

Form **990**  
Department of the Treasury  
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)

Do not enter social security numbers on this form as it may be made public.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047  
**2019**  
Open to Public Inspection

**A For the 2019 calendar year, or tax year beginning 04-01-2019, and ending 03-31-2020**

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return/terminated  
 Amended return  
 Application pending

**C** Name of organization  
CENTRAL NEW YORK COMMUNITY FOUNDATION INC

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
431 E FAYETTE STREET NO 100

City or town, state or province, country, and ZIP or foreign postal code  
SYRACUSE, NY 13202

**D** Employer identification number  
15-0626910

**E** Telephone number  
(315) 422-9538

**F** Name and address of principal officer:  
PETER A DUNN  
431 E FAYETTE STREET NO 100  
SYRACUSE, NY 13202

**G** Gross receipts \$ 50,457,982

**H(a)** Is this a group return for subordinates?  Yes  No

**H(b)** Are all subordinates included?  Yes  No  
If "No," attach a list. (see instructions)

**H(c)** Group exemption number ▶

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) ◀ (insert no.)  4947(a)(1) or  527

**J** Website: ▶ WWW.CNYCF.ORG

**K** Form of organization:  Corporation  Trust  Association  Other ▶

**L** Year of formation: 1927 **M** State of legal domicile: NY

**Part I Summary**

**1** Briefly describe the organization's mission or most significant activities:  
THE COMMUNITY FOUNDATION'S MISSION IS TO FOSTER A THRIVING CENTRAL NEW YORK COMMUNITY, INSPIRE GREATER GIVING, CELEBRATE LEGACY AND STEWARD CHARITABLE RESOURCES FOR TODAY AND TOMORROW.

**2** Check this box  if the organization discontinued its operations or disposed of more than 25% of its net assets.

<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	21
<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	21
<b>5</b> Total number of individuals employed in calendar year 2019 (Part V, line 2a)	<b>5</b>	29
<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	125
<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0
<b>7b</b> Net unrelated business taxable income from Form 990-T, line 39	<b>7b</b>	1,271

	Prior Year	Current Year
<b>8</b> Contributions and grants (Part VIII, line 1h)	13,565,024	23,682,559
<b>9</b> Program service revenue (Part VIII, line 2g)	0	0
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	12,044,504	4,961,856
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	287,896	331,508
<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	25,897,424	28,975,923
<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3)	12,411,364	15,168,953
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0	0
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	2,052,774	2,371,214
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	0	0
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 941,588		
<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,366,345	1,326,451
<b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	15,830,483	18,866,618
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	10,066,941	10,109,305

	Beginning of Current Year	End of Year
<b>20</b> Total assets (Part X, line 16)	279,278,951	258,034,360
<b>21</b> Total liabilities (Part X, line 26)	23,559,155	22,003,827
<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	255,719,796	236,030,533

**Part II Signature Block**

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

**Sign Here**

\*\*\*\*\*  
Signature of officer  
Date 2020-10-22

PETER A DUNN PRESIDENT & CEO  
Type or print name and title

**Paid Preparer Use Only**

Print/Type preparer's name Preparer's signature Date

Check  if self-employed PTIN P00956232

Firm's name ▶ BONADIO & CO LLP Firm's EIN ▶ 16-1131146

Firm's address ▶ 432 NORTH FRANKLIN STREET SYRACUSE, NY 13204 Phone no. (315) 422-7109

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

**Part III Statement of Program Service Accomplishments**

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

**1** Briefly describe the organization's mission:

THE COMMUNITY FOUNDATION'S MISSION IS TO FOSTER A THRIVING CENTRAL NEW YORK COMMUNITY, INSPIRE GREATER GIVING, CELEBRATE LEGACY AND STEWARD CHARITABLE RESOURCES FOR TODAY AND TOMORROW.

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No  
If "Yes," describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No  
If "Yes," describe these changes on Schedule O.

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

**4a** (Code: ) (Expenses \$ 5,685,905 including grants of \$ 5,215,951 ) (Revenue \$ 211,040 )  
See Additional Data

**4b** (Code: ) (Expenses \$ 8,198,379 including grants of \$ 7,640,335 ) (Revenue \$ 23,056 )  
See Additional Data

**4c** (Code: ) (Expenses \$ 1,991,684 including grants of \$ 1,539,112 ) (Revenue \$ 0 )  
See Additional Data

(Code: ) (Expenses \$ 982,840 including grants of \$ 773,555 ) (Revenue \$ 272 )  
DESIGNATED FUNDS DESIGNATED FUNDS ARE PERSONALIZED BY DONORS TO SUPPORT THE SPECIFIC ORGANIZATIONS THEY CARE ABOUT. THESE FUNDS PROVIDE LONG-TERM, CONSISTENT SUPPORT TO ONE OR MORE CHARITIES SELECTED BY THE DONOR. GRANTS FROM THESE FUNDS REPRESENT A PAYOUT OF THE COMMUNITY FOUNDATION'S BOARD-APPROVED SPENDING POLICY RATE FOR PERMANENT FUNDS.

**4d** Other program services (Describe in Schedule O.)  
(Expenses \$ 982,840 including grants of \$ 773,555 ) (Revenue \$ 272 )

**4e Total program service expenses** ▶ 16,858,808

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, and Yes/No response columns. Rows include questions 1 through 21 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 main columns: Question/Description, Yes, No. Rows 22-38 covering various organizational requirements and reporting obligations.

