPOSED

STIPULATIONS THAT WILL BE MET BY ACTIONS OF THE CENTER OR THE PASSAGE OF

TIME. THE ACTIVITY IN THE TEMPORARILY RESTRICTED NET ASSETS IS REFLECTED

ON PAGE 4 OF THESE FINANCIAL STATEMENTS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

GROSS-UP OF FUNDRAISING EVENT 8,011.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

FUNDRAISING EXPENSES 8,011.

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Schedule D (Form 990) 2019

CASE No. 1545-DCJ3

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

PORT CHESTER CARVER CENTER, INC.

Employer identification number

13-1832949

Part I

Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

- 2 a** 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 ☐ No
- b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

[illegible]

Total

- 3 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.

Part II Fundraising Events. Complete if the organization answered "Yes" on 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.

	(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))
	STUDENT DANCE (event type)	(event type)	(total number)	
Revenue				
1 Gross receipts	41,030.			41,030.
2 Less: Contributions	41,030.			41,030.
3 Gross income (line 1 minus line 2)				
Direct Expenses				
4 Cash prizes				
5 Noncash prizes				
6 Rent/facility costs				
7 Food and beverages				
8 Entertainment				
9 Other direct expenses	8,011.			8,011.
10 Direct expense summary. Add lines 4 through 9 in column (d)				8,011.
11 Net income summary. Subtract line 10 from line 3, column (d)				-8,011.

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

	(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				
Direct Expenses				
2 Cash prizes				
3 Noncash prizes				
4 Rent/facility costs				
5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d)				
8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

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- 11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 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? ☐ Yes ☐ No
- 13 Indicate the percentage of gaming activity conducted in:
- | | | |
|-------------------------------|-----|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |

- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

- 16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer

☐ Employee

☐ Independent contractor

- 17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

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 ▶ \$ _____

Part IV **Supplemental information.** Provide the explanations required by Part I, line 2b, columns (ii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

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Part IV Supplemental Information *(continued)*

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Schedule G (Form 990 or 990-EZ)

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Open to Public
Inspection

Name of the organization

PORT CHESTER CARVER CENTER, INC.

Employer identification number

13-1832949

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

PORT CHESTER CARVER CENTER'S MISSION IS TO "BUILD BRIGHTER FUTURES BY
SERVING, EDUCATING, AND EMPOWERING FAMILIES IN OUR COMMUNITY." CARVER
CENTER ADDRESSES ACCESS TO EDUCATION AND EMPLOYMENT THROUGH ITS AFTER
SCHOOL PROGRAM AND TEEN CENTER. CARVER CENTER ADDRESSES ISSUES RELATED
TO POVERTY AND FOOD INSECURITY THROUGH THE CARVER MARKET, A MODEL FOOD
PANTRY, MONTHLY SENIOR BREAKFAST, AND A HOT MEAL PROGRAM FOR CHILDREN.
WITH APPROXIMATELY 45% OF PORT CHESTER RESIDENTS BORN OUTSIDE OF THE
U.S., CARVER ADDRESSES ISSUES OF ACCULTURATION THROUGH ITS CITIZENSHIP
PROGRAM AND ENGLISH CLASSES ACCESSIBLE TO ENGLISH LANGUAGE LEARNERS
(ELL). THE ORGANIZATION EMBRACES UNDERSTANDING AND SENSITIVITY FOR
CULTURAL DIVERSITY CONCERNING LANGUAGE AND VALUE DIFFERENCES. CARVER
CENTER DOES NOT DISCRIMINATE BASED ON RACE, GENDER, NATIONALITY, AGE,
ETHNICITY, RELIGION OR SEXUALITY.

FORM 990, PART III, LINE 4B

FOOD SERVICE PROGRAM

THE FOOD SERVICE PROGRAM PROVIDES DAILY HOT MEALS TO CARVER CENTER'S
AFTER SCHOOL PROGRAM, TEEN PROGRAM, AND VARIOUS PRE-KINDERGARTEN
PROGRAMS THROUGHOUT WESTCHESTER COUNTY. CARVER'S FOOD SERVICE PROGRAM,
AN INITIATIVE THAT IS FUNDED THROUGH THE NEW YORK STATE DEPARTMENT OF
EDUCATION'S CHILD AND ADULT CARE FOOD PROGRAM (CACFP), SERVES
APPROXIMATELY 1,200 NUTRITIOUS MEALS PER DAY. A GROCERY STORE-STYLE
FOOD PANTRY SERVES 300 FAMILIES MONTHLY AND PROVIDES DELIVERY TO 20

HOMEBOUND SENIOR CITIZENS EACH MONTH. MONTHLY BREAKFAST FOR 90 SENIOR

LHA For Paperwork Reduction Act Notice: See the instructions for Form 990 or 990-EZ.

530211 09-05-19

Schedule O (Form 990 or 990-EZ) (2019)

Taxpayer Copy

Name of the organization

PORT CHESTER CARVER CENTER, INC.

Employer identification number

13-1832949

CITIZENS PROVIDED SOCIALIZATION OPPORTUNITIES AS WELL AS EDUCATIONAL PROGRAMMING GEARED TO THE NEEDS OF SENIORS. FOLLOWING THE ONSET OF COVID-19, THE CARVER MARKET BEGAN SERVING APPROXIMATELY 1,500 FAMILIES PER MONTH WITH PRE-PACKAGED EMERGENCY FOOD ASSISTANCE.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

MIDDLE SCHOOL: CARVER CENTER PROVIDES A SUPPORTIVE AND NURTURING AFTER SCHOOL ENVIRONMENT FOR 150 DAYS DURING THE SCHOOL YEAR. DAILY MEALS, RECREATION, AND ENRICHMENT ACTIVITIES HELP SUPPORT OUR MIDDLE SCHOOLERS TO TRANSITION FROM BEING SCHOOL-AGED CHILDREN TO FUTURE TEENS.

