Form 990-EZ

Return of Organization Exempt From Income Tax

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

- Do not enter Social Security numbers on this form as it may be made public.
- Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

2013

A For the 2013 calendar year, or tax year beginning Jul 1, 2013, and ending Jun 30, 2014

B C Name of organization
KINGSBRIDGE RIVERDALE VAN CORTLANDT DEVELOPMENT CORPORATION

D Employer identification number
13-3097905

E Telephone number
(718) 543-7100

F Group Exemption number

G Accounting Method: [ ] Cash [X] Accrual [ ] Other (specify)

I Website: [ ] www.krvcdcc.org

J Tax-exempt status (check only one) — [ ] 501(c)(3) [ ] 501(c) ( ) *(insert no.) [ ] 4947(a)(1) or [ ] 527

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are $200,000 or more, or if total assets (Part II, column (B) below) are $500,000 or more, file Form 990 instead of Form 990-EZ...

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

1 Contributions, grants, gifts, and similar amounts received...

2 Program service revenue including government fees and contracts...

3 Membership dues and assessments...

4 Investment income...

5a Gross amount from sale of assets other than inventory...

5b Less: cost or other basis and sales expenses...

5c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a).

6 Gaming and fundraising events...

6a Gross income from gaming (Attach Schedule G if greater than $15,000)...

6b Gross income from fundraising events (not including $ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds $15,000)...

6c Less: direct expenses from gaming and fundraising events...

6d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)

7a Gross sales of inventory, less returns and allowances...

7b Less: cost of goods sold...

7c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)

8 Other revenue (describe in Schedule O)...

9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8...

10 Grants and similar amounts paid (list in Schedule O)...

11 Benefits paid to or for members...

12 Salaries, other compensation, and employee benefits...

13 Professional fees and other payments to independent contractors...

14 Occupancy, rent, utilities, and maintenance...

15 Printing, publications, postage, and shipping...

16 Other expenses (describe in Schedule O)...

17 Total expenses. Add lines 10 through 16...

18 Excess or (deficit) for the year (Subtract line 17 from line 9)...

19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)...

20 Other changes in net assets or fund balances (explain in Schedule O)...

21 Net assets or fund balances at end of year. Combine lines 18 through 20...

BAA For Paperwork Reduction Act Notice, see the separate instructions.
### Part II. Balance Sheets (see the instructions for Part II)

<table>
<thead>
<tr>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>22 Cash, savings, and investments</td>
<td>52,709</td>
</tr>
<tr>
<td>23 Land and buildings</td>
<td>0</td>
</tr>
<tr>
<td>24 Other assets (describe in Schedule O)</td>
<td>4,335</td>
</tr>
<tr>
<td>25 Total assets</td>
<td>57,044</td>
</tr>
<tr>
<td>26 Total liabilities (describe in Schedule O)</td>
<td>0</td>
</tr>
<tr>
<td>27 Net assets or fund balances (line 26 of column (B) must agree with line 21)</td>
<td>57,044</td>
</tr>
</tbody>
</table>

### Part III. Statement of Program Service Accomplishments (see the instructions for Part III)

**Expenses**

<table>
<thead>
<tr>
<th>(Required for section 501 (c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>28 THE ORGANIZATION MISSION IS TO ENCOURAGE AND SUPPORT LOCAL INITIATIVES THROUGH SOCIAL, CULTURAL, ENVIRONMENTAL HEALTH HOUSING EDUCATIONAL AND BUSINESS ENTERPRISES</td>
</tr>
<tr>
<td>(Grants $18,424.) If this amount includes foreign grants, check here</td>
</tr>
<tr>
<td>29</td>
</tr>
<tr>
<td>(Grants $) If this amount includes foreign grants, check here</td>
</tr>
<tr>
<td>31 Other program services (describe in Schedule O)</td>
</tr>
<tr>
<td>(Grants $) If this amount includes foreign grants, check here</td>
</tr>
<tr>
<td>32 Total program service expenses (add lines 28a through 31a)</td>
</tr>
</tbody>
</table>

### Part IV. List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated — see the instructions for Part IV)

<table>
<thead>
<tr>
<th>(a) Name and Title</th>
<th>(b) Average hours per week devoted to position</th>
<th>(c) Reportable compensation (Form W-2/1099-MISC)</th>
<th>(d) Health benefits, contributions to employee benefit plans, and deferred compensation</th>
<th>(e) Estimated amount of other compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>TRACY SHEFTON, EXECUTIVE DIRECTOR</td>
<td>40.00</td>
<td>33,884</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>PETER STAND, SECRETARY</td>
<td>5.00</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>PAUL MOORE, PRESIDENT</td>
<td>5.00</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>FARRAH RUBIN, CFO</td>
<td>5.00</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>GERTRUDE CHAMBER, DIRECTOR</td>
<td>2.00</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>ROBERT M. JOHNSON, DIRECTOR</td>
<td>2.00</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in Part V

33 Did the organization engage in any significant activity not previously reported to the IRS?
   If 'Yes,' provide a detailed description of each activity in Schedule O
   Yes No
   33 X

34 Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the amended documents if they reflect a change to the organization’s name. Otherwise, explain the change on Schedule O (see instructions)
   Yes No
   34 X

35a Did the organization have unrelated business gross income of $1,000 or more from business activities (such as those reported on lines 2, 6a, and 7a, among others)?
   Yes No
   35a X

35b If 'Yes,' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an explanation in Schedule O
   Yes No
   35b X

35c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If 'Yes,' complete Schedule C, Part III.
   Yes No
   35c X

36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N.
   Yes No
   36 X

37a Enter amount of political expenditures, direct or indirect, as described in the instructions
   Yes No
   37a

37b Did the organization file Form 1120-POL for this year?
   Yes No
   37b X

38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?
   Yes No
   38a X

39 Section 501(c)(7) organizations. Enter:
   a Initiation fees and capital contributions included on line 9
   b Gross receipts, included on line 9, for public use of club facilities
   Yes No
   39a

40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:
   section 4911 ▶ section 4912 ▶ section 4955 ▶
   b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4955 excess benefit transaction during the year or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I.
   Yes No
   40b X

40c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disinterested persons during the year under sections 4912, 4955, and 4956.
   Yes No
   40c

40d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization.
   Yes No
   40d

40e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T.
   Yes No
   40e X

41 List the states with which a copy of this return is filed ▶ New York

42a The organization's books are kept in ▶ THE ORGANIZATION
   Telephone no. ▶ (718) 543-7100
   Located at ▶ 5760 BROADWAY, 2ND FL., BRONX, NY ZIP + 4 ▶ 10463
   Yes No
   42a X

b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country:
   Yes No
   42b

See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.

c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If 'Yes,' enter the name of the foreign country:
   Yes No
   42c

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here
   and enter the amount of tax-exempt interest received or accrued during the tax year.
   Yes No
   43

44a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.
   Yes No
   44a X

b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.
   Yes No
   44b

44c Did the organization receive any payments for indoor tanning services during the year?
   Yes No
   44c X

44d If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments?
   If 'No,' provide an explanation in Schedule O
   Yes No
   44d

45a Did the organization have a controlled entity of the organization within the meaning of section 512(b)(13)?
   Yes No
   45a X

b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions).
   Yes No
   45b X

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Part VI Section 501(c)(3) Organizations Only

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I. .......................................................... [ ] Yes [x] No

47 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. .......................................................... [ ] Yes [x] No

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E. .......................................................... [ ] Yes [x] No

49a Did the organization make any transfers to an exempt non-charitable related organization? .......................................................... [ ] Yes [x] No

49b If "Yes," was the related organization a section 527 organization? .......................................................... [ ] Yes [x] No

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than $100,000 of compensation from the organization. If there is none, enter 'None.'

<table>
<thead>
<tr>
<th>(a) Name and title of each employee</th>
<th>(b) Average hours per week devoted to position</th>
<th>(c) Reportable compensation (Forms W-2/1099-MISC)</th>
<th>(d) Health benefits, contributions to employee benefit plans, and deferred compensation</th>
<th>(e) Estimated amount of other compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>None</td>
<td>0.00</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
</tbody>
</table>

[0] Total number of other employees paid over $100,000. ......

51 Complete this table for the organization's five highest compensated independent contractors who each received more than $100,000 of compensation from the organization. If there is none, enter 'None.'

<table>
<thead>
<tr>
<th>(a) Name and business address of each independent contractor</th>
<th>(b) Type of service</th>
<th>(c) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>NONE</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

[0] Total number of other independent contractors each receiving over $100,000. ..........................................................

52 Did the organization complete Schedule A? Note. All section 501(c)(3) organizations and 4947(a)(3) nonexempt charitable trusts must attach a completed Schedule A. .......................................................... [ ] Yes [x] No

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

Signature of officer

TRACY SHELTON

Type or print name and title

EXECUTIVE DIRECTOR

Print/Type preparer's name

SANJAY SINGLA, CPA

Preparer's signature

SANJAY SINGLA, CPA

Date

01/02/15

Preparer's EIN

P01328564

Paid Preparer Use Only

Firm's name ➔ KBL, LLP

Firm's address ➔ 114 W 47th St FL 19

NEW YORK NY 10036

Firm's EIN ➔ 03-0525474

Phone no. (212) 785-9700

May the IRS discuss this return with the preparer shown above? See instructions. .......................................................... [ ] Yes [x] No

TEA0812 11/27/13
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.

Name of the organization

KINGSBRIDGE RIVERDALE VAN CORTLANDT DEVELOPMENT CORPORATION

Employer identification number

13-3097905

Part II Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i).

2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)

3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).

4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital’s name, city, and state:

5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)

6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).

7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vii). (Complete Part II.)

8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)

9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its 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 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.

a Type I  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).

f If the organization received a written determination from the IRS that 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?

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization.

(ii) A family member of a person described in (i) above.

(iii) A 35% controlled entity of a person described in (i) or (ii) above.

h Provide the following information about the supported organization(s).

<table>
<thead>
<tr>
<th>Type of organization (described on lines 1-9 above or IRC section (see instructions))</th>
<th>Is the organization in column (i) listed in your governing document?</th>
<th>Did you notify the organization in column (i) of your support?</th>
<th>Is the organization in column (i) organized in the U.S.?</th>
<th>Amount of monetary support</th>
</tr>
</thead>
<tbody>
<tr>
<td>(A)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(B)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(C)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(D)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(E)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2009</th>
<th>(b) 2010</th>
<th>(c) 2011</th>
<th>(d) 2012</th>
<th>(e) 2013</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any unusual grants.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Total. Add lines 1 through 3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Public support. Subtract line 5 from line 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2009</th>
<th>(b) 2010</th>
<th>(c) 2011</th>
<th>(d) 2012</th>
<th>(e) 2013</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 Amounts from line 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Total support. Add lines 7 through 10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Gross receipts from related activities, etc (see instructions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>12</td>
</tr>
<tr>
<td>13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th></th>
<th>(a) 2009</th>
<th>(b) 2010</th>
<th>(c) 2011</th>
<th>(d) 2012</th>
<th>(e) 2013</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15 Public support percentage from 2012 Schedule A, Part II, line 14</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16a 33-1/3% support test — 2013. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b 33-1/3% support test — 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17a 10%-facts-and-circumstances test — 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b 10%-facts-and-circumstances test — 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal yr beginning in)</th>
<th>(a) 2009</th>
<th>(b) 2010</th>
<th>(c) 2011</th>
<th>(d) 2012</th>
<th>(e) 2013</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td>364,341</td>
<td>92,834</td>
<td>94,449</td>
<td>196,833</td>
<td>86,775</td>
<td>835,232</td>
</tr>
<tr>
<td>2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization’s tax-exempt purpose</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Total, Add lines 1 through 5</td>
<td>364,341</td>
<td>92,834</td>
<td>94,449</td>
<td>196,833</td>
<td>86,775</td>
<td>835,232</td>
</tr>
<tr>
<td>7a Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b 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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7c Add lines 7a and 7b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Public support (Subtract line 7c from line 6)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal yr beginning in)</th>
<th>(a) 2009</th>
<th>(b) 2010</th>
<th>(c) 2011</th>
<th>(d) 2012</th>
<th>(e) 2013</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td>364,341</td>
<td>92,834</td>
<td>94,449</td>
<td>196,833</td>
<td>86,775</td>
<td>835,232</td>
</tr>
<tr>
<td>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10c Add lines 10a and 10b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Total Support (Add lines 9, 10 and 11)</td>
<td>364,341</td>
<td>92,834</td>
<td>94,449</td>
<td>196,833</td>
<td>86,779</td>
<td>835,236</td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th>(f) Total</th>
<th>15 100.00 %</th>
</tr>
</thead>
</table>

### Section D. Computation of Investment Income Percentage

| Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f)) | 17 0.00 % |
| Investment income percentage from 2012 Schedule A, Part III, line 17 | 18 0.00 % |
| 19a 33-1/3% support tests — 2013. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization | 19 X |
| 19b 33-1/3% support tests — 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization | 19 |
| 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. | 20 |
Part IV. Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See Instructions).
Schedule of Contributors

Name of the organization: KINGSBRIDGE RIVERDALE VAN CORTLANDT DEVELOPMENT CORPORATION
Employer identification number: 13-3097905

Organization type (check one):

- Form 990 or 990-EZ
  - 501(c)(3) exempt private foundation
  - 4947(a)(1) nonexempt charitable trust treated as a private foundation
  - 527 political organization

- Form 990-PF
  - 501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule
- X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, $5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules
- X For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) $5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- X For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- X For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of $5,000 or more during the year.

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

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ, or 990-PF.
<table>
<thead>
<tr>
<th>(a) Number</th>
<th>(b) Name, address, and ZIP + 4</th>
<th>(c) Total contributions</th>
<th>(d) Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Dormitory Authority of The State of New York 515 Broadway Albany, NY 12207</td>
<td>$7,699</td>
<td>Person X Payroll Noncash</td>
</tr>
<tr>
<td>2</td>
<td>NYC Department of Small Business Services 110 William Street, 8th Floor New York, NY 10038</td>
<td>$10,725</td>
<td>Person X Payroll Noncash</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
</tbody>
</table>
KINGSBURG RIVERDALE VAN CORTLANDT DEVELOPMENT CORPORATION

13-3097905
Schedule O (Form 990 or 990-EZ), Supplemental Information to Form 990 or 990-EZ
Form 990-EZ, Page 1, Line 16 Other Expenses

Other expenses (describe in Schedule O)

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROGRAM EXPENSES</td>
<td>43,307.</td>
</tr>
<tr>
<td>SUPPLIES</td>
<td>2,747.</td>
</tr>
<tr>
<td>TELEPHONE</td>
<td>2,110.</td>
</tr>
<tr>
<td>EQUIPMENT RENTAL</td>
<td>422.</td>
</tr>
<tr>
<td>INSURANCE</td>
<td>2,676.</td>
</tr>
<tr>
<td>BANK CHARGES</td>
<td>822.</td>
</tr>
<tr>
<td>MISCELLANEOUS</td>
<td>95.</td>
</tr>
<tr>
<td>PAYROLL PROCESSING FEES</td>
<td>1,581.</td>
</tr>
<tr>
<td>DUES AND PERMITS</td>
<td>128.</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>53,888.</strong></td>
</tr>
</tbody>
</table>

Schedule O (Form 990 or 990-EZ), Supplemental Information to Form 990 or 990-EZ
Form 990-EZ, Page 1, Part II, Line 24

<table>
<thead>
<tr>
<th>Line 24 - Other Assets:</th>
<th>Beginning of Year</th>
<th>End of Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>INVENTORY</td>
<td>2,335.</td>
<td>0.</td>
</tr>
<tr>
<td>SECURITY DEPOSITS</td>
<td>2,000.</td>
<td>2,000.</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>4,335.</strong></td>
<td><strong>2,000.</strong></td>
</tr>
</tbody>
</table>

Schedule O (Form 990 or 990-EZ), Supplemental Information to Form 990 or 990-EZ
Form 990-EZ, Page 1, Part II, Line 26

<table>
<thead>
<tr>
<th>Line 26 - Total Liabilities:</th>
<th>Beginning of Year</th>
<th>End of Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACCOUNTS PAYABLE</td>
<td>0.</td>
<td>1,717.</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>0.</strong></td>
<td><strong>1,717.</strong></td>
</tr>
</tbody>
</table>