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 [ ]

Table with 3 main columns: Question/Description, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and gaming winnings.

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

Form 990 (2019) Part V Statements Regarding Other IRS Filings and Tax Compliance (continued). Includes sections 2a through 16 with various questions and sub-questions regarding employee reporting, tax returns, foreign accounts, prohibited transactions, and charitable contributions.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (21), 1b (21), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 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 Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: KIM SADOWSKI 431 EAST FAYETTE STREET NO 100 SYRACUSE, NY 13202 (315) 422-9538







Part VIII Statement of Revenue

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

Table with 5 columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512 - 514. Rows include 1a-1g for Contributions, Gifts, Grants and Other Similar Amounts, and 1h Total.

Table for Program Service Revenue with 6 rows (2a-f) and 5 columns (A-D). Includes Business Code column and 2g Total.

Table for Other Revenue with 12 rows (3-12) and 5 columns (A-D). Includes sub-rows for rental income (6a-c), securities (7a-c), fundraising (8a-c), gaming (9a-c), and inventory (10a-c). Includes 11a-11d for Miscellaneous Revenue and 12 Total revenue.

**Part IX Statement of Functional Expenses**

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

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

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . . .	15,168,953	15,168,953		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . .				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16. . . . .				
<b>4</b> Benefits paid to or for members . . . . .				
<b>5</b> Compensation of current officers, directors, trustees, and key employees . . . . .	451,965	145,439	197,446	109,080
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .				
<b>7</b> Other salaries and wages . . . . .	1,538,293	701,559	441,676	395,058
<b>8</b> Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) . . . . .	121,226	56,816	36,570	27,840
<b>9</b> Other employee benefits . . . . .	126,522	55,250	42,828	28,444
<b>10</b> Payroll taxes . . . . .	133,208	57,311	42,297	33,600
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management . . . . .				
<b>b</b> Legal . . . . .	11,151		11,151	
<b>c</b> Accounting . . . . .	54,356	6,111	43,205	5,040
<b>d</b> Lobbying . . . . .				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees . . . . .				
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	146,716	146,716		
<b>12</b> Advertising and promotion . . . . .				
<b>13</b> Office expenses . . . . .	111,034	35,965	28,466	46,603
<b>14</b> Information technology . . . . .	75,575	33,038	24,839	17,698
<b>15</b> Royalties . . . . .				
<b>16</b> Occupancy . . . . .	172,064	100,534	43,888	27,642
<b>17</b> Travel . . . . .				
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
<b>19</b> Conferences, conventions, and meetings . . . . .	164,441	67,638	38,479	58,324
<b>20</b> Interest . . . . .	99,522	61,942	22,841	14,739
<b>21</b> Payments to affiliates . . . . .				
<b>22</b> Depreciation, depletion, and amortization . . . . .	257,111	160,023	59,009	38,079
<b>23</b> Insurance . . . . .	24,897	15,496	5,714	3,687
<b>24</b> Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> DEVELOPMENT & MARKETING	129,910	1,966	8,413	119,531
<b>b</b> DUES	46,289	18,366	14,872	13,051
<b>c</b> PROGRAM EXPENSES	18,779	18,779		
<b>d</b> EQUIPMENT RENTAL AND MA	10,231	4,464	3,372	2,395
<b>e</b> All other expenses	4,375	2,442	1,156	777
<b>25</b> Total functional expenses. Add lines 1 through 24e	18,866,618	16,858,808	1,066,222	941,588
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	5,258	<b>1</b>	200,383
	<b>2</b> Savings and temporary cash investments . . . . .	2,329,411	<b>2</b>	2,533,143
	<b>3</b> Pledges and grants receivable, net . . . . .	1,465,696	<b>3</b>	970,846
	<b>4</b> Accounts receivable, net . . . . .	3,750,981	<b>4</b>	5,250,435
	<b>5</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . .		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) . . . . .		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges . . . . .	141,140	<b>9</b>	82,932
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	6,993,116		
	<b>b</b> Less: accumulated depreciation	2,701,622		
	<b>11</b> Investments—publicly traded securities . . . . .	195,757,681	<b>11</b>	189,050,181
	<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .	65,868,900	<b>12</b>	50,910,934
	<b>13</b> Investments—program-related. See Part IV, line 11 . . . . .	250,000	<b>13</b>	250,000
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 . . . . .	5,290,520	<b>15</b>	4,494,012
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	279,278,951	<b>16</b>	258,034,360	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	127,560	<b>17</b>	175,730
	<b>18</b> Grants payable . . . . .	3,286,305	<b>18</b>	3,682,768
	<b>19</b> Deferred revenue . . . . .	355,485	<b>19</b>	328,081
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D	200	<b>21</b>	0
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . .		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .	3,150,000	<b>23</b>	2,878,574
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
	<b>25</b> 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	16,639,605	<b>25</b>	14,938,674
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .	23,559,155	<b>26</b>	22,003,827
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions . . . . .	187,433,273	<b>27</b>	175,808,192
	<b>28</b> Net assets with donor restrictions . . . . .	68,286,523	<b>28</b>	60,222,341
	<b>Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds . . . . .		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds		<b>31</b>	
<b>32</b> Total net assets or fund balances . . . . .	255,719,796	<b>32</b>	236,030,533	
<b>33</b> Total liabilities and net assets/fund balances . . . . .	279,278,951	<b>33</b>	258,034,360	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	28,975,923
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	18,866,618
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	10,109,305
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	255,719,796
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	-29,686,023
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	-112,545
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	236,030,533

**Part XII Financial Statements and Reporting**

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

**1** Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

**2a** Were the organization's financial statements compiled or reviewed by an independent accountant?  
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis

**b** Were the organization's financial statements audited by an independent accountant?  
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis

**c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

**3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
<b>2a</b>		No
<b>2b</b>	Yes	
<b>2c</b>	Yes	
<b>3a</b>		No
<b>3b</b>		

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 15-0626910

**Name:** CENTRAL NEW YORK COMMUNITY FOUNDATION  
INC

Form 990 (2019)

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### Form 990, Part III, Line 4a:

BROADLY RESPONSIVE COMMUNITY GRANTMAKING AND SPECIAL INITIATIVES THE COMMUNITY FOUNDATION'S COLLECTIVE EFFORTS STRIVE TO SUPPORT THE HEALTH, HAPPINESS AND PROSPERITY OF LOCAL RESIDENTS, CREATE OPPORTUNITIES FOR EVERYONE AND AMPLIFY ALL THAT THE REGION HAS TO OFFER. ITS GRANT PROGRAMS SEEK TO BRING ABOUT POSITIVE CHANGE AND IMPACT WHILE HONORING DIVERSITY AND BUILDING INCLUSION WITHIN AND ACROSS THE REGION. THE LARGEST FUNDING OPPORTUNITY IS ITS COMMUNITY GRANT PROGRAM, WHICH ACCEPTS APPLICATIONS FROM TAX-EXEMPT, NONPROFIT ORGANIZATIONS IN ONONDAGA AND MADISON COUNTIES LOOKING TO FUND INNOVATIVE PROJECTS. IN ADDITION TO GRANT DOLLARS, SPECIAL INITIATIVES ARE DESIGNED TO STRENGTHEN LOCAL NONPROFITS AND ADDRESS THE REGION'S MOST PRESSING CHALLENGES.

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**Form 990, Part III, Line 4b:**

DONOR-ADVISED FUND DISTRIBUTIONS DONOR-ADVISED FUNDS ARE ESTABLISHED BY INDIVIDUALS, FAMILIES OR BUSINESSES THAT CHOOSE TO BE ACTIVELY INVOLVED IN THE GRANTMAKING PROCESS. THEY ARE CONSIDERED A CONVENIENT WAY TO MANAGE A DONOR'S CHARITABLE GIVING BY ALLOWING THEM TO ADDRESS A WIDE VARIETY OF ISSUES AND FULFILL THEIR CHARITABLE INTERESTS AS THEY EVOLVE OVER TIME.

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**Form 990, Part III, Line 4c:**

SCHOLARSHIPSSCHOLARSHIP FUNDS ARE ESTABLISHED BY DONORS WHO WISH TO HELP STUDENTS PURSUE THEIR EDUCATIONAL DREAMS. THE COMMUNITY FOUNDATION IS THE HOME TO SYRACUSE'S SAY YES TO EDUCATION ENDOWMENT. SAY YES GUARANTEES A PATH TO COLLEGE FOR STUDENTS OF THE SYRACUSE CITY SCHOOL DISTRICT AND PROVIDES SUPPORT TO STUDENTS AND THEIR FAMILIES THAT ENHANCES THEIR OPPORTUNITIES FOR ACADEMIC ACHIEVEMENT.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
J ANDREW BREUER ..... PAST CHAIR	1.00 .....	X						0	0	0
DANIEL J FISHER ..... VICE CHAIR	1.00 .....	X		X				0	0	0
CASEY CRABILL ..... CHAIR	1.00 .....	X		X				0	0	0
HON JULIE A CECILE ..... MEMBER	1.00 .....	X						0	0	0
CARAGH D FAHY ..... TREASURER	1.00 .....	X		X				0	0	0
KATE FELDMEIER FRANZ ..... MEMBER	1.00 .....	X						0	0	0
MARK A FULLER CPA ..... MEMBER	1.00 .....	X						0	0	0
LEE M GATTA ..... MEMBER	1.00 .....	X						0	0	0
CAROLYN D GERAKOPOULOS ..... MEMBER	1.00 .....	X						0	0	0
GRACE B GHEZZI CPA ..... MEMBER	1.00 .....	X						0	0	0



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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DAVID HOLSTEIN ESQ ..... COMPLIANCE OFFICER	1.00 .....	X		X				0	0	0
DAREN C JAIME ..... MEMBER	1.00 .....	X						0	0	0
LARRY R LEATHERMAN ..... MEMBER	1.00 .....	X						0	0	0
MICHAEL F MEATH ..... MEMBER	1.00 .....	X						0	0	0
TIMOTHY PENIX ..... MEMBER	1.00 .....	X						0	0	0
J DANIEL PLUFF ..... MEMBER	1.00 .....	X						0	0	0
DR EMAD RAHIM ..... MEMBER	1.00 .....	X						0	0	0
M JACK RUDNICK ESQ ..... MEMBER	1.00 .....	X						0	0	0
KARIN SLOAN DELANEY ESQ ..... MEMBER	1.00 .....	X						0	0	0
GWEN WEBBER-MCLEOD ..... MEMBER	1.00 .....	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MARYANN M WINTERS CPA ..... MEMBER	1.00 .....	X						0	0	0
STEPHEN D FOURNIER ..... MEMBER	1.00 .....	X						0	0	0
BEA GONZALEZ ..... MEMBER	1.00 .....	X						0	0	0
REBECCA BRONFEIN RAPHAEL ..... MEMBER	1.00 .....	X						0	0	0
PETER A DUNN ..... PRESIDENT & CEO	40.00 .....			X				260,046	0	22,292
KIMBERLY SADOWSKI ..... SR. VICE PRESIDENT & CFO	40.00 .....			X				151,611	0	15,266
FRANK RIDZI ..... VP, COMMUNITY INVESTMENT	40.00 .....					X		122,441	0	12,294
KATRINA CROCKER ..... VP, COMMUNICATIONS	40.00 .....					X		106,991	0	20,108
THOMAS GRIFFITH ..... VP, DEVELOPMENT	40.00 .....					X		119,757	0	12,351

**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.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047  
**2019**  
**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

**Name of the organization**  
CENTRAL NEW YORK COMMUNITY FOUNDATION  
INC

**Employer identification number**  
15-0626910

**Part I 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 12, 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 (Form 990 or 990-EZ).)
- 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)(vi).** (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9  An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10  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.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12  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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations . . . . . \_\_\_\_\_
  - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

**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 failed to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>1</b>	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	22,975,931	23,394,810	25,170,988	13,565,024	23,682,559	108,789,312
<b>2</b>	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . .						
<b>3</b>	The value of services or facilities furnished by a governmental unit to the organization without charge..						
<b>4</b>	<b>Total.</b> Add lines 1 through 3	22,975,931	23,394,810	25,170,988	13,565,024	23,682,559	108,789,312
<b>5</b>	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). . .						
<b>6</b>	<b>Public support.</b> Subtract line 5 from line 4.						108,789,312

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>7</b>	Amounts from line 4. . .	22,975,931	23,394,810	25,170,988	13,565,024	23,682,559	108,789,312
<b>8</b>	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . .	2,950,954	4,415,410	7,329,400	12,044,504	4,961,856	31,702,124
<b>9</b>	Net income from unrelated business activities, whether or not the business is regularly carried on . . . .						
<b>10</b>	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . .	200,439	255,336	271,353	287,896	137,228	1,152,252
<b>11</b>	<b>Total support.</b> Add lines 7 through 10						141,643,688

**12** Gross receipts from related activities, etc. (see instructions) . . . . . **12**

**13** **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . .

**Section C. Computation of Public Support Percentage**

<b>14</b>	Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) . . . . .	<b>14</b>	76.800 %
<b>15</b>	Public support percentage for 2018 Schedule A, Part II, line 14 . . . . .	<b>15</b>	76.630 %

**16a** **33 1/3% support test—2019.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . .

**b** **33 1/3% support test—2018.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . .

**17a** **10%-facts-and-circumstances test—2019.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .

**b** **10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .

**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 . . . . .

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>1</b>	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
<b>2</b>	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						
<b>3</b>	Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .						
<b>4</b>	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . .						
<b>5</b>	The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6</b>	<b>Total.</b> Add lines 1 through 5						
<b>7a</b>	Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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.						
<b>c</b>	Add lines 7a and 7b. . . . .						
<b>8</b>	<b>Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
<b>9</b>	Amounts from line 6. . . . .						
<b>10a</b>	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . .						
<b>b</b>	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
<b>c</b>	Add lines 10a and 10b.						
<b>11</b>	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
<b>12</b>	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .						
<b>13</b>	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .						

**14 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here.** . . . . .

**Section C. Computation of Public Support Percentage**

<b>15</b>	Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f)) . . . . .	<b>15</b>	
<b>16</b>	Public support percentage from 2018 Schedule A, Part III, line 15 . . . . .	<b>16</b>	

**Section D. Computation of Investment Income Percentage**

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

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

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

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

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

		Yes	No
<b>1</b>	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
	<b>1</b>		
<b>2</b>	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
	<b>2</b>		
<b>3a</b>	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
	<b>3a</b>		
<b>b</b>	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
	<b>3b</b>		
<b>c</b>	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
	<b>3c</b>		
<b>4a</b>	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
	<b>4a</b>		
<b>b</b>	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
	<b>4b</b>		
<b>c</b>	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
	<b>4c</b>		
<b>5a</b>	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
	<b>5a</b>		
<b>b</b>	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
	<b>5b</b>		
<b>c</b>	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
	<b>5c</b>		
<b>6</b>	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
	<b>6</b>		
<b>7</b>	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
	<b>7</b>		
<b>8</b>	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
	<b>8</b>		
<b>9a</b>	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
	<b>9a</b>		
<b>b</b>	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
	<b>9b</b>		
<b>c</b>	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
	<b>9c</b>		
<b>10a</b>	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
	<b>10a</b>		
<b>b</b>	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).</i>		
	<b>10b</b>		

**Part IV Supporting Organizations** (continued)

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

**Section B. Type I Supporting Organizations**

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

**Section C. Type II Supporting Organizations**

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

**Section D. All Type III Supporting Organizations**

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

**Section E. Type III Functionally-Integrated Supporting Organizations**

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

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

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

<b>Section A - Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Net short-term capital gain	<b>1</b>	
<b>2</b>	Recoveries of prior-year distributions	<b>2</b>	
<b>3</b>	Other gross income (see instructions)	<b>3</b>	
<b>4</b>	Add lines 1 through 3	<b>4</b>	
<b>5</b>	Depreciation and depletion	<b>5</b>	
<b>6</b>	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	<b>6</b>	
<b>7</b>	Other expenses (see instructions)	<b>7</b>	
<b>8</b>	<b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	<b>8</b>	
<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	<b>1</b>	
<b>a</b>	Average monthly value of securities	<b>1a</b>	
<b>b</b>	Average monthly cash balances	<b>1b</b>	
<b>c</b>	Fair market value of other non-exempt-use assets	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>	
<b>e</b>	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI):		
<b>2</b>	Acquisition indebtedness applicable to non-exempt use assets	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	
<b>4</b>	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	
<b>5</b>	Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>	
<b>6</b>	Multiply line 5 by .035	<b>6</b>	
<b>7</b>	Recoveries of prior-year distributions	<b>7</b>	
<b>8</b>	<b>Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>	
<b>Section C - Distributable Amount</b>			Current Year
<b>1</b>	Adjusted net income for prior year (from Section A, line 8, Column A)	<b>1</b>	
<b>2</b>	Enter 85% of line 1	<b>2</b>	
<b>3</b>	Minimum asset amount for prior year (from Section B, line 8, Column A)	<b>3</b>	
<b>4</b>	Enter greater of line 2 or line 3	<b>4</b>	
<b>5</b>	Income tax imposed in prior year	<b>5</b>	
<b>6</b>	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	<b>6</b>	
<b>7</b>	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		



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

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

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

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 15-0626910

**Name:** CENTRAL NEW YORK COMMUNITY FOUNDATION  
INC

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

**Facts And Circumstances Test**

**SCHEDULE C**  
(Form 990 or 990-EZ)  
  
Department of the Treasury  
Internal Revenue Service

**Political Campaign and Lobbying Activities**  
**For Organizations Exempt From Income Tax Under section 501(c) and section 527**  
**▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.**  
**▶Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047  
**2019**  
**Open to Public Inspection**

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

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

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

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

**If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then**

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of the organization CENTRAL NEW YORK COMMUNITY FOUNDATION INC	<b>Employer identification number</b>  15-0626910
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

**1** Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")

**2** Political campaign activity expenditures (see instructions) ..... ▶ \$ \_\_\_\_\_

**3** Volunteer hours for political campaign activities (see instructions) .....

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

**1** Enter the amount of any excise tax incurred by the organization under section 4955 ..... ▶ \$ \_\_\_\_\_

**2** Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ▶ \$ \_\_\_\_\_

**3** If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .....  Yes  No

**4a** Was a correction made? .....  Yes  No

**b** If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

**1** Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_

**2** Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_

**3** Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b..... ▶ \$ \_\_\_\_\_

**4** Did the filing organization file **Form 1120-POL** for this year? .....  Yes  No

**5** Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
1				
2				
3				
4				
5				
6				



**Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

		(a)		(b)
		Yes	No	Amount
<b>1</b>	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b>	Volunteers? .....		No	
<b>b</b>	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? .....		No	
<b>c</b>	Media advertisements? .....		No	
<b>d</b>	Mailings to members, legislators, or the public? .....		No	
<b>e</b>	Publications, or published or broadcast statements? .....		No	
<b>f</b>	Grants to other organizations for lobbying purposes? .....		No	
<b>g</b>	Direct contact with legislators, their staffs, government officials, or a legislative body? .....		No	
<b>h</b>	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....		No	
<b>i</b>	Other activities? .....	Yes		32,500
<b>j</b>	Total. Add lines 1c through 1i .....			32,500
<b>2a</b>	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .....		No	
<b>b</b>	If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b>	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b>	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? .....			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

		Yes	No
<b>1</b>	Were substantially all (90% or more) dues received nondeductible by members? .....	<b>1</b>	
<b>2</b>	Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	<b>2</b>	
<b>3</b>	Did the organization agree to carry over lobbying and political expenditures from the prior year? .....	<b>3</b>	

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."**

<b>1</b>	Dues, assessments and similar amounts from members .....	<b>1</b>	
<b>2</b>	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b>	Current year .....	<b>2a</b>	
<b>b</b>	Carryover from last year .....	<b>2b</b>	
<b>c</b>	Total .....	<b>2c</b>	
<b>3</b>	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	<b>3</b>	
<b>4</b>	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? .....	<b>4</b>	
<b>5</b>	Taxable amount of lobbying and political expenditures (see instructions) .....	<b>5</b>	

**Part IV Supplemental Information**

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
PART II-B, LINE 1:	DURING THE YEAR, THE FOUNDATION PAID \$7,500 TO VAN SCOYOC ASSOCIATES TO SUPPORT THE COMMUNITY FOUNDATION AWARENESS INITIATIVE INVOLVING FEDERAL LEVEL ISSUES AFFECTING 501(C) 3 TAX EXEMPT ORGANIZATIONS AND CHARITABLE GIVING, AND \$25,000 TO THE CHILDREN'S DEFENSE FUND IN SUPPORT OF THE STATEWIDE LEAD FREE NEW YORK CAMPAIGN.

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

Supplemental Financial Statements

OMB No. 1545-0047 2019 Open to Public Inspection

Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization CENTRAL NEW YORK COMMUNITY FOUNDATION INC

Employer identification number 15-0626910

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include Total number at end of year, Aggregate value of contributions to, Aggregate value of grants from, and Aggregate value at end of year.

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

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

1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use, Protection of natural habitat, Preservation of open space, Preservation of an historically important land area, Preservation of a certified historic structure.

Table for conservation easements. Rows include Total number of conservation easements, Total acreage restricted by conservation easements, Number of conservation easements on a certified historic structure included in (a), and Number of conservation easements included in (c) acquired after 7/25/06.

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year
4 Number of states where property subject to conservation easement is located
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
(ii) Revenue included on Form 990, Part VIII, line 1
(ii) Assets included in Form 990, Part X
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
a Revenue included on Form 990, Part VIII, line 1
b Assets included in Form 990, Part X

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a**  Public exhibition
  - b**  Scholarly research
  - c**  Preservation for future generations
  - d**  Loan or exchange programs
  - e**  Other .....
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . .  Yes  No

**Part IV Escrow and Custodial Arrangements.**

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

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? . . . . .  Yes  No

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

	Amount
<b>1c</b> Beginning balance . . . . .	1,681,327
<b>1d</b> Additions during the year . . . . .	91,383
<b>1e</b> Distributions during the year . . . . .	105,662
<b>1f</b> Ending balance . . . . .	1,667,048

- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . .  Yes  No

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

**Part V Endowment Funds.**

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance . . . . .	68,725,553	68,293,911	63,758,795	59,178,505	64,741,993
<b>b</b> Contributions . . . . .	347,962	980,370	258,532	1,383,161	792,666
<b>c</b> Net investment earnings, gains, and losses	-6,330,777	1,443,743	7,054,632	7,365,129	-2,331,906
<b>d</b> Grants or scholarships . . . . .	3,058,824	865,203	1,605,552	2,775,579	2,542,508
<b>e</b> Other expenditures for facilities and programs . . . . .	1,375,724	1,127,268	1,172,496	1,392,421	1,481,740
<b>f</b> Administrative expenses . . . . .					
<b>g</b> End of year balance . . . . .	58,308,190	68,725,553	68,293,911	63,758,795	59,178,505

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

- a** Board designated or quasi-endowment ▶ 82.320 %
- b** Permanent endowment ▶ 12.490 %
- c** Temporarily restricted endowment ▶ 5.190 %

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

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

- (i)** unrelated organizations . . . . .
- (ii)** related organizations . . . . .

	Yes	No
<b>3a(i)</b>		No
<b>3a(ii)</b>		No
<b>3b</b>		

**b** If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? . . . . .

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

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land . . . . .		253,775		253,775
<b>b</b> Buildings . . . . .		5,890,993	1,964,664	3,926,329
<b>c</b> Leasehold improvements				
<b>d</b> Equipment . . . . .				
<b>e</b> Other . . . . .		848,348	736,958	111,390
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				4,291,494

**Part VII Investments—Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely-held equity interests . . . . .		
(3) Other _____		
(A) COMMON/COLLECTIVE TRUSTS	572,966	F
(B) LIMITED PARTNERSHIPS	14,635,617	F
(C) HEDGE FUNDS AND FUNDS OF FUNDS	35,702,351	F
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.)	50,910,934	

**Part VIII Investments—Program Related.**

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

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

**Part IX Other Assets.**

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

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

**Part X Other Liabilities.**

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

(a) Description of liability	(b) Book value
1. (1) Federal income taxes	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 25.)	14,938,674

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII



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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	-822,645
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	-29,686,023
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>	-112,545
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	-29,798,568
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	28,975,923
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	0
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) . . . . .	<b>5</b>	28,975,923

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

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

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	18,866,618
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	0
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	18,866,618
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	0
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.) . . . . .	<b>5</b>	18,866,618

**Part XIII Supplemental Information**

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

Return Reference	Explanation
See Additional Data Table	

**Part XIII** Supplemental Information *(continued)*

Return Reference	Explanation

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 15-0626910

**Name:** CENTRAL NEW YORK COMMUNITY FOUNDATION  
INC

## Supplemental Information

Return Reference	Explanation
PART IV, LINE 1B:	THE FOUNDATION IS THE TRUSTEE OF SEVEN CHARITABLE REMAINDER TRUSTS.

## Supplemental Information

Return Reference	Explanation
PART IV, LINE 2B:	THE FOUNDATION WAS ASSIGNED A MORTGAGE AS PART OF A BEQUEST. THE MORTGAGE REQUIRED THAT AN ESCROW ACCOUNT BE MAINTAINED FOR PAYMENT OF TAXES AND INSURANCE.

# Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS:	CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENT -112,545.

**Supplemental Information**

Return Reference	Explanation
INTENDED USE OF ENDOWMENT FUNDS:	<p>THE CENTRAL NEW YORK COMMUNITY FOUNDATION CONNECTS THE GENEROSITY OF DONORS WITH COMMUNITY NEEDS BY MAKING GRANTS TO ORGANIZATIONS WORKING TO ENHANCE THE QUALITY OF LIFE OF THOSE WHO LIVE AND WORK IN CENTRAL NEW YORK. THE COMMUNITY FOUNDATION ANNUALLY MAKES GRANTS AND PROVIDES LEADERSHIP SUPPORT IN THE FIELDS OF ARTS AND CULTURE, COMMUNITY AND ECONOMIC DEVELOPMENT, EDUCATION, ENVIRONMENT, HEALTH AND HUMAN SERVICES. THE CENTRAL NEW YORK COMMUNITY FOUNDATION SUPPORTS A WIDE VARIETY OF PROJECTS, BUT DOES RESTRICT ITSELF TO MAKING GRANTS TO TAX-EXEMPT, NOT-FOR-PROFIT ORGANIZATIONS CERTIFIED BY THE INTERNAL REVENUE SERVICE UNDER SECTION 501 (C) (3), PUBLICLY SUPPORTED ORGANIZATIONS SUCH AS SCHOOLS AND MUNICIPALITIES, AND MAKING GRANTS FROM THE COMMUNITY FUND AND OTHER BOARD-DIRECTED FUNDS TO QUALIFIED ORGANIZATIONS IN ONONDAGA, MADISON, OSWEGO, CAYUGA AND CORTLAND COUNTIES.</p>

**SCHEDULE F  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

# Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.  
▶ Attach to Form 990.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

## 2019

**Open to Public Inspection**

Name of the organization  
CENTRAL NEW YORK COMMUNITY FOUNDATION  
INC

**Employer identification number**  
15-0626910

**Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .  **Yes**  **No**
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3** Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
See Add'l Data					
<b>3a</b> Sub-total . . . . .	0	0			37,598,138
<b>b</b> Total from continuation sheets to Part I . . . . .	0	0			0
<b>c Totals</b> (add lines 3a and 3b)	0	0			37,598,138

**Part II Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . ▶ \_\_\_\_\_
- 3 Enter total number of other organizations or entities . . . . . ▶ \_\_\_\_\_





**Part IV Foreign Forms**

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* . . . . .  Yes  No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* . . . . .  Yes  No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)* . . . . .  Yes  No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* .  Yes  No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* . . . . .  Yes  No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).* . . . . .  Yes  No

**Part V Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

**990 Schedule F, Supplemental Information**

Return Reference	Explanation
PART III ACCOUNTING METHOD:	

# Additional Data

**Software ID:**

**Software Version:**

**EIN:** 15-0626910

**Name:** CENTRAL NEW YORK COMMUNITY FOUNDATION  
INC

## Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CAYMAN ISLANDS			INVESTMENTS HELD IN CAYMAN ISLANDS	INVESTMENTS ARE HELD TO INCREASE THE AMOUNT OF GRANTS THE COMMUNITY FOUNDATION IS ABLE TO PROVIDE TO NOT-FOR-PROFIT ORGANIZATIONS IN NEW YORK STATE.	36,167,711
JERSEY, ENGLISH CHANNEL			INVESTMENTS HELD IN JERSEY, ENGLISH CHANNEL	INVESTMENTS ARE HELD TO INCREASE THE AMOUNT OF GRANTS THE COMMUNITY FOUNDATION IS ABLE TO PROVIDE TO NOT-FOR-PROFIT ORGANIZATIONS IN NEW YORK STATE.	963,375

**Form 990 Schedule F Part I - Activities Outside The United States**

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
GUERNSEY, ENGLISH CHANNEL			INVESTMENTS HELD IN GUERNSEY, ENGLISH CHANNEL	INVESTMENTS ARE HELD TO INCREASE THE AMOUNT OF GRANTS THE COMMUNITY FOUNDATION IS ABLE TO PROVIDE TO NOT-FOR-PROFIT ORGANIZATIONS IN NEW YORK STATE.	467,052

Note: To capture the full content of this document as Filed, please select landscape mode (11" x 8.5") when printing.

**Schedule I  
(Form 990)**

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

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

▶ Attach to Form 990.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2019**

**Open to Public  
Inspection**

Department of the  
Treasury  
Internal Revenue Service

Name of the organization  
CENTRAL NEW YORK COMMUNITY FOUNDATION  
INC

Employer identification number  
15-0626910

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ \_\_\_\_\_
- 3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ \_\_\_\_\_

**Part III Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

**Part IV Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
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**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 15-0626910  
**Name:** CENTRAL NEW YORK COMMUNITY FOUNDATION  
INC

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
13THIRTY CANCER CONNECT INC 1000 ELMWOOD AVE ROCHESTER, NY 14620	47-4493013		8,900				SUPPORT FOR WELLNESS CENTER
1890 HOUSE MUSEUM AND CENTER FOR THE ARTS 37 TOMPKINS STREET CORTLAND, NY 13045	13-2951986		11,200				GENERAL SUPPORT



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ACCESS TO INDEPENDENCE OF CORTLAND COUNTY 26 NORTH MAIN STREET CORTLAND, NY 13045	16-1557965		7,000				GENERAL SUPPORT; HELPING VICTIMS
ACCESSCNY 1603 COURT STREET SYRACUSE, NY 13208	15-0532247		113,921				GENERAL PURPOSE; SUPPORT FOR PROVISIONS

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ACTION FOR HEALTHY KIDS INC 600 VAN BUREN ST STE 720 CHICAGO, IL 60622	47-0902020		50,000				SUPPORT FOR GAME ON PROGRAM
ADVOCATES INC 636 OLD LIVERPOOL ROAD LIVERPOOL, NY 13088	16-1453716		8,500				GENERAL SUPPORT, STAFF TRAINING

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ALBANY COLLEGE OF PHARMACY 106 NEW SCOTLAND AVENUE ALBANY, NY 12208			11,000				SCHOLARSHIPS
ALGEBRA SOCIETY INC 8 STATE ROUTE 37 STE 6 HOGANSBURG, NY 13655	82-3378242		8,500				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ALLEGHENY COLLEGE 520 N MAIN ST MEADVILLE, PA 16335			11,000				GENERAL SUPPORT AND SCHOLARSHIPS
ALS ASSOCIATION OF CENTRAL NEW YORK 135 OLD COVE ROAD SUITE 213 LIVERPOOL, NY 13090	13-3616680		21,078				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ALTERNATIVE EFFORTS CENTER OF CNY INC 212 WAYNE STREET SYRACUSE, NY 13203	16-1379232		31,500				GENERAL SUPPORT
ALZHEIMER'S ASSOCIATION CENTRAL NEW YORK CHAPTER 441 W KIRKPATRICK ST SYRACUSE, NY 13204	14-1634958		15,450				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
AMERICAN FOUNDATION FOR SUICIDE PREVENTION 120 WALL STREET 22ND FLOOR NEW YORK, NY 10005	13-3393329		10,000				SUPPORT FOR CENTRAL NEW YORK
AMERICAN HEART ASSOCIATION GREATER SYRACUSE & NORTH COUNTRY 2 CLINTON SQUARE SUITE 305 SYRACUSE, NY 13202	16-0915734		33,700				GENERAL SUPPORT; GO RED; HEART WALK

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
AMERICAN HOME FURNISHINGS HALL OF FAME FOUNDATION INC 202 NEAL PL HIGH POINT, NC 27262	31-1764449		5,000				EVENT SUPPORT
AMERICAN INDIAN COLLEGE FUND 8333 GREENWOOD BLVD DENVER, CO 80221	52-1573446		5,000				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
AMERICAN LEGION POST 239 ROBERT J HYDON POST PO BOX 24 SKANEATELES, NY 13152	16-6093851		5,200				CAMPAIGN SUPPORT
AMERICAN POMEROY HISTORIC GENEALOGICAL ASSOCIATION INC 492 E BRIGHTON AVE SYRACUSE, NY 13210	81-0873322		100,000				GENERAL SUPPORT



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
AMERICAN RED CROSS CHAPTER 344 WEST GENESEE STREET SYRACUSE, NY 13202	53-0196605		35,400				GENERAL SUPPORT, DISASTER RELIEF, SUPPORT FOR SOUND THE ALARM PROGRAM
ARISE FOUNDATION INC 635 JAMES STREET SYRACUSE, NY 13203	16-1186293		13,750				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ARTS AT THE PALACE 19 UTICA ST HAMILTON, NY 13346	20-5762886		20,000				SUPPORT FOR SCRIPT TO STAGE PROGRAM
ASBURY UNITED METHODIST CHURCH 205 SOUTH MAIN STREET HARRISONBURG, VA 22801			6,500				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
AUBURN PUBLIC THEATER 8 EXCHANGE STREET AUBURN, NY 13021	20-3577149		12,000				GENERAL AND PROGRAM SUPPORT; SCHOLARSHIPS
AURORA OF CNY 518 JAMES STREET STE 100 SYRACUSE, NY 13203	15-0543651		27,650				GENERAL AND PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
BALDWINVILLE COMMUNITY SCHOLARSHIP FOUNDATION INC PO BOX 88 BALDWINVILLE, NY 13027	16-1075625		9,043				SUPPORT FOR DOLLARS FOR SCHOLARS
BALTIMORE WOODS NATURE CENTER 4007 BISHOP HILL ROAD PO BOX 133 MARCELLUS, NY 13108	16-0973044		16,614				GENERAL SUPPORT; SCHOLARSHIP SUPPORT; EVENT SPONSORSHIP

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
BEAUTIFUL MESS MINISTRIES INC PO BOX 142 SODUS, NY 14551	81-2810966		15,000				GENERAL SUPPORT
BELLEVUE HEIGHTS UNITED METHODIST CHURCH 2112 SOUTH GEDDES STREET SYRACUSE, NY 13207			15,000				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
BISHOP LUDDEN JR SR HIGH SCHOOL 815 FAY RD SYRACUSE, NY 13219			10,910				GENERAL AND PROGRAM SUPPORT
BLESSED SACRAMENT SCHOOL 3129 JAMES STREET SYRACUSE, NY 13206			6,300				GENERAL AND CAPITAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
BOSTON FOUNDATION 75 ARLINGTON ST BOSTON, MA 02116	04-2104021		50,000				ADDITION TO FUND
BOSTON UNIVERSITY 881 COMMONWEALTH AVE LOWER LEVEL BOSTON, MA 02215			5,000				SAY YES TO EDUCATION SCHOLARSHIPS

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
BOY SCOUTS OF AMERICA - LONGHOUSE COUNCIL 2803 BREWERTON ROAD SYRACUSE, NY 13211	16-0966978		17,000				GENERAL SUPPORT; PROGRAM SUPPORT
BOYS & GIRLS CLUBS OF SYRACUSE 2100 EAST FAYETTE ST SYRACUSE, NY 13224	15-0532240		57,367				GENERAL SUPPORT; CAPITAL SUPPORT; CAMPAIGN SUPPORT



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
BRADY FAITH CENTER 404 SOUTH AVENUE SYRACUSE, NY 13204			207,032				GENERAL SUPPORT; PROGRAM SUPPORT; EDUCATIONAL SUPPORT; SPONSORSHIP SUPPORT
BROOKLINE COMMUNITY FOUNDATION INC 40 WEBSTER PLACE BROOKLINE, MA 02445	04-2103944		5,000				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
BROWARD HOUSE INC 1726 SE 3RD AVE FORT LAUDERDALE, FL 33316	59-2913416		9,792				GENERAL SUPPORT
BROWN UNIVERSITY BOX 1827 - 69 BROWN STREET PROVIDENCE, RI 02912			10,000				SAY YES TO EDUCATION SCHOLARSHIPS

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
BUFFALO STATE COLLEGE MOOT HALL 230 1300 ELMWOOD AVENUE BUFFALO, NY 14222			117,681				SCHOLARSHIPS
BUILDING MEN PROGRAM INC 103 MANN DR SYRACUