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Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

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

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

Open to Public Inspection

A F	or the	2013 calendar year, or tax year beginning and	ending		
Вс	heck if	C Name of organization		D Employer identifi	cation number
aį	pplicable	CITY FEDERATION OF WOMEN'S		' '	
X	Address change	ORGANIZATIONS, INC.			
	Name change	Doing Business As		 15_0	547365
	Jinitial	Bonig Eddiness / is	D = === /=t		
<u> </u>	_]return]Termin-	'	Room/suit	1	
<u> </u>	Jated Amende		200	(607)272-1247
	_lreturn	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	6,906
L	Applica tion	11HACA, NI 14030		H(a) Is this a group re	eturn
	pending	F Name and address of principal officer ELIZABETH FALCAO		for subordinates	s? ☐Yes XNo
		SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No
T T	ax-exe	mpt status X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) c	or 52		list (see instructions)
		: ► WWW.WOMENBUILDINGCOMMUNITY.ORG		H(c) Group exemption	
		organization: X Corporation Trust Association Other	I Vea		M State of legal domicile: N
		Summary	L 16a	i or iormation. IJIZI	VI State of legal dofficile. 14
		· · · · · · · · · · · · · · · · · · ·		THE TAXABLE AND	OTDI O AND
စ္ပ		riefly describe the organization's mission or most significant activities TO St			GIRLS AND
Governance	- 3	O ACT AS A CATALYST FOR THE IMPROVEMENT	OF T	HE LIVES OF	WOMEN AND
띭	2 (check this box 🕨 🔛 if the organization discontinued its operations or dispos	sed of mo	re than 25% of its net as	ssets
ŏ.	3 N	lumber of voting members of the governing body (Part VI, line 1a)		3	1:
	4 N	lumber of independent voting members of the governing body (Part VI, line 1b)		4	1:
80		otal number of individuals employed in calendar year 2013 (Part V, line 2a)		5	(
Activities		otal number of volunteers (estimate if necessary)		6	1:
		•			
۱۶		otal unrelated business revenue from Part VIII, column (C), line 12		<u>7a</u>	0
-	b N	et unrelated business taxable income from Form 990 F. FF FIVED	-	7b	0.
			<u> </u>	Prior Year	Current Year
<u>o</u>	8 C	rogram service revenue (Part VIII, line 1h) Representations and grants (Part VIII, line 2g) Representations and grants (Part VIII, line 2g) Representations and grants (Part VIII, line 2g)		220.	0
5	9 P	rogram service revenue (Part VIII, line 2g) AUG 1 9 2014		52,250.	0
Revenue	10 lr	ivestment income (Part VIII, column (A), lines 3, 4, and 7d)		942,342.	6,906
nč		other revenue (Part VIII, column (A), lines 5, 6q, 8c, 9c, @ Per Nie)		0.	0
				994,812.	6,906
		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)			
		frants and similar amounts paid (Part IX, column (A), lines 1-3)	<u> </u>	0.	19,590.
ŀ	14 B	enefits paid to or for members (Part IX, column (A), line 4)	ļ	0.	0.
es	1 5 S	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	_	23,613.	0.
Expenses	16a P	rofessional fundraising fees (Part IX, column (A), line 11e)		0.	0 .
8	bΤ	otal fundraising expenses (Part IX, column (D), line 25)	0.		
டி	17 C	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		56,626.	14,907
		otal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		80,239.	34,497.
		evenue less expenses Subtract line 18 from line 12	<u> </u>	914,573.	<27,591
-8	רו פו	evenue less expenses Subtract line 10 from line 12			
ts o			B	eginning of Current Year	End of Year
Assets or Balances		otal assets (Part X, line 16)		1,319,638.	1,292,086
01	21 T	otal liabilities (Part X, line 26)	<u> </u>	14.	53.
킲		et assets or fund balances. Subtract line 21 from line 20		1,319,624.	1,292,033
Pa	rt II	Signature Block			
Unde	r penalt	es of perjury, I declare that I have examined this return, including accompanying schedules	and stater	nents, and to the best of m	y knowledge and belief, it is
		and complete. Declaration of prepater (other)than officer) is based on all information of whi			
	Τí	1 Jerryn I IVE IV		×115	114
Cian		Signature of officer		Date	4.
Sign		Desoran J. Hoover, Transcer	9/		
Here	•	Type or print name and title			
				Doto	DTIN
		Print/Type preparer's name Preparer's agnature		Date Check	PTIN
Paid	Œ	ATRICK JORDAN		08/12/14 self-employe	P00854521
Prepa	arer F	irm's name CDLM & COMPANY CPA'S, LLP		Firm's EIN	16-1171627
Use (firm's address 401 E. STATE ST., SUITE 500			
	'	ITHACA, NY 14850		Phone no 60	7-272-4444
Mari	the ID			Tribone no. 0 0	
	_	6 discuss this return with the preparer shown above? (see instructions)			
33200	1 10-29-	· · · · · · · · · · · · · · · · · · ·			Form 990 (2013)
	SE	E SCHEDULE O FOR ORGANIZATION MISSION ST	[ATEM]	ENT CONTINUA	TION

	n 990 (2013) ORGANIZATIONS, INC. 15-054	1365	Page 2
Pa	rt 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		
	THE MISSION OF THE CITY FEDERATION OF WOMEN'S ORGANIZATIONS IS	ТО	
	SUPPORT WOMEN AND GIRLS AND TO ACT AS A CATALYST FOR THE IMPRO		т [.]
	OF THE LIVES OF WOMEN AND GIRLS IN TOMPKINS COUNTY, THUS MAKIN		
	CONTRIBUTION TO THE COMMUNITY AS A WHOLE.	IO A	
2	Did the organization undertake any significant program services during the year which were not listed on	[-	
	the prior Form 990 or 990-EZ?	X Yes	L 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?	XYes	L 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	y expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total		
	revenue, if any, for each program service reported	,,,po.,,ooo,, o	
4a	10 500		
44	(Code) (Expenses \$	י חעזאחי	'
	ADDRESS NEEDS AND OPPORTUNITIES THAT IMPROVE THE QUALITY OF LI		K
	TOMPKINS COUNTY WOMEN AND GIRLS INCLUDING COMMUNITY DEVELOPMEN	•	
	EDUCATION, HEALTH, HUMAN SERVICES, AND ACTIVITIES THAT ADDRESS	GEND:	ER
	EQUITY.		
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)
4.		-	
4c	(Code) (Expenses \$)
			.
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses \(\) 19,590.		
70	1000 p. og. s.m. our tiou unpurious p	Form Qf	90 (2013)

rm 990 (2013) O	RGANIZATIONS,	INC.	15-0	<u> </u>	Page
art IV	Checklist of Req	uired Schedules				

			Yes	No
1	ls the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
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	3		X
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	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	<u>, </u>		v
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	6		Х
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space,	- 6		
′	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	'		21
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
•	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	3	20	
	as applicable		-	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
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 167 If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 169 If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		_X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
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	11f		X
I2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			77
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		İ	77
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13 142	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		<u>X</u>
J	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		ĺ	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	170		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	ĺ	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
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	17		Х
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		\Box	
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
9	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	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		_	മമറ മ	0040

Part IV Checklist of Required Schedules (continued)

22	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,	21	Х	
22		21	v	1
	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,		Δ	
	<u> </u>			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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			1
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	İ		
	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	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			l
	any tax-exempt bonds?	24c		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			ł
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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			ł
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			ĺ
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		X
	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial		-	
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			l
	of any of these persons? If "Yes," complete Schedule L, Part III	27	-SW0054.	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	2 3 %		
	instructions for applicable filing thresholds, conditions, and exceptions)	1		ı
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	-	X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			7.7
	contributions? If "Yes," complete Schedule M	30_		X
	Did the organization liquidate, terminate, or dissolve and cease operations?			37
	If "Yes," complete Schedule N, Part I	31		X
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			37
	Schedule N, Part II	32		X
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33_		X
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	04		v
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	051	j	İ
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	000		v
	If "Yes," complete Schedule R, Part V, line 2	36		X
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	27		v
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	37	\dashv	X
	Note. All Form 990 filers are required to complete Schedule O	38	х	
	Hote, All Form 330 meta are required to complete ochedule O		990 f	(2012)

	CITY FEDERATION OF WOMEN S		
orm 990 (2	ORGANIZATIONS, INC.	15-0547365	Page 5
Part V	Statements Regarding Other IRS Filings and Tax Compliance		

	Check 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	1a] 3	(A) X	* ** ··	1976			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0	gr.	e e	103 103 104 105 105 105 105 105 105 105 105 105 105			
С	D. H								
	(gambling) winnings to prize winners?			1c		<u> </u>			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			£ , , ,	1,5	«~ »			
	filed for the calendar year ending with or within the year covered by this return								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	rns?		2b		84, 5			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)								
3a	3a Did the organization have unrelated business gross income of \$1,000 or more during the year?								
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0		3b					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	author	rity over, a			1			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a_		X			
b	If "Yes," enter the name of the foreign country				No.	'			
	See instructions for filing requirements for Form TD F 90 22 1, Report of Foreign Bank and Financial	Accou	nts	,	4.4	•			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	action?	•	5b		X			
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	he orga	anization solicit						
	any contributions that were not tax deductible as charitable contributions?			6a		X			
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	tions o	r gifts			ł			
	were not tax deductible?	,		6b		<u> </u>			
7	Organizations that may receive deductible contributions under section 170(c).			,	,	###C			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices p	rovided to the payor?	7a		X			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		<u> </u>			
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as req	uired			ł			
	to file Form 8282?			7c	0.0500 7.	X			
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		11.		X			
е	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?								
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti	ract?		7f		X			
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	orm 88	199 as required?	7 <u>g</u>					
'n	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h	anas s	-3.5"			
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations $ {\sf D} $			*	. 4%	. ;***			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any tim	ne during the year?	8	A * *	- · · · ·			
9	Sponsoring organizations maintaining donor advised funds.			*#	- * 4,13	^			
а	Did the organization make any taxable distributions under section 4966?			9a					
. b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	24	.^			
10	Section 501(c)(7) organizations. Enter	1 1		×.	%~ 4	. Yakar			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a		S. A					
b		10b		*	\$ no.	X 8 3			
11	Section 501(c)(12) organizations. Enter	المدا		£ 1 3	,	- 33			
a	Gross income from members or shareholders	11a		<i>k k</i>	الله الله الله الله الله الله الله الله	^ XX			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			2 1		1			
10-	amounts due or received from them)	11b)	40-	g, 1265 a	<i>1847</i> `			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a *	Mar.	-			
_	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		,	χ	4			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			120	۲.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O			13a	(A)	-			
h	Enter the amount of reserves the organization is required to maintain by the states in which the			\$* 	£ ,"	*			
Ü	organization is licensed to issue qualified health plans	13b			ş · .	Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Salar Sa			
^	Enter the amount of reserves on hand	13c		****		44.			
	Did the organization receive any payments for indoor tanning services during the tax year?	_100		14a	y' *	X			
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O		14b					
	11 199, 1993 it most a 1 offit 120 to report these payments. It most provide an explanation in oureduin				990	(2013)			

ORGANIZATIONS, INC.

Page 6 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 in Schedule O. See instructions

	Check if Schedule O contains a response or note to any line in this Part VI			X							
Sec	tion A. Governing Body and Management										
			Yes	No							
12	Enter the number of voting members of the governing body at the end of the tax year 13	Y 200	1 8	"							
14	If there are material differences in voting rights among members of the governing body, or if the governing	£ .									
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0		;) }m								
L	Enter the number of voting members included in line 1a, above, who are independent 1b		35m.x								
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		.≽.	У**							
2		^ 2	`	Х							
_	officer, director, trustee, or key employee?	~									
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	_		v							
	of officers, directors, or trustees, or key employees to a management company or other person?	<u>3</u> 4		X							
4											
5											
6	·										
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	_		7.							
	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	////	<u>X</u>							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	india Distriction	A.								
а	The governing body?	8a	X								
b	Each committee with authority to act on behalf of the governing body?	8b	Х								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the										
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u>X</u>							
Sec	tion 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		<u>X</u>							
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	1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?										
b	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	Х								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X								
С	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		Х							
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			, ag , 5.5.							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	Į									
а	The organization's CEO, Executive Director, or top management official	15a	ļ	X							
b	Other officers or key employees of the organization	15b		Х							
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	3									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	, ·	À.								
	taxable entity during the year?	16a		Х							
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	2	(#XX	* j.							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	z,		3							
	exempt status with respect to such arrangements?	16b	- "" "	SW *2							
Sec	tion C. Disclosure	.02									
17	List the states with which a copy of this Form 990 is required to be filed ▶NY										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailah	le								
	for public inspection. Indicate how you made these available. Check all that apply	· wilde									
	Own website Another's website W Upon request Other (explain in Schedule O)										
10	· · · · · · · · · · · · · · · · · · ·	l finan	cial								
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	man	ciai								
statements available to the public during the tax year											
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person of	ion 📂									
	DONNA BROCK - (607) 272-4792										
	LAP INC., 309 THIRD STREET, ITHACA, NY 14850										

332006 10-29-13

Form 990 (2013) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

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

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

X Check this box if neither the organization	nor any related	orga	anıza	ition	cor	npei	nsat	ted any current officer, o	director, or trustee	
(A)	(B)		(C)					(D)	(E)	(F)
Name and Title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	, unle	ss pe	rson	ıs bot	h an	compensation	compensation	amount of
	week	-	ceram	aaa	recto	tor/trustee)		from	from related	other
	(list any	Individual trustee or director						the	organizations (W-2/1099-MISC)	compensation from the
	hours for related	e or d	tee			sated		organization (W 2/1099-MISC)	(VV-2/1099-WIGC)	organization
	organizations	ruste	Institutional trustee		eg.	mped		(** 2/1099-141130)		and related
	below	dual	rtiona	_	ed E	S 25 55	, .			organizations
	line)	Indiv	Institu	Officer	Key employee	Highest compensated employee	Former			3
(1) ELIZABETH FALCAO	4.00									
PRESIDENT		Х		X				0.	0.	· 0.
(2) BEVERLY BAKER	0.80									
TRUSTEE		Х						0.	0.	0.
(3) ELIZABETH COLUCCI	1.30									
TRUSTEE		X						0.	0.	0.
(4) JULIA GORMAN	2.00									
VICE PRESIDENT		Х		Х				0.	0.	0.
(5) MARY GRAINGER	0.80									
TRUSTEE		X						0.	0.	0.
(6) SALLY GRUBB	0.80									
TRUSTEE		X				1		0.	0.	0.
(7) DEBORAH HOOVER	4.00									
TREASURER		X	•	X				0.	0.	0.
(8) ALICIA LEWKOWICZ	2.00									
CORRESPONDING SECRETARY		X		X				0.	0.	0.
(9) JILLIAN PENDLETON	2.00									
RECORDING SECRETARY		X		Х				0.	0.	0.
(10) CAROLYN MCPHERSON	0.80									
TRUSTEE		X						0.	0.	0.
(11) CHRISTINE SANCHIRICO	0.80							_	_	
TRUSTEE		X						0.	0.	0.
(12) DIANE SHAFER	0.80								_	
TRUSTEE	+	X						0.	0.	0.
(13) DIANE WIESSINGER	0.80									_
TRUSTEE		X						0.	0.	0.
	-	<u> </u>								
		{								
	- 									
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									_	

ORGANIZATIONS INC

	rt VII Section A. Officers, Directors, Tru		ploy		an	d Hı	ghe:	st C	Compensated Employe	es (continued)			
	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (B) (C) (D) (E)								(F)				
	Name and title	Average	verage Position (do not check more than one						Reportable	Reportable		Est	mated
		hours per	box	, unle	ss pe	rson	is bot	h an	1	compensation	- 1		ount of
		week (list any				T T	1		from the	from related organization			ther ensation
		hours for	Individual trustee or director				8		organization	(W-2/1099 MI			m the
		related	tee or	ustee			ensate		(W-2/1099-MISC)	•	, l	orga	nization
		organizations	al trus	institutional trustee		loyee	Highest compensated employee						related
		below line)	npwi	strute	Officer	Key employee	phest	iaer Limer				orgar	nizations
		iiiie)	Ĕ	Ĕ	5	Ş.	훈흡	Ē					
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		1								· · · · · · · · · · · · · · · · · · ·			
			<u> </u>					_					
		-											
					i								
1b	Sub-total								0.		0.		0
С	Total from continuation sheets to Part V	II, Section A							0.		0.		0
d								<u> </u>	0.		0.		0
2	Total number of individuals (including but i	not limited to th	ose	liste	d al	oove	e) wh	o re	eceived more than \$100	,000 of reportab	le		
	compensation from the organization											Τ,	(
_											Г	-,	res No
3	Did the organization list any former officer		istee	e, ke	y en	npio	yee,	or	highest compensated e	mployee on		7.7	
	line 1a? If "Yes," complete Schedule J for									, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ŀ	3	X
4	For any individual listed on line 1a, is the s									the organization		_`	· v
5	and related organizations greater than \$15 Did any person listed on line 1a receive or									dual for conven	ŀ	4	• X
3	rendered to the organization? If "Yes," con					•		eiai	led organization or indivi	dual for services	'	5	X
Sec	tion B. Independent Contractors	ipiete ochedare		01 30	1011	Ders	.011					<u> </u>	
1	Complete this table for your five highest co	ompensated inc	depe	ende	nt c	ontr	acto	rs t	that received more than	\$100,000 of con	npensa	ation fro	om
-	the organization Report compensation for										,		
	(A)								(B)			(C)	
	Name and business	address	N	NE	<u> </u>				Description of s	ervices	C	ompen	sation
								_				<u> </u>	
								ŀ					
								\dashv					
								\dashv					
	Table work or of the de	Sample of the control							I also a la companyo di co	ara thar		19400	Same
2	Total number of independent contractors (_	OT III	nπec	J 10			sted	above) who received m	ore man		A. 1888. v.	***
	\$100,000 of compensation from the organ	ization 🏴 📜)					Form Q	90 (2013

ORGANIZATIONS, INC.

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax under Unrelated Related or Total revenue exempt function business revenue revenue , Gifts, Grants nilar Amounts Federated campaigns Membership dues 1b Fundraising events 1c Related organizations 1d Contributions, (and Other Simi Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f Business Code Program Service All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 6,906 6,906. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties 5 (i) Real (II) Personal 6 a Gross rents Less rental expenses Rental income or (loss) d Net rental income or (loss) Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less. cost or other basis and sales expenses Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue 11 a d All other revenue Total. Add lines 11a-11d 6,906 6,906. Total revenue See instructions.

ORGANIZATIONS, INC.

Part IX Statement of Functional Expenses

Do not include amounts reported on lines 88, 70 (8) Total expenses Program service Management and general expenses of the season of the season of the season of the season of the United States See Part IV, line 21 (2 Carsts and other assistance to individuals in the United States See Part IV, line 21 (2 Carsts and other assistance to governments, organizations, and individuals outside the United States See Part IV, line 21 (2 Carsts and other assistance to governments, organizations, and individuals outside the United States See Part IV, line 15 (2 Compensation of current officers, directors, trustees, and key employees to Compensation of current officers, directors, trustees, and key employees (3 Compensation included above, to disqualited persons (as defined under section 4656/(K1)) and persons described in section 4956/(K1)) nd 4050/(K1) and 4050	Sect	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)										
75, 80, 98, and 100 of Part VIII. 1 Rants and other assestance to povernments and organizations in the United States. See Part IV, line 2: 2 Grants and other assestance to individuals in the United States See Part IV, line 2: 3 Grants and other assestance to opovernments, organizations, and individuals outside the United States. See Part IV, line 15 and 16 4 Benefits page and organizations, and individuals outside the United States. See Part IV, line 5: 5 and 16 4 Benefits page and organization of current officers, directors, trustees, and key emptyoyee 5 Compensation of current officers, directors, trustees, and key emptyoyee 6 Compensation of current officers, directors, trustees, and key emptyoyee 7 Orther asserts and weges 8 Persone pile a concess and overholders (include section 40%(x)) and 40%(y) emptyee contributions (include section 40%(x) and 40%(y) emptyee contributions (include sec		Check if Schedule O contains a response or note to any line in this Part IX										
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reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				10,000	<u> </u>	·						
educational campaign and fundraising solicitation	20	· · · · · · · · · · · · · · · · · · ·										
		Check here from it following SOP 98-2 (ASC 958-720)										

Form 990 (2013)

Balance Sheet Part X Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year End of year 100. 100. Cash - non-interest bearing 1 1.319,0871,290,564. 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L. Assets Notes and loans receivable, net 7 Inventories for sale or use R 451 1,422 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a 10b 10c b Less accumulated depreciation 11 Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 14 Intangible assets 14 15 15 Other assets See Part IV, line 11 1,319,638 1,292,086. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 14. 17 Accounts payable and accrued expenses 17 Grants payable 18 18 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons 22 Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties 23 23 24 24 Unsecured notes and loans payable to unrelated third parties 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 25 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 1,128,457 1,100,866. 27 Unrestricted net assets Temporarily restricted net assets 191,167. 29 191 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 32 1,319,624 1,292,033. 33 Total net assets or fund balances 33 1.319,6<u>38</u> 1,292,086. 34 Total liabilities and net assets/fund balances

orn	n 990 (2013) ORGANIZATIONS, INC.	15-05	<u> 547365</u>	Page 12
Pa	art XI Reconciliation of Net Assets			
	Check 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		<u>,906.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2		,497.
3	Revenue less expenses Subtract line 2 from line 1	3	<27	<u>,591.</u> :
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,319	,624.
5	Net unrealized gains (losses) on investments	5		
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 in Schedule O)	9		0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	10	1,292	,033.
Pa	art XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			
			Y	es No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		-	J. 12 3000
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedul	le O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	ed on a		75,
	separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			.
b	Were the organization's financial statements audited by an independent accountant?		2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	ate basis,		
	consolidated basis, or both			· 13 %
	Separate basis Consolidated basis Both consolidated and separate basis		* **	P
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t	he audit,	1.14 8	1.20
	review, or compilation of its financial statements and selection of an independent accountant?		2c	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sc	hedule O		; ¼ Ž.
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	Single Audit		
	Act and OMB Circular A-133?		3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the req	uired audit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Ì

332012 10-29-13

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

்Open to Public்க் Inspection

Denartment of the Treasury Internal Revenue Service Name of the organization

Part I.

CITY FEDERATION OF WOMEN'S

ORGANIZATIONS,

Employer identification number 15-0547365

Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from X activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2), (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h **b** Type II c ____ Type III - Functionally integrated d ____ Type III - Non-functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No the governing body of the supported organization? 11g(i) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s) (vi) Is the (iv) Is the organization (v) Did you notify the (ii) EIN (III) Type of organization (i) Name of supported (vii) Amount of monetary organization in col in col. (i) listed in your organization in col. (described on lines 1-9 organization (ı) organized in the support governing document? (i) of your support? above or IRC section (see instructions)) Yes Yes

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

Schedule A (Form 990 or 990-EZ) 2013

12500812 769695 X6053

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)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not		1				
	include any "unusual grants ")						
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge					_	
4	Total. Add lines 1 through 3						
5	The portion of total contributions	3 . 4	Service a service		The Same	A. A. 31	
	by each person (other than a						
	governmental unit or publicly		1				
	supported organization) included				***		
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4	· ** ** **3		F 1	*** *	. ,	
	tion B. Total Support				· · · · · · · · · · · · · · · · · · ·		
ale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4						
8	Gross income from interest,		·				
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10	,	* }	*, 8 * * * * * * * * * * * * * * * * * *	, ,,	74 - ÎT QÎ	
	Gross receipts from related activities,	etc (see instruction	ons)			12	
13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stor	o here			·		▶
Sec	tion C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2013 (I	line 6, column (f) di	ivided by line 11, c	olumn (f))		14	9
15	Public support percentage from 2012	Schedule A, Part	II, line 14			15	9
16a	33 1/3% support test - 2013. If the c	organization did no	ot check the box or	line 13, and line	14 is 33 1/3% or n	nore, check this box	and
	stop here. The organization qualifies	as a publicly supp	orted organization				▶□
b	33 1/3% support test - 2012. If the o	organization did no	ot check a box on l	ne 13 or 16a, and	l line 15 is 33 1/3%	or more, check this	box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			▶
17a	10% -facts-and-circumstances tes	t - 2013. If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10% o	r more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	is box and stop h	nere. Explain in Pai	t IV how the organiz	ation
	meets the "facts-and-circumstances"	test The organiza	tion qualifies as a	oublicly supported	d organization	-	▶
b	10% -facts-and-circumstances test				•	17a, and line 15 is 10	0% or
	more, and if the organization meets th	_					
	organization meets the "facts-and-circ				•		
18	Private foundation. If the organization			•	•		▶ .
						dule A (Form 990 o	r 990-FZ) 201:

Schedule A (Form 990 or 990-EZ) 2013 ORGANIZATIONS, INC.

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

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

	qualify under the tests listed b	elow, please comp	olete Part II)	 			
Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) ⊳	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")	29,076.	19,914.	6,245.	220.		55,455.
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	171,997.	161,556.	164,396.	52,250.		550,199.
2	Gross receipts from activities that	11111111	101,000	104,350.	32,230.		330,133.
3	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
•	ization'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	201,073.	181,470.	170,641.	52,470.		605,654.
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons	1,310.	1,000.	250.			2,560.
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	61,585.	64,658.	62,227.	6,106.		194,576.
С	Add lines 7a and 7b	62,895.	65,658.	62,477.	6,106.		197,136.
8	Public support (Subtract line 7c from line 6)	: · (\$5. (3a)		W. (1		/ 332 T	408,518.
	tion B. Total Support						
					4.0.0040	() 0010	(n ~
Cale	ndar year (or fiscal year beginning in) ⊳	(a) 2009	(b) 2010	(c) 2011	(a) 2012	(e) 2013	(t) lotal
	ndar year (or fiscal year beginning in) Amounts from line 6		(b) 2010 181,470.	(c) 2011 170,641.	(d) 2012 52,470.	(e) 2013	(f) Total 605,654.
9	- '	(a) 2009 201,073. 8,048.	(b) 2010 181,470. 5,001.	(c) 2011 170,641. 4,173.	52,470. 5,959.	(e) 2013 6,906.	605,654. 30,087.
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties	201,073.	181,470.	170,641.	52,470.		605,654.
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	201,073.	181,470.	170,641.	52,470.		605,654.
9 10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses	8,048.	181,470. 5,001.	4,173.	52,470. 5,959.	6,906.	30,087.
9 10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	201,073.	181,470.	170,641.	52,470.		605,654.
9 10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital	8,048.	5,001. 5,001.	4,173. 4,173.	52,470. 5,959.	6,906.	30,087.
9 10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain	8,048.	181,470. 5,001.	4,173. 4,173.	52,470. 5,959.	6,906.	30,087.
9 10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	8,048. 8,048. 209,121.	5,001. 5,001.	4,173. 4,173. 174,814.	52,470. 5,959. 5,959. 58,429.	6,906. 6,906.	30,087. 30,087.
9 10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9 10c, 11, and 12)	8,048. 8,048. 209,121.	5,001. 5,001.	4,173. 4,173. 174,814.	52,470. 5,959. 5,959. 58,429.	6,906. 6,906.	30,087. 30,087.
9 10a b c 11 12	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9 10c, 11, and 12) First five years. If the Form 990 is for	8,048. 8,048. 209,121. The organization's	5,001. 5,001. 186,471. sirst, second, third	4,173. 4,173. 174,814.	52,470. 5,959. 5,959. 58,429.	6,906. 6,906.	30,087. 30,087.
9 10a b c 11 12 13 14 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here	8,048. 8,048. 209,121. the organization's	181,470. 5,001. 5,001. 186,471. s first, second, third	170,641. 4,173. 4,173. 174,814. d, fourth, or fifth tax	52,470. 5,959. 5,959. 58,429.	6,906. 6,906.	30,087. 30,087. 30,087. 635,741. ation,
9 10a b c 11 12 13 14 Sec 15	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here	8,048. 8,048. 8,048. 209,121. the organization's ic Support Perine 8, column (f) di	181,470. 5,001. 5,001. 186,471. s first, second, third	170,641. 4,173. 4,173. 174,814. d, fourth, or fifth tax	52,470. 5,959. 5,959. 58,429.	6,906. 6,906. 6,906. n 501(c)(3) organiz	30,087. 30,087.
9 10a b c 11 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here etion C. Computation of Publi Public support percentage for 2013 (I	8,048. 8,048. 8,048. 209,121. the organization's ic Support Perine 8, column (f) dieschedule A, Part	181,470. 5,001. 5,001. 186,471. s first, second, third rcentage vided by line 13, c	170,641. 4,173. 4,173. 174,814. d, fourth, or fifth tax	52,470. 5,959. 5,959. 58,429.	6,906. 6,906. 6,906. n 501(c)(3) organiz	30,087. 30,087. 30,087. 635,741. ation, 64.26 %
9 10a b c 11 12 13 14 Sec 15 16 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here tion C. Computation of Publ Public support percentage from 2012	8,048. 8,048. 8,048. 209,121. The organization's the organization for the control of the schedule A, Part street Income	181,470. 5,001. 5,001. 186,471. s first, second, third reentage vided by line 13, c lill, line 15 e Percentage	170,641. 4,173. 4,173. 174,814. d, fourth, or fifth tax	52,470. 5,959. 5,959. 58,429.	6,906. 6,906. 6,906. n 501(c)(3) organiz	30,087. 30,087. 30,087. 635,741. ation, 64.26 %
9 10a b c 11 12 13 14 Sec 15 16 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here tion C. Computation of Publ Public support percentage from 2012	8,048. 8,048. 8,048. 209,121. the organization's tic Support Perine 8, column (f) die Schedule A, Part stment Income	5,001. 5,001. 5,001. 186,471. first, second, third rcentage vided by line 13, c lil, line 15 e Percentage on (f) divided by line	170,641. 4,173. 4,173. 174,814. d, fourth, or fifth tax	52,470. 5,959. 5,959. 58,429.	6,906. 6,906. 6,906. n 501(c)(3) organiz	30,087. 30,087. 30,087. 635,741. ation, 64.26 % 64.03 %
9 10a b c 11 12 13 14 Sec 15 16 Sec 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here tion C. Computation of Publ Public support percentage for 2013 (in Public support percentage from 2012) Investment income percentage for 20	8,048. 8,048. 8,048. 209,121. the organization's ic Support Perine 8, column (f) di Schedule A, Part stment Income 13 (line 10c, colum 2012 Schedule A, I	5,001. 5,001. 5,001. 186,471. first, second, third rcentage vided by line 13, c lil, line 15 e Percentage on (f) divided by line Part III, line 17	170,641. 4,173. 4,173. 174,814. d, fourth, or fifth taxolumn (f))	52,470. 5,959. 5,959. 58,429. Experience as a section	6,906. 6,906. 6,906. 15 16 17 18	30,087. 30,087. 30,087. 635,741. ation, 64.26 % 64.03 % 4.73 % 3.90 %
9 10a b c 11 12 13 14 Sec 15 16 Sec 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here tion C. Computation of Publ Public support percentage for 2013 (Public support percentage from 2012-tion D. Computation of Investinent income percentage from 2012 Investment income percentage from 2015 Investment income percentage from 2015 Investment income percentage from 2016 Investment income percentage from 2016 Investment income percentage from 2016 Investment income percentage from 2016 Investment income percentage from 2017 Investment income percentage from 2018 Investment income percentage from 2018 Investment Income percentage from 2018 Investment Income percentage from 2018 Investment Income percentage from 2018 Investment Income percentage from 2018 Investment Income percentage from 2018 Investment Income percentage from 2018 Investment Income percentage from 2018 Investment Income percentage from 2018 Investment Income percentage from 2018 Investment Income percentage from 2018 Investment Income percentage from 2018 Investment Income percentage from 2018 Investment Income percentage from 2018 Investment Income percentage from 2018 Investment Income percentage from 2018 Investment Income percentage from 2018 Investment Income Investment Income Investment Income Investment Income Investment Income Investment Income Investment Income Investment Income Investment Income Investment Income Invest	8,048. 8,048. 8,048. 209,121. the organization's ic Support Perine 8, column (f) di Schedule A, Part street Income 2012 Schedule A, I organization did n	181,470. 5,001. 5,001. 186,471. s first, second, third rcentage vided by line 13, c III, line 15 e Percentage on (f) divided by line Part III, line 17 ot check the box of	170,641. 4,173. 4,173. 174,814. d, fourth, or fifth tax column (f)) e 13, column (f))	52,470. 5,959. 5,959. 58,429. 4 year as a section	6,906. 6,906. 6,906. 1501(c)(3) organiz	30,087. 30,087. 30,087. 635,741. ation, 64.26 % 64.03 % 4.73 % 3.90 %
9 10a b c 11 12 13 14 Sec 15 16 Sec 17 18 19a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here tion C. Computation of Publ Public support percentage from 2012 tion D. Computation of Investment income percentage from 2013 Investment income percentage from 2013 Investment income percentage from 2013 Investment income percentage from 2013 Investment income percentage from 2013 Investment income percentage from 2013 Investment income percentage from 2013 Investment income percentage from 2013 Investment income percentage from 2013 Investment income percentage from 2013 Investment income percentage from 2013 Investment income percentage from 2013 Investment income percentage from 2013 Investment income percentage from 2013 Investment income percentage from 2013 Investment income percentage from 2013 Investment Income percentage from 2013 Investment Income percentage from 2013 Investment Income percentage from 2013 Investment Income percentage from 2013 Investment Income percentage from 2013 Investment Income percentage from 2013 Investment Income percentage from 2013 Investment Income percentage from 2013 Investment Income percentage from 2013 Investment Income percentage from 2013 Investment Income percentage from 2013 Investment Income 2013 Investment Income 2013 Investment Income 2013 Investment Income 2013 Investment Income 2013 Investment Income 2013 Investment Income 2013 Investment Income 2013 Investment Income 2013 Investment Income 2013 Investment Income 2013 Investment Income 2013 Investment Income 2013 In	8,048. 8,048. 8,048. 209,121. the organization's ic Support Perine 8, column (f) die Schedule A, Part stment Income 13 (line 10c, column 2012 Schedule A, I organization did nind stop here. The	181,470. 5,001. 5,001. 186,471. s first, second, third rcentage vided by line 13, c III, line 15 e Percentage on (f) divided by line Part III, line 17 ot check the box of organization qualif	170,641. 4,173. 4,173. 174,814. d, fourth, or fifth taxolumn (f)) e 13, column (f)) on line 14, and line fies as a publicly su	52,470. 5,959. 5,959. 58,429. 429. 429. 429. 429. 429. 429. 429.	6,906. 6,906. 6,906. 1501(c)(3) organiz	30,087. 30,087. 30,087. 635,741. ation, 64.26 % 64.03 % 4.73 % 3.90 % 7 is not X
9 10a b c 11 12 13 14 Sec 15 16 Sec 17 18 19a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here stion C. Computation of Publ Public support percentage from 2012 Stion D. Computation of Investment income percentage for 20 Investment income percentage from 23 3 1/3% support tests - 2013. If the more than 33 1/3%, check this box and support tests and support tests and support tests and support tests.	8,048. 8,048. 8,048. 209,121. the organization's ic Support Perine 8, column (f) die Schedule A, Part stment Income 13 (line 10c, column 2012 Schedule A, organization did nond stop here. The organization did nond stop here.	181,470. 5,001. 5,001. 5,001. 186,471. 6 first, second, third reentage vided by line 13, c III, line 15 e Percentage on (f) divided by line Part III, line 17 ot check the box coorganization qualitot check a box on	170,641. 4,173. 4,173. 4,173. 174,814. d, fourth, or fifth tax column (f)) e 13, column (f)) on line 14, and line fies as a publicly suline 14 or line 19a,	52,470. 5,959. 5,959. 5,959. typear as a section apported organiza and line 16 is mo	6,906. 6,906. 6,906. 15,000,000,000,000,000,000,000,000,000,0	30,087. 30,087. 30,087. 635,741. ation, 64.26 % 64.03 % 4.73 % 3.90 % 7 is not X

332023 09-25-13

Schedule A (Form 990 or 990-EZ) 2013

CITY FEDERATION OF WOMEN'S

Schedule A	(Form 990 or 990-EZ) 2013 ORGANIZATIONS	S, INC.	15-0547365 Page 4
Part IV	Supplemental Information. Provide the expla	anations required by	Part II, line 10, Part II, line 17a or 17b, and Part III, line 12
	Also complete this part for any additional information	(See instructions)	
			···
			
-	·		
			
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			,
· · · · · · · · · · · · · · · · · · ·			
			
•			

SCHEDULE D

Department of the Treasury

Internal Revenue Service

(Form 990)

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

➤ Attach to Form 990.

➤ Information about Schedule D (Form 990) and 18 instructions is at www.irs.gov/form990.

Open to Public

OMB No 1545-0047

Inspection

Name of the organization

CITY FEDERATION OF WOMEN'S ORGANIZATIONS, INC.

Employer identification number 15-0547365

Pa	t 🕒 Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lir	ne 6	
_		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's	s exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor	· ·	used only
	for charitable purposes and not for the benefit of the donor	· -	
	impermissible private benefit?	, , ,	Yes No
Pai		ganization answered "Yes" to Form 990, F	Part IV, line 7
1	Purpose(s) of conservation easements held by the organizat		
•	Preservation of land for public use (e.g., recreation or		storically important land area
	Protection of natural habitat		ufied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	ified conservation contribution in the form	of a conservation easement on the last
_	day of the tax year	med deribervation deministration in the fermi	or a sorros varior sasomoni on the last
	day of the tax your		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
	Number of conservation easements on a certified historic st	ructure included in (a)	2c
q	Number of conservation easements included in (c) acquired		
u	listed in the National Register	arter 6/17/00, and not on a historic struct	2d
2	Number of conservation easements modified, transferred, re	blessed extinguished or terminated by the	
3	· · · · · · · · · · · · · · · · · · ·	eleased, extinguished, or terminated by the	e organization during the tax
4	year ▶ Number of states where property subject to conservation ea	esement is located	
4 5	Does the organization have a written policy regarding the pe		
5	violations, and enforcement of the conservation easements	•	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting		
6	Amount of expenses incurred in monitoring, inspecting, and		
7	Does each conservation easement reported on line 2(d) abo	-	
8	and section 170(h)(4)(B)(ii)?	ve satisfy the requirements of section 170	((1)(4)(B)(i) Yes No
^	In Part XIII, describe how the organization reports conservat	tran aggregate in its revenue and expense	
9	·	•	
	include, if applicable, the text of the footnote to the organization conservation easements	ation's iniancial statements that describes	the organization's accounting for
Pai	t III Organizations Maintaining Collections of	of Art Historical Treasures or O	ther Similar Assets
	Complete if the organization answered "Yes" to Form		
12	If the organization elected, as permitted under SFAS 116 (A)		ment and halance sheet works of art
	historical treasures, or other similar assets held for public ex	· · · · · · · · · · · · · · · · · · ·	
	the text of the footnote to its financial statements that descri		noe of public dervice, provide, arr are xiii,
h	If the organization elected, as permitted under SFAS 116 (A		t and halance shoot works of art, historical
b	treasures, or other similar assets held for public exhibition, e	<i>'</i> ' '	•
	•	addation, or research in futurerance of pu	biic service, provide the following amounts
	relating to these items (i) Powerupe included in Form 990, Part VIII, line 1		. •
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
_	(ii) Assets included in Form 990, Part X	and the second s	
2	If the organization received or held works of art, historical tre	•	ıı gaın, provide
	the following amounts required to be reported under SFAS	i to (ASC 958) relating to these items	> 0
а	Revenues included in 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) 2013

-		ATIONS, IN			or Oth	C		13-03			aye z
	t III Organizations Maintaining C										
3	Using the organization's acquisition, access	on, and other record	is, check any of the	e following tha	at are a	signit	icant	use of its	collectio	i item	ıs
	(check all that apply)										
а	Public exhibition	d	Loan or exc	change progr	ams						
b	Scholarly research	е	Other								
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n how they further	the organizat	ion's ex	empt	purpo	ose in Par	t XIII		
5	During the year, did the organization solicit of	r receive donations	of art, historical trea	asures, or oth	ner sımıla	ar ass	ets				
	to be sold to raise funds rather than to be m	aintained as part of t	the organization's c	ollection?					Yes		_ No
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if the organization	on answered	"Yes" to	For	n 990	, Part IV,	line 9, or		
	reported an amount on Form 990, Pa	rt X, line 21									
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for contribution	ns or other as	ssets no	t incl	uded				
	on Form 990, Part X?								Yes		□No
ь	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table								
	, ,	•	J						Amount	t	
С	Beginning balance						1c				
	Additions during the year						1d				
	Distributions during the year						1e				
f	Ending balance						1f				
	Did the organization include an amount on F	orm 990. Part X. line	212			_			Yes		No
	If "Yes," explain the arrangement in Part XIII	•		n provided in	Part XIII				00	F	j
Par											-!
L		(a) Current year	(b) Prior year	(c) Two year			hree v	ears back	(e) Four	Vears	hack
10	Beginning of year balance					(α)			(e) rour		
1a	Contributions	191,167.	191,167		1,167.			92,017.	 	132	017.
				 					 		
	Net investment earnings, gains, and losses		<u></u>	 		-					
	Grants or scholarships			+					 		
е	Other expenditures for facilities										
	and programs			 		<u> </u>					
f	Administrative expenses							850.	 		
g	End of year balance	191,167.	191,167		1,167.		1	91,167.		192	<u>,017.</u>
2	Provide the estimated percentage of the cur-		e (line 1g, column (a)) held as							
а	Board designated or quasi-endowment	.00	_%								
b	Permanent endowment ► 100.00	%									
С	Temporarily restricted endowment -	.00%									
	The percentages in lines 2a, 2b, and 2c should	uld equal 100%									
3a	Are there endowment funds not in the posse	ssion of the organiza	ation that are held a	and administe	ered for	the o	rganız	ation	r		
	by									Yes	No
	(i) unrelated organizations								3a(ı)		X
	(ii) related organizations								3a(ii)		X
b	If "Yes" to 3a(II), are the related organizations	s listed as required o	n Schedule R?						3b		
4	Describe in Part XIII the intended uses of the	organization's endo	wment funds								
Par	t VI Land, Buildings, and Equipm	nent.									
	Complete if the organization answere	d "Yes" to Form 990	, Part IV, line 11a S	See Form 990	, Part X	line	10				
	Description of property	(a) Cost or o	ther (b) Cos	t or other	(c) A	Accur	nulate	ed	(d) Bool	(valu	<u> — —</u>
		basis (investr	1 '	(other)			ation		()		
1a	Land			•	#75. 1	>,	, (M ₂)	- A - A - A - A - A - A - A - A - A - A			
	Buildings		***					× 2.7			
c	Leasehold improvements										
d	Equipment										
	Other										
	. Add lines 1a through 1e (Column (d) must e	gual Form 990 Part	X. column (R) line	10(c))				D			0.
		7	,	1-//				_			

Schedule D (Form 990) 2013

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ORGA	N T 'Z. Z	ATT ON	S	INC.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method o	of valuation Cost or end of-year market value
1) Financial derivatives			
Closely-held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			2 · · · · · · · · · · · · · · · · · · ·
otal (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		Will the	
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" t			
(a) Description of investment	(b) Book value	(c) Method o	of valuation Cost or end-of-year market value
(1)			
(2)			
(3)		-	
(4)			
(5)			
(6)			
(7)		ļ	
(8)			
(9)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		~	
	o Form 000. Port IV. line	11d Soc Form 000	0. Port V. line 15
Complete if the organization answered "Yes" t	escription	Tid See Folili 990	(b) Book value
(1)	- Coonpaion		(6) 5551 14.25
(1)			
(3)			
(4)			
(5)			
(6)			
(7)			-
(8)			
(9)			
otal. (Column (b) must equal Form 990, Part X, col (B) line	151		▶
	13)		
	13)		
		11e or 11f See Fo	orm 990, Part X, line 25
Part X Other Liabilities.		11e or 11f See Fo (b) Book value	orm 990, Part X, line 25
Part X Other Liabilities. Complete if the organization answered "Yes" to			orm 990, Part X, line 25
Part X Other Liabilities. Complete if the organization answered "Yes" to a Description of liability			orm 990, Part X, line 25
Part X Other Liabilities. Complete if the organization answered "Yes" to (a) Description of liability (1) Federal income taxes			orm 990, Part X, line 25
Part X Other Liabilities. Complete if the organization answered "Yes" to the image of the organization of liability (1) Federal income taxes (2)			orm 990, Part X, line 25
Part X Other Liabilities. Complete if the organization answered "Yes" to a Description of liability (1) Federal income taxes (2) (3)			orm 990, Part X, line 25
Part X Other Liabilities. Complete if the organization answered "Yes" to a Description of liability (1) Federal income taxes (2) (3) (4)			orm 990, Part X, line 25
Complete if the organization answered "Yes" to a Description of liability (1) Federal income taxes (2) (3) (4) (5)			orm 990, Part X, line 25
Complete if the organization answered "Yes" to (a) Description of liability (1) Federal income taxes (2) (3) (4) (5)			orm 990, Part X, line 25
Complete if the organization answered "Yes" to (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7)			orm 990, Part X, line 25
Complete if the organization answered "Yes" to (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)	o Form 990, Part IV, line		orm 990, Part X, line 25

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	CITY FEDERATION OF		
Sche	dule D (Form 990) 2013 ORGANIZATIONS, INC		15-0547365 Page 4
Par	t XI Reconciliation of Revenue per Audited Finar		r Return.
	Complete if the organization answered "Yes" to Form 990,	Part IV, line 12a	
1	Total revenue, gains, and other support per audited financial state	ements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
С	Add lines 4a and 4b		4c
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part	t I, line 12)	5
Pai	t.XII Reconciliation of Expenses per Audited Fina	incial Statements With Expenses p	er Return.
	Complete if the organization answered "Yes" to Form 990,	Part IV, line 12a	
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
С	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
С	Add lines 4a and 4b		4c
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Pa	art I, line 18.)	5
Pai	t:XIII Supplemental Information.		
	de the descriptions required for Part II, lines 3, 5, and 9, Part III, line 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to		ne 4, Part X, line 2, Part XI,
PAI	RT V, LINE 4:		
EXI	PLANATION: TO FUND FUTURE PROGRAMS	IN ACCORDANCE WITH THE	E ORGANIZATION'S
ΓAΣ	K EXEMPT PURPOSE.		
			
	——————————————————————————————————————		

332054 09-25-13

Schedule D (Form 990) 2013

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

CITY FEDERATION OF WOMEN'S ▼ Attach to Form 990.

Open to Public:

OMB No 1545-0047 2013

Name of the organization CITY FEDERATION OF WOMEN' ORGANIZATIONS, INC.	RATION OF IONS, INC	WOMEN'S					Employer identification number 15-0547365
*Part1 General Information on Grants and Assistance	nd Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, and the selection	o substantiate th	e amount of the grants	s or assistance, the	grantees' eligibilit	y for the grants or as	sistance, and the selec	
criteria used to award the grants or assistance?	tance?						X Yes
2 Describe in Part IV the organization's procedures for monitoring the use	cedures for mon	toring the use of grant	of grant funds in the United States	d States			
Parities Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	3overnments an	d Organizations in th	e United States.	Somplete if the orga	anization answered "	Yes" to Form 990, Part	t IV, line 21, for any
recipient that received more than \$5,000 Part II can be duplicated	5,000 Part II car	be duplicated if addit	if additional space is needed	pep	to Mother of		
1 (a) Name and address of organization or government	(q)	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) interriod of valuation (book, FMV, appraisal, other)	(g) Description of non cash assistance	(h) Purpose of grant or assistance
NO ORGANIZATION RECEIVED \$5,000 OR MORE			•0	0			
1							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	nd government o	rganizations listed in th	he line 1 table				
3 Enter total number of other organizations listed in the line 1 table	listed in the line	1 table					A
LHA For Paperwork Reduction Act Notice, see the Instructions for Form	see the Instruc	tions for Form 990.					Schedule I (Form 990) (2013)

CITY FEDERATION OF WOMEN'S

ORGANIZATIONS,

Page 2

15-0547365

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed Schedule I (Form 990) (2013) Part IIIs Grants and Other

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non cash assistance	(book, FMV, appraisal, other)	(f) Description of non-cash assistance
Rartivs Supplemental Information, Provide the information required in	luired in Part I, IIn	e 2, Part III, column	Part I, line 2, Part III, column (b), and any other additional information	dditional information	
PART I, LINE 2:					
EXPLANATION: THE CFWO WRITTEN APPLICATION REQUIRES	ICATION		PECIFIC PL	SPECIFIC PLANS FOR THE	
USE OF THE FUNDS. THIS SETS THE B	BASELINE	EXPECTATIO	NS OF HOW	EXPECTATIONS OF HOW THE GRANTEE	
ORGANIZATION WILL USE THE FUNDS.	UPON NOTICE OF	AN	AWARD, AND	BEFORE	
RELEASE OF THE FUNDS, THE GRANTEE	ORGANIZA	GRANTEE ORGANIZATION MUST	SIGN A DOCUMENT	UMENT	
COMMITTING THEM TO USING THE FUNDS AS		HE APPLICA	IN THE APPLICATION, WITH WRITTEN	WRITTEN	

THE CFWO GRANT COMMITTEE SENDS PERIODIC EMAILS TO THE GRANTEES ASKING FOR

332102 10-29-13

PRIOR-APPROVAL NEEDED FOR ANY CHANGES.

Rart V Supplemental Information
ANY PHOTOGRAPHS AND PROGRESS REPORTS. SOME CFWO BOARD MEMBERS WILL BE
ATTENDING EVENTS/TRAININGS THAT ARE BEING SUPPORTED BY THE FUNDS.
THE CFWO ALSO REQUIRES GRANTEES TO GIVE BOTH A FINAL REPORT ABOUT THE USE
OF THE FUNDS, TO INCLUDE BOTH A NARRATIVE AND FINANCIAL REPORT. WE WILL
FOLLOW-UP WITH ANY GRANTEE THAT DOES NOT SUBMIT THESE REPORTS.
· · · · · · · · · · · · · · · · · · ·
)

SCHEDULE 0

(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.

Open to Public This pection (1995)

OMB No 1545-0047

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

Name of the organization

CITY FEDERATION OF WOMEN'S ORGANIZATIONS, INC.

Employer identification number <u>15-0547365</u>

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
GIRLS IN TOMPKINS COUNTY, THUS MAKING A CONTRIBUTION TO THE COMMUNITY
AS A WHOLE.
FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:
EXPLANATION: OUR MISSION TO SUPPORT WOMEN AND GIRLS REMAINS THE SAME.
HOWEVER, WE HAVE CHANGED FROM OWNING AND OPERATING A BUILDING, TO USING
THE PROCEEDS OF THE SALE TO MAKE GRANTS IN OUR COMMUNITY.
FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:
EXPLANATION: THE ORGANIZATION NO LONGER MANAGES THE WOMEN'S COMMUNITY
BUILDING.
FORM 990, PART VI, SECTION B, LINE 11:
EXPLANATION: THE BOARD MEMBERS ARE MADE AWARE OF FORM 990 AND ENCOURAGED TO
REVIEW IT.
FORM 990, PART VI, SECTION B, LINE 12C:
EXPLANATION: ALL BOARD MEMBERS FILL OUT AND SIGN A CONFLICT OF INTEREST
STATEMENT WHICH ARE KEPT ON FILE.
FORM 990, PART VI, SECTION C, LINE 19:
EXPLANATION: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL
STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

rm **8868** (Rev January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No 1545-1709

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box						▶ LXJ	
If you a	are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of	this form)			
	omplete Part II unless you have already been granted						
Electron	i c filing (e-file). You can electronically file Form 8868 if y	you need a	a 3-month automatic extension of tir	ne to file (6 months for a	corporation	
required:	to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically f	ile Form 8	868 to reques	t an extension	
of time to	file any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for	Transfers	Associated W	ith Certain	
Personal	Benefit Contracts, which must be sent to the IRS in page	er format	(see instructions) For more details	on the ele	ctronic filing o	f this form,	
visit www	rs gov/efile and click on e-file for Chanties & Nonprofits	S					
Part I	Automatic 3-Month Extension of Time	e. Only s	submit original (no copies ne	eded).			
A corpora	ation required to file Form 990-T and requesting an autor	matic 6-mo	onth extension - check this box and	- complete			
Part I onl	y					▶ □	
All other	corporations (including 1120-C filers), partnerships, REM	fICs, and t	rusts must use Form 7004 to reques	st an exte	nsion of time		
to file inc	ome tax returns	,	·	Enter fil	er's identifyin	a number	
Type or							
print	CTMV FUNDINAMION OF MOMENTAL					,,,,	
Pilit	ORGANIZATIONS, INC. 15-054					7365	
File by the due date for	y the						
filing your	your 101 EAST STATE STREET, NO. 200					(55.3)	
return See instructions	Dee						
	ITHACA, NY 14850	oroigir dae	mess, see mendenene.				
	1 11111111 111 111000						
Enter the	Return code for the return that this application is for (file	a conara	to application for each return)			0 1	
Litter tino	The term code for the retain that this application is for the	a separa	te application for each return)			0 1	
Application Return Application						Return	
Is For		Code	Is For	ion			
Form 990 or Form 990-EZ		01	Form 990-T (corporation)			Code 07	
Form 990-BL		02	Form 1041-A			08	
Form 4720 (individual)		03					
Form 990-PF		1	Form 4720 (other than individual)			09	
		04	Form 5227			10	
Form 990-T (sec 401(a) or 408(a) trust)		05 06	Form 6069			11	
Form 990	-T (trust other than above)	Form 8870					
	DONNA BROCK			4	0.50		
	poks are in the care of \blacktriangleright LAP INC., 309	THIKD		NY 14	850		
Telephone No ▶ <u>(607) 272-4792</u> Fax No ▶							
	organization does not have an office or place of business					▶ ∟	
• If this i	s for a Group Return, enter the organization's four digit	1			•	oup, check this	
box 💌 L	If it is for part of the group, check this box		ch a list with the names and EINs of		ers the extens	ion is for	
1 red	, , , , , , , , , , , , , , , , , , , ,						
	AUGUST 15, 2014 , to file the exempt organization return for the organization named above. The extension						
-	or the organization's return for						
₽ļ	X calendar year 2013 or						
₽	tax year beginning	, an	d ending				
2 If th	If the tax year entered in line 1 is for less than 12 months, check reason Initial return Final return Change in accounting period						
3a If th	nis application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069, 0	enter the tentative tax, less any				
	nonrefundable credits See instructions 3a \$					0.	
	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and						
	estimated tax payments made Include any prior year overpayment allowed as a credit.				\$	0.	
	ance due. Subtract line 3b from line 3a Include your pa			- 55			
	using FFTPS (Flectronic Federal Tax Payment System).		•	3c	\$	0.	

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

LHA For

Form 8868 (Rev 1-2014)