TEEN CENTER: OUR TEENS FORM LASTING RELATIONSHIPS IN OUR TEEN CENTER, AS THEY ARE ASSISTED IN THE NAVIGATION OF LIFE'S CHALLENGES. DAILY MEALS, RECREATIONAL OUTLETS AND SOCIAL ACTIVITIES ARE PART OF THE DRAW AND ONCE WITH US, OUR TEENS TAKE FULL ADVANTAGE OF OUR TECHNOLOGY LAB, MUSIC STUDIO, AND GYMNASIUM IN SUPPORT OF BUILDING HEALTHY MINDS AND BODIES.

CARVER SCHOLARS: PERSONAL AND ACADEMIC SUPPORTS THAT TRANSLATE INTO SUCCESS IN HIGH SCHOOL AND BEYOND ARE THE CORNERSTONES OF THE SCHOLARS' PROGRAM. MOTIVATED TEENS RECEIVE ONE-ON-ONE COACHING, PARTICIPATE IN SPECIALIZED WORKSHOPS, EXPERIENCE LEADERSHIP DEVELOPMENT SESSIONS AND ARE EXPOSED TO POWERFUL ENRICHMENT OPPORTUNITIES, SUCH AS OUR WELL-KNOWN COLLEGE TOURS.

INNOVATION LAB: THE ROBERT KAPLAN AND DERRA STOKES KAPLAN TECHNOLOGY

LEARNING & INNOVATION CENTER IS ONE OF CARVER'S SEVERAL AND MOST POPULAR

Name of the organization

PORT CHESTER CARVER CENTER, INC.

Employer identification number

13-1832949

ASSETS FOR THE TWEEN AND TEEN POPULATION. YOUNG PEOPLE ENJOY

EXPERIMENTING WITH 3-D PRINTER TECHNOLOGY, FILMING PERSONAL AND SCHOOL

PROJECTS USING OUR GREEN-SCREEN, AND TINKERING WITH A VARIETY OF MEDIA

TO INNOVATE AND SOLVE EVERY-DAY PROBLEMS.

EXPENSES \$ 1,164,356. INCLUDING GRANTS OF \$ 0. REVENUE \$ 249,274.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS PROVIDED TO THE ENTIRE GOVERNING BODY VIA EMAIL PRIOR TO

FILING WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, SECTION B, LINE 12C:

EVERY BOARD MEMBER AND SENIOR STAFF MEMBER IS REQUIRED TO COMPLETE AND SIGN

CARVER CENTER'S CONFLICT OF INTEREST POLICY. IF THERE ARE ANY DISCREPANCIES

ON THE FORM, IT IS TO BE REVIEWED BY THE BOARD OFFICERS TO SEE IF ACTION

NEEDS TO BE TAKEN.

FORM 990, PART VI, SECTION B, LINE 15:

PROCEDURES FOR REVIEW ARE OUTLINED IN THE BY-LAWS:

1. PERFORMANCE REVIEW BY ALL, MEMBERS OF THE EXECUTIVE COMMITTEE.

2. REVIEW OF DIRECTORS PERSONAL ACCOMPLISHMENTS.

3. REVIEW COMPARABILITY DATA FROM OTHER SIMILAR NON-PROFITS.

FORM 990, PART VI, SECTION C, LINE 19:

THE CENTER MAKES ITS AUDITED FINANCIAL STATEMENTS AND GOVERNING DOCUMENTS

AVAILABLE TO THE PUBLIC.

Taxpayer Copy

TAX RETURN FILING INSTRUCTIONS

NEW YORK FORM CHAR500

FOR THE YEAR ENDING

JUNE 30, 2020

PREPARED FOR:

PORT CHESTER CARVER CENTER, INC.
400 WESTCHESTER AVENUE
PORT CHESTER, NY 10573

PREPARED BY:

CONDON O'MEARA MCGINTY & DONNELLY LLP
ONE BATTERY PARK PLAZA
NEW YORK, NY 10004

AMOUNT OF TAX:

BALANCE DUE OF \$275

MAKE CHECK PAYABLE TO:

DEPARTMENT OF LAW

MAIL TAX RETURN TO:

NYS OFFICE OF ATTORNEY GENERAL
CHARITIES BUREAU REGISTRATION SECTION
28 LIBERTY STREET
NEW YORK, NY 10005

RETURN MUST BE MAILED ON OR BEFORE:

PLEASE MAIL AS SOON AS POSSIBLE.

SPECIAL INSTRUCTIONS:

THE REPORT SHOULD BE SIGNED AND DATED BY AN AUTHORIZED
INDIVIDUAL(S).

THE ATTACHED COPY OF THE FEDERAL FORM 990 MUST BE PROPERLY SIGNED
AND DATED.

Taxpayer Copy

CHAR500

NYS Annual Filing for Charitable Organizations
www.CharitiesNYS.com

Send with fee and attachments to:
NYS Office of the Attorney General
Charities Bureau Registration Section
28 Liberty Street
New York, NY 10005

2019
**Open to Public
Inspection**

1. General Information

For Fiscal Year Beginning (mm/dd/yyyy) **07/01/2019** and Ending (mm/dd/yyyy) **06/30/2020**

Check if Applicable: <input type="checkbox"/> Address Change <input type="checkbox"/> Name Change <input type="checkbox"/> Initial Filing <input type="checkbox"/> Final Filing <input type="checkbox"/> Amended Filing <input type="checkbox"/> Reg ID Pending	Name of Organization: PORT CHESTER CARVER CENTER, INC.	Employer Identification Number (EIN): 13-1832949
	Mailing Address: 400 WESTCHESTER AVENUE	NY Registration Number: 01-30-60
	City / State / ZIP: PORT CHESTER, NY 10573	Telephone: 914 305-6018
	Website: WWW.CARVERCENTER.ORG	Email: ABRADNER@CARVERCENTER.ORG

Check your organization's registration category: ☐ 7A only ☐ EPTL only ☒ DUAL (7A & EPTL) ☐ EXEMPT* Confirm your Registration Category in the Charities Registry at www.CharitiesNYS.com.

2. Certification

See instructions for certification requirements. Improper certification is a violation of law that may be subject to penalties. The certification requires two signatories.

We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report.

President or Authorized Officer:

Signature

Print Name and Title


Date

Chief Financial Officer or Treasurer:

Signature

Print Name and Title

Date


ROBERT S. KOST, TREAS. **3/23/2021**

3. Annual Reporting Exemption

Check the exemption(s) that apply to your filing. If your organization is claiming an exemption under one category (7A or EPTL only filers) or both categories (DUAL filers) that apply to your registration, complete only parts 1, 2, and 3, and submit the certified Char500. No fee, schedules, or additional attachments are required. If you cannot claim an exemption or are a DUAL filer that claims only one exemption, you must file applicable schedules and attachments and pay applicable fees.

☐ **3a. 7A filing exemption:** Total contributions from NY State including residents, foundations, 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 the fiscal year.

☐ **3b. EPTL filing exemption:** Gross receipts did not exceed \$25,000 and the market value of assets did not exceed \$25,000 at any time during the fiscal year.

4. Schedules and Attachments

See the following page for a checklist of schedules and attachments to complete your filing.

☒ Yes ☐ No **4a. Did your 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.**

☒ Yes ☐ No **4b. Did the organization receive government grants? If yes, complete Schedule 4b.**

5. Fee

See the checklist on the next page to calculate your fee(s). Indicate fee(s) you are submitting here:	7A filing fee:	EPTL filing fee:	Total fee:	Make a single check or money order payable to: "Department of Law"
	\$ 25.	\$ 250.	\$ 275.	

CHAR500 Annual Filing for Charitable Organizations (Updated January 2020)

*The "Exempt" category refers to an organization on NYS registration status. It does not refer to its IRS tax designation.

09/451 01-08-20 1019

11360317 152490 7847BZ

2019.05070 PORT CHESTER CARVER CENTE 7847BZ_1

CHAR500

Annual Filing Checklist

Simply submit the certified CHAR500 with no fee, schedule, or additional attachments IF:

- Your organization is registered as 7A only and you marked the 7A filing exemption in Part 3.
- Your organization is registered as EPTL only and you marked the EPTL filing exemption in Part 3.
- Your organization is registered as DUAL and you marked both the 7A and EPTL filing exemption in Part 3.

Checklist of Schedules and Attachments

Check the schedules you must submit with your CHAR500 as described in Part 4:

- ☒ If you answered "yes" in Part 4a, submit Schedule 4a: Professional Fund Raisers (PFR), Fund Raising Counsel (FRC), Commercial Co-Venturers (CCV)
- ☒ If you answered "yes" in Part 4b, submit Schedule 4b: Government Grants

Check the financial attachments you must submit with your CHAR500:

- ☒ IRS Form 990, 990-EZ, or 990-PF, and 990-T if applicable
- ☒ All additional IRS Form 990 Schedules, including Schedule B (Schedule of Contributors). Schedule B of public charities is exempt from disclosure and will not be available for public review.
- ☐ Our organization was eligible for and filed an IRS 990-N e-postcard. Our revenue exceeded \$25,000 and/or our assets exceeded \$25,000 in the filing year. We have included an IRS Form 990-EZ for state purposes only.

If you are a 7A only or DUAL filer, submit the applicable independent Certified Public Accountant's Review or Audit Report:

- ☐ Review Report if you received total revenue and support greater than \$250,000 and up to \$750,000.
- ☒ Audit Report if you received total revenue and support greater than \$750,000
- ☐ No Review Report or Audit Report is required because total revenue and support is less than \$250,000
- ☐ We are a DUAL filer and checked box 3a, no Review Report or Audit Report is required

Calculate Your Fee

For 7A and DUAL filers, calculate the 7A fee:

- ☐ \$0, if you checked the 7A exemption in Part 3a
- ☒ \$25, if you did not check the 7A exemption in Part 3a

For EPTL and DUAL filers, calculate the EPTL fee:

- ☐ \$0, if you checked the EPTL exemption in Part 3b
- ☐ \$25, if the NET WORTH is less than \$50,000
- ☐ \$50, if the NET WORTH is \$50,000 or more but less than \$250,000
- ☐ \$100, if the NET WORTH is \$250,000 or more but less than \$1,000,000
- ☒ \$250, if the NET WORTH is \$1,000,000 or more but less than \$10,000,000
- ☐ \$750, if the NET WORTH is \$10,000,000 or more but less than \$50,000,000
- ☐ \$1500, if the NET WORTH is \$50,000,000 or more

Send Your Filing

Send your CHAR500, all schedules and attachments, and total fee to:

NYS Office of the Attorney General
Charities Bureau Registration Section
28 Liberty Street
New York, NY 10005

Need Assistance?

Visit: www.CharitiesNYS.com

Call: (212) 416-8401

Email: Charities.Bureau@ag.ny.gov

Is my Registration Category 7A, EPTL, DUAL or EXEMPT?

Organizations are assigned a Registration Category upon registration with the NY Charities Bureau:

7A filers are registered to solicit contributions in New York under Article 7-A of the Executive Law ("7A")

EPTL filers are registered under the Estates, Powers & Trusts Law ("EPTL") because they hold assets and/or conduct activities for charitable purposes in NY.

DUAL filers are registered under both 7A and EPTL.

EXEMPT filers have registered with the NY Charities Bureau and meet conditions in Schedule E - Registration Exemption for Charitable Organizations. These organizations are not required to file annual financial reports but may do so voluntarily.

Confirm your Registration Category and learn more about NY law at www.CharitiesNYS.com.

Where do I find my organization's NET WORTH?

NET WORTH for fee purposes is calculated on:

- IRS Form 990 Part I, line 22
- IRS Form 990 EZ Part I, line 21
- IRS Form 990 PF, calculate the difference between Total Assets at Fair Market Value (Part II, line 16(c)) and Total Liabilities (Part II, line 23(b)).

Taxpayer Copy

CHAR500

Schedule 4a: Professional Fund Raisers, Fund Raising Counsels, Commercial Co-Venturers
www.CharitiesNYS.com

2019

Open to Public
Inspection

If you checked the box in question 4a in Part 4 on the CHAR500 Annual Filing for Charitable Organizations, complete this schedule for EACH Professional Fund Raiser (PFR), Fund Raising Counsel (FRC) or Commercial Co-Venturer (CCV) that the organization engaged for fund raising activity in NY State. The PFR or FRC should provide its NY Registration Number to you. Include this schedule with your certified CHAR500 NYS Annual Filing for Charitable Organizations and use additional pages if necessary.

Definitions

A **Professional Fund Raiser (PFR)**, in addition to other activities, conducts solicitation of contributions and/or handles the donations (Article 7A, 171-a.4).

A **Fund Raising Counsel (FRC)** does not solicit or handle contributions but limits activities to advising or assisting a charitable organization to perform such functions for itself (Article 7A, 171-a.9).

A **Commercial Co-Venturer (CCV)** is an individual or for-profit company that is regularly and primarily engaged in trade or commerce other than raising funds for a charitable organization and who advertises that the purchase or use of goods, services, entertainment or any other thing of value will benefit a charitable organization (Article 7A, 171-a.6).

Professional fund raising does not include activities by an organization's development staff, volunteers, or a grantwriter who has been hired solely to draft applications for funding from a government agency or tax-exempt organization.

1. Organization Information

Name of Organization:	NY Registration Number:
PORT CHESTER CARVER CENTER, INC.	01-30-60

2. Professional Fund Raiser, Fund Raising Counsel, Commercial Co-Venturer Information

Fund Raising Professional type:	Name of FRP:	NY Registration Number:
<input checked="" type="checkbox"/> Professional Fund Raiser	HOSPITALITY RESOURCE GROUP	
<input type="checkbox"/> Fund Raising Counsel	Mailing Address:	Telephone:
<input type="checkbox"/> Commercial Co-Venturer	237 MAMARONECK AVE #201	914-761-7111
	City / State / ZIP:	
	WHITE PLAINS, NY 10605	

3. Contract Information

Contract Start Date:	Contract End Date:
----------------------	--------------------

4. Description of Services

Services provided by FRP:

PROFESSIONAL EVENT MANAGEMENT AND COORDINATION FOR ANNUAL BENEFIT INCLUDING DATA MANAGEMENT, VENDOR RELATIONS AND DAY-OF EVENT COORDINATION.

5. Description of Compensation

Compensation arrangement with FRP: \$10,000 FLAT FEE.	Amount Paid to FRP: 10,000.
--	--------------------------------

6. Commercial Co-Venturer (CCV) Report

<input type="checkbox"/> Yes <input type="checkbox"/> No If services were provided by a CCV, did the CCV provide the charitable organization with the interim or closing report(s) required by Section 173(a) part 3 of the Executive Law Article 7A?

998471 01-08-20

1019 CHAR500 Schedule 4a: Professional Fund Raisers, Fund Raising Counsels, Commercial Co-Venturers (Updated January 2020)

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Schedule 4b: Government Grants
www.CharitiesNYS.com

2019

Open to Public
Inspection

If you checked the box in question 4b in Part 4, complete this schedule and list EACH government grant award by a domestic (federal, state or local) agency, interstate or intergovernmental agency (for example Port Authority of New York and New Jersey); and state or local authorities.

Use additional pages if necessary. Include this schedule with your certified CHAR500 NYS Annual Filing for Charitable Organizations.

1. Organization Information

Name of Organization:	NY Registration Number:
PORT CHESTER CARVER CENTER, INC.	01-30-60

2. Government Grants

Name of Government Agency	Amount of Grant
1. NYS - CACFP	1. 181,783.
2. PORT CHESTER UNION FREE SCHOOL DISTRICT	2. 11,250.
3. US TREASURY - SBA APPLICATION GRANT	3. 10,000.
4.	4.
5.	5.
6.	6.
7.	7.
8.	8.
9.	9.
10.	10.
11.	11.
12.	12.
13.	13.
14.	14.
15.	15.
Total Government Grants:	Total: 203,033.

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PORT CHESTER CARVER CENTER, INC.

**Financial Statements
for the year ended
June 30, 2020
(with Summarized Comparative
Information for the Year Ended
June 30, 2019)**

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Independent Auditor's Report

To the Board of Directors
Port Chester Carver Center, Inc.

We have audited the accompanying financial statements of Port Chester Carver Center, Inc. which comprise the statement of financial position as of June 30, 2020 and the related statements of activities, functional expenses and cash flows for the year then ended and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement. An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

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Opinion

In our opinion, the financial statements referred to in the first paragraph on the previous page present fairly, in all material respects, the financial position of Port Chester Carver Center, Inc. as of June 30, 2020 and the results of its activities and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Summarized Comparative Information

We have previously audited Port Chester Carver Center, Inc.'s 2019 financial statements, and our report dated October 17, 2019, expressed an unmodified opinion on those financial statements. In our opinion, the summarized comparative information presented herein as of and for the year ended June 30, 2019, is consistent, in all material respects, with the audited financial statements from which it has been derived.

Condon O'Meara Mc Ginty & Donnelly LLP

February 9, 2021

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PORT CHESTER CARVER CENTER, INC.

Statement of Financial Position

Assets

	June 30	
	2020	2019
Current assets		
Cash	\$ 930,098	\$ 177,718
Investments, at fair value	141,761	633,931
Pledges and accounts receivable	61,066	123,006
Prepaid expenses and other	<u>20,297</u>	<u>52,936</u>
Total current assets	1,153,222	987,591
Property and equipment, net	3,213,334	3,354,964
Investments – permanently restricted	<u>1,404,000</u>	<u>1,404,000</u>
Total assets	<u>\$5,770,556</u>	<u>\$5,746,555</u>

Liabilities and Net Assets

Current liabilities		
Line of credit	\$ 350,000	\$ 350,000
Accounts payable accrued expenses and other	115,081	314,901
Deferred revenue	-	111,418
Current maturities of loan payable	<u>7,000</u>	<u>6,723</u>
Total current liabilities	472,081	783,042
Long-term liabilities		
Term note – PPP	469,700	-
Loan payable, net of current maturities	<u>3,610</u>	<u>10,610</u>
Total liabilities	<u>945,391</u>	<u>793,652</u>
Net assets		
Without donor restrictions	3,121,504	2,865,443
With donor restrictions	<u>1,703,661</u>	<u>2,087,460</u>
Total net assets	<u>4,825,165</u>	<u>4,952,903</u>
Total liabilities and net assets	<u>\$5,770,556</u>	<u>\$5,746,555</u>

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See notes to financial statements.

PORT CHESTER CARVER CENTER, INC.

Statement of Activities
For the year ended June 30, 2020
(with Summarized Comparative Information for the Year Ended June 30, 2019)

	2020			2019
	Without Donor Restrictions	With Donor Restrictions	Total	Total
Support and revenue				
Contributions	\$ 1,812,980	\$ 157,962	\$ 1,970,942	\$ 1,582,345
Fundraising events	41,030	-	41,030	415,177
Government grants	203,633	-	203,633	364,338
Program fees	300,214	-	300,214	337,633
Food service	158,306	-	158,306	326,334
Net investment return (loss)	-	(101,761)	(101,761)	130,152
Rental	167,604	-	167,604	216,548
Donated supplies	19,703	-	19,703	31,579
Other	121,509	-	121,509	96,942
Net assets released from restrictions	<u>440,000</u>	<u>(440,000)</u>	<u>-</u>	<u>-</u>
Total support and revenue	<u>3,244,979</u>	<u>(276,139)</u>	<u>2,911,180</u>	<u>3,501,048</u>
Expenses				
Program services	2,588,184	-	2,588,184	3,803,388
Supporting activities				
Management and general	171,312	-	171,312	329,508
Fundraising	<u>279,422</u>	<u>-</u>	<u>279,422</u>	<u>308,140</u>
Total expenses	<u>3,038,918</u>	<u>-</u>	<u>3,038,918</u>	<u>4,441,036</u>
Increase (decrease) in net assets	256,061	(383,799)	(127,738)	(939,988)
Net assets, beginning of year	<u>2,865,443</u>	<u>2,087,460</u>	<u>4,952,903</u>	<u>5,892,891</u>
Net assets, end of year	<u>\$ 3,121,504</u>	<u>\$ 1,703,661</u>	<u>\$ 4,825,165</u>	<u>\$ 4,952,903</u>

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See notes to financial statements.

PORT CHESTER CARVER CENTER, INC.

**Statement of Functional Expenses
Year Ended June 30, 2020
(with Summarized Comparative Information for the
Year Ended June 30, 2019)**

Expenses	<u>2020</u>				<u>2019</u>
	<u>Program Services</u>	<u>Supporting Activities</u>		<u>Total</u>	<u>Total</u>
		<u>Management and General</u>	<u>Fundraising</u>		
Salaries, benefits and taxes	\$1,657,173	\$ 87,219	\$ 169,041	\$1,913,433	\$2,714,083
Consultants and contract labor	15,732	828	27,200	43,760	65,748
Occupancy, building and grounds	253,443	13,339	240	267,022	276,368
Professional fees	145,779	7,673	-	153,452	287,195
Conference, meeting and seminars	53	3	378	434	2,847
Supplies	83,327	4,390	17,289	105,006	137,196
Program expense					
Food	119,638	6,297	117	126,052	259,503
Field trips	7,286	383	-	7,669	19,248
Staff development	2,609	137	35	2,781	8,801
Transportation	97	5	28	130	53,052
Community activities	2,806	148	-	2,954	8,380
Fundraising events	-	-	33,644	33,644	99,436
Advertising	2,440	128	127	2,695	17,922
Insurance	119,934	6,312	29	126,275	100,751
Donated supplies	-	6,345	13,358	19,703	31,579
Bank service charges	10,465	551	508	11,524	22,225
Bad debt expense	-	28,743	-	28,743	129,329
Total expenses before depreciation	2,420,782	162,501	261,994	2,845,277	4,233,663
Depreciation	167,402	8,811	17,428	193,641	207,373
Total	<u>\$2,588,184</u>	<u>\$ 171,312</u>	<u>\$ 279,422</u>	<u>\$3,038,918</u>	<u>\$4,441,036</u>

See notes to financial statements.

PORT CHESTER CARVER CENTER, INC.

Statement of Cash Flows

	Year Ended	
	June 30	
	<u>2020</u>	<u>2019</u>
Cash flows from operating activities		
(Decrease) in net assets	\$ (127,738)	\$ (939,988)
Adjustments to reconcile (decrease) in net assets to net cash (used in) operating activities		
Depreciation	193,641	207,373
Net realized and unrealized (gain) loss on investments	140,772	(78,471)
Decrease in pledges and accounts receivable	61,940	184,301
(Increase) decrease in prepaid expenses and other	32,639	(8,986)
Increase (decrease) in accounts payable, accrued expenses, and other	(199,820)	36,426
(Decrease) in deferred revenue	<u>(111,418)</u>	<u>(24,577)</u>
Net cash (used in) operating activities	<u>(9,984)</u>	<u>(623,922)</u>
Cash flows from investing activities		
Proceeds from sale of investments	610,828	600,238
Purchases of investments	(259,430)	(120,730)
Acquisition of property and equipment	<u>(52,011)</u>	<u>(78,972)</u>
Net cash provided by investing activities	<u>299,387</u>	<u>400,536</u>
Cash flows from financing activities		
Proceeds from line of credit	-	653,000
Repayment of line of credit	-	(303,000)
Proceeds from term note - PPP	469,700	-
Repayment of loan payable	<u>(6,723)</u>	<u>(6,457)</u>
Net cash provided by financing activities	<u>462,977</u>	<u>343,543</u>
Net increase in cash	752,380	120,157
Cash, beginning of year	<u>177,718</u>	<u>57,561</u>
Cash, end of year	<u>\$ 930,098</u>	<u>\$ 177,718</u>
Supplemental disclosure of cash flows information:		
Cash paid for interest	<u>\$ 23,746</u>	<u>\$ 15,585</u>

See notes to financial statements.

PORT CHESTER CARVER CENTER, INC.**Notes to Financial Statements
June 30, 2020****Note 1 – Nature of organization**

Port Chester Carver Center, Inc. (the "Center") was incorporated in 1949 to provide education programs and services which help children and youth maximize their potential for growth and self-sufficiency as well as to build support and resources for families and individuals in need. The Center has become a full community center; serving children, youth and their families by offering various education, head start/day care, sports and employment training programs.

Note 2 – Significant accounting policies**Net assets**

The Center maintains its net assets in two categories as follows:

Without donor restrictions

Net assets that are not subject to donor-imposed restrictions and are available for the general operations of the Center.

With donor restrictions**With temporary donor restrictions**

Net assets subject to donor-imposed restrictions that will be met either by actions of the Center or the passage for time. Items that affect this net asset category are gifts for which donor-imposed restrictions have not been met in the year of receipt. Restrictions that have been met on net assets with donor restrictions are reported as net assets released from restrictions.

With permanent donor restrictions

In this category are net assets subject to donor-imposed restrictions to be maintained perpetuity by the Center, including gifts and pledges wherein donors stipulate that the corpus of the gift be held in perpetuity from which the revenue is to be used for the donor stipulated purpose.

Contributions

Contributions received are recorded as net assets without donor restrictions or net assets with donor restrictions, depending on the existence of any donor-imposed restrictions. When a donor restriction expires, that is when a stipulated time restriction ends or purpose restriction is accomplished, net assets with temporary donor restrictions are reclassified to net assets without donor restrictions and reported in the statement of activities as net assets released from restrictions.

PORT CHESTER CARVER CENTER, INC.**Notes to Financial Statements (continued)****June 30, 2020****Note 2 – Significant accounting policies (continued)****Tax status**

The Center is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code (the "Code"). In addition, the Center has been classified by the Internal Revenue Service as an organization, which is not a private foundation within the meaning of Section 509(a)(1) of the Code. The Center qualifies for the maximum charitable contribution deduction by donors.

Use of estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Cash equivalents

The Center considers all highly liquid investments with original maturities of ninety days or less at the date of acquisition, to be cash equivalents, unless such assets are held as part of its investment strategy, in which case these assets are included in investments.

Concentrations of credit risk

The Center's financial instruments that are potentially exposed to concentrations of credit risk consist of cash, cash equivalents, investments and receivables. The Center places its cash and cash equivalents with what it believes to be quality financial institutions. At times during the year, cash balances exceeded the FDIC insurance limit, however, the Center has not experienced any losses to date in such accounts. The Center's investments are exposed to various risks such as interest rate, market volatility, liquidity and credit. Due to the level of uncertainty related to the foregoing risks, it is reasonably possible that changes in these risks could materially affect the fair value of the investments reported in the statement of financial position at June 30, 2020. The Center routinely assesses the financial strength of its cash, cash equivalents and investment portfolio. Management of the Center monitors the collectibility of its receivables. As a consequence, concentrations of credit risk are limited.

Investments

The Center accounts for its investments in accordance with accounting principles generally accepted in the United States of America. Accordingly, investments in marketable securities with readily determinable fair values and all investments in debt securities are reported at their fair values in the statement of financial position. Realized and unrealized gains and losses are included in the statement of activities.

PORT CHESTER CARVER CENTER, INC.**Notes to Financial Statements (continued)****June 30, 2020****Note 2 – Significant accounting policies (continued)****Fair value measurements**

Fair value refers to the price that would be received to sell an asset in an orderly transaction between market participants at the measurement date. The fair value hierarchy gives the highest priority to quoted prices in active markets (Level 1) and the lowest priority to unobservable data (Level 3). Fair value measurements are required to be separately disclosed by level within the fair value hierarchy. At June 30, 2020, all of the Center's investments are deemed to be Level 1; their fair values are measured using quoted prices in active markets that the Center can access at the measurement date.

Allowance for doubtful accounts

As of June 30, 2020, the Center deems its pledges and accounts receivable to be collectible and therefore, does not believe an allowance for doubtful accounts for any potentially uncollectible pledges and accounts receivable is necessary. Such estimate is based on management's experience, the aging of the receivables, subsequent receipts and current economic conditions.

Property and equipment

Property and equipment are recorded at cost. Donations of property and equipment are recorded at fair value on the date of receipt. The Center capitalizes, as property and equipment, expenditures for such assets in excess of a nominal amount with an estimated useful life of greater than one year. Depreciation is computed on the straight-line method over the estimated useful lives of the depreciable assets, which range from 3 to 39 years.

Deferred revenue

Camp fees paid in advance of the statement of financial position date are reported as deferred revenue. Such fees are recognized as revenue when these programs are held during July and August. Due to the COVID-19 pandemic, all summer camps have been deferred until further notice, as a result, there were no fees paid in advance for camp fees as of June 30, 2020.

Functional allocation of expenses

The Center allocates its expenses on a functional basis among its various programs and supporting services. Expenses that can be identified with a specific program or supporting activity are allocated directly to that activity. Other expenses that are common to several functions are allocated among the program and supporting services benefitted based upon management's estimate of time and effort spent.

PORT CHESTER CARVER CENTER, INC.**Notes to Financial Statements (continued)****June 30, 2020****Note 2 – Significant accounting policies (continued)****Volunteer time**

A substantial number of volunteers made significant contributions of their time to the Center's programs. The value of this contributed time is not reflected in these financial statements since it is not susceptible to objective measurements or valuation.

Donated supplies

During the 2020 fiscal year, the Center received donations of clothing, food, toys, and household supplies with an estimated fair value of \$19,703 which are to be used in the Center's programs. These donated supplies were recorded at the estimated fair value of what it would have cost the Center to purchase them independently and have been reflected as support and expenses in the accompanying statements of activities, functional expenses and the notes to the financial statements.

Comparative financial information

The statements of activities and functional expenses in the accompanying financial statements include certain prior-year summarized comparative information, in total but not by net asset class or by functional classification, respectively. Therefore, to compare 2020 to 2019 at the net asset class and functional level, the June 30, 2019 financial statements should be read in conjunction with the 2020 statements of activities, functional expenses and notes to the financial statements.

Risks and uncertainties

On March 13, 2020, President Trump declared a national emergency due to extraordinary circumstances resulting from the coronavirus. As a direct result of this executive order, the facilities and associated operations were closed on March 17, 2020 with limited openings on various dates through June 30, 2020, subject to restrictions set forth by State and Local Government. The extent to which the coronavirus may impact business activity and Center operations will depend on future developments, which are uncertain and cannot be predicted, including new information which may emerge concerning the severity of the coronavirus and the actions required to contain the coronavirus or treat its impact, and related factors. Management believes that the COVID-19 pandemic may have an impact on its financial condition, results of operations and outlook for year ending June 30, 2021.

PORT CHESTER CARVER CENTER, INC.

Notes to Financial Statements (continued) June 30, 2020

Note 2 – Significant accounting policies (continued)

Subsequent events

The Center has evaluated events and transactions for potential recognition or disclosure through February 9, 2021, which is the date the financial statements were available to be issued.

Note 3 – Financial assets and liquidity resources

As of June 30, 2020 and June 30, 2019, financial assets and liquidity resources available within one year for general expenditure, such as operating expenses, were as follows:

	<u>2020</u>	<u>2019</u>
Financial assets		
Cash	\$ 930,098	\$ 177,718
Investments, at fair value	141,761	633,931
Pledges and accounts receivables	<u>61,066</u>	<u>123,006</u>
Sub-total	1,132,925	934,655
Less: Assets with donor restrictions	(299,661)	(683,460)
Add: Appropriation of investment return for subsequent year operations	<u>100,000</u>	<u>130,000</u>
Total	<u>\$ 933,264</u>	<u>\$ 381,195</u>

The Center's assets include donor-restricted funds. As described in Note 10, the Center has an annual spending rate of investment return earned on donor restricted funds of up to a maximum of 7% of the rolling twenty-quarter average fair value of the Center's investment portfolio. An appropriation of \$100,000 from these funds will be available within the next 12 months as of June 30, 2020.

The Center's working capital and cash flows have seasonal variations during the year attributable to the annual cash receipts from contributions and other revenue items. As part of the Center's liquidity management, it has a policy to structure its financial assets to be available as its general expenditures, liabilities and other obligations come due. The Center also has a \$350,000 line of credit (see note 4).

Note 4 – Line of credit

The Center has available a \$350,000 line of credit with a bank which is subject to renewal on February 8, 2024. Borrowings under this line bear interest at the prime rate quoted in the Wall Street Journal plus 1% with a floor of 5.5%. At June 30, 2020 outstanding borrowings under this agreement totaled \$350,000 and the interest rate was 5.5%. The line of credit is secured by a security interest in certain assets as disclosed in the agreement.

PORT CHESTER CARVER CENTER, INC.

Notes to Financial Statements (continued)

June 30, 2020

Note 5 – Investments

The Center's investments, including those classified as net assets with donor restrictions, at June 30, 2020 and June 30, 2019, are as follows:

	<u>2020</u>		<u>2019</u>	
	<u>Cost</u>	<u>Fair Value</u>	<u>Cost</u>	<u>Fair Value</u>
Money market funds	\$ 34,366	\$ 34,366	\$ 120,710	\$ 120,710
Mutual fund - equities	51,165	46,326	73,229	72,945
Real estate investment trusts	37,293	50,916	49,281	81,741
Common stocks	677,792	935,210	741,633	1,148,615
Government and agency obligations	307,326	313,492	359,642	350,961
Corporate bonds	<u>154,210</u>	<u>165,451</u>	<u>247,131</u>	<u>262,959</u>
Totals	<u>\$ 1,262,152</u>	<u>\$ 1,545,761</u>	<u>\$ 1,591,626</u>	<u>\$ 2,037,931</u>

Net investment return consists of the following for the years ended June 30, 2020 and June 30, 2019:

	<u>2020</u>	<u>2019</u>
Interest and dividends	\$ 53,755	\$ 69,045
Realized gain on sales of investments	21,924	147,218
Unrealized (loss) on investments	(162,696)	(68,747)
Investment fees	<u>(14,744)</u>	<u>(17,364)</u>
Net investment return	<u>\$ (101,761)</u>	<u>\$ 130,152</u>

Note 6 – Property and equipment

At June 30, 2020, and June 30, 2019 property and equipment consisted of the following:

	<u>2020</u>	<u>2019</u>
Building	\$ 705,000	\$ 705,000
Building improvements	4,879,099	4,830,449
Furniture and equipment	<u>461,909</u>	<u>458,548</u>
Sub-total	6,046,008	5,993,997
Less: accumulated depreciation	<u>2,832,674</u>	<u>2,639,033</u>
Property and equipment, net	<u>\$ 3,213,334</u>	<u>\$ 3,354,964</u>

PORT CHESTER CARVER CENTER, INC.

Notes to Financial Statements (continued)

June 30, 2020

Note 7 – Loan payable

In December 2016, the Center obtained a \$33,000 loan, for the purpose of purchasing a vehicle. The loan requires 60 monthly installments of \$608, applicable first to interest at a fixed rate of 3.99% per annum and the balance to the reduction of principal through maturity on December 20, 2021 and is secured by the vehicle.

The following is a summary of the required annual principal payments as of June 30, 2020:

<u>Fiscal Year</u>	<u>Amount</u>
2021	\$ 7,000
2022	<u>3,609</u>
Total	10,609
Less: current maturities	<u>7,000</u>
Loan payable, net of current maturities	<u>\$ 3,609</u>

Note 7 – Term note

Paycheck Protection Program

On April 6, 2020, the Center, was approved for and received a \$469,000 term note under the Paycheck Protection Program (the "PPP Loan"). The PPP Loan was created as part of the relief efforts related to COVID-19 and administered by the Small Business Administration. As disclosed in the PPP Loan documents, principal and interest payments are deferred until the terms of the PPP Loan are finalized. During the deferral period, interest on the outstanding principal will accrue at a fixed rate of 1.0%. The Center will be eligible for forgiveness of up to 100% of the PPP Loan, upon meeting certain requirements as disclosed in the PPP Loan documents. Upon the terms being agreed upon and finalized, any remaining balance will be converted to a two-year loan. As a result, the Center will be required to make monthly payments, applicable first to an interest rate of 1.0% and the balance as a reduction of principal. The PPP Loan is uncollateralized and is fully guaranteed by the Federal government.

Note 8 – Rental revenue

The Center leased a portion of its facility to various not-for-profit organizations on a month-to-month basis. Additionally, the Center leased portions of its facility on a temporary basis for specific events. Rental revenue received in connection with these agreements totaled \$167,604 and \$216,548 for the fiscal years ended June 30, 2020 and June 30, 2019, respectively.

PORT CHESTER CARVER CENTER, INC.**Notes to Financial Statements (continued)
June 30, 2020****Note 9 – Retirement plan**

The Center maintains a Simple IRA Retirement Plan (the "Plan") for eligible employees. Employees may defer a portion of their compensation to the Plan subject to the annual limits established by the Internal Revenue Service. The Center makes matching contributions to the Plan as defined in the Plan document. The Center's contributions to the Plan totaled \$12,263 and \$15,916 for the 2020 and 2019 fiscal years, respectively.

Note 10 – Net assets with perpetual donor restrictions

Effective September 17, 2010, the State of New York enacted the New York Prudent Management of Institutional Funds Act (NYPMIFA), the provisions of which apply to endowment funds existing on or established after that date. The Center's endowment consists of various funds established for specific purposes. The Center is required to act prudently when making decisions to spend or accumulate donor restricted endowment assets and in doing so to consider a number of factors including the duration and preservation of its donor restricted endowment funds. The Center classifies as net assets with permanent donor restrictions, the original value of gifts donated to the perpetual endowment. The portion of the donor-restricted endowment fund that is not classified as net assets with permanent restrictions is classified as net assets without donor restrictions or net assets with temporary donor restrictions based on donor stipulations.

Net assets with permanent donor restrictions as of June 30, 2020 are restricted to investments in perpetuity. Investment return on the endowment funds is available to support programs and activities of the Center at the direction of the Executive Director and the Board of Directors, including the Board's Program Committee. The Center's Board of Directors has adopted a policy whereby interest, dividends and net realized and unrealized gains and losses on investments are considered part of the Center's total investment return. The Center's long-term spending rate, designated by the Board, permits the Center to use up to a maximum of 7% of the rolling twenty-quarter average of the total investment portfolio's fair value to support its operations annually. For the 2020 fiscal year, the Board had authorized a withdrawal of up to \$390,000 to support programs and activities. Although this amount is in excess of the Center's spending rate policy, it was determined by the Board, in consultation with legal counsel, that a) certain of the Center's endowment funds were not subject to the 7% presumption of imprudence b) the Center has the ability to expend these funds as the fair value was above historical dollar value and c) that such withdrawal was prudent and necessary to support the operations of the Center.

PORT CHESTER CARVER CENTER, INC.

Notes to Financial Statements (continued)
June 30, 2020Note 10 – Net assets with perpetual donor restrictions (continued)

The following is a summary of the Center's net assets with perpetual donor restrictions as of June 30, 2020:

	<u>Amount</u>
Program Endowment Fund	\$ 750,000
Endowment Fund	<u>654,000</u>
Total	<u>\$ 1,404,000</u>

Net assets with temporary donor restrictions

Changes in net assets with temporary donor restrictions for the year ended June 30, 2020 are as follows:

	<u>Balance at June 30, 2019</u>	<u>Support/Net Investment Return</u>	<u>Released from Restrictions</u>	<u>Balance at June 30, 2020</u>
Carver program	\$ 50,000	\$ 25,000	\$ (50,000)	\$ 25,000
Carver market grants	-	132,962	-	132,962
Net investment income	<u>633,460</u>	<u>(101,761)</u>	<u>(390,000)</u>	<u>141,699</u>
Total	<u>\$ 683,460</u>	<u>\$ 56,201</u>	<u>\$ (440,000)</u>	<u>\$ 299,661</u>

There were no endowment funds with deficiencies as of June 30, 2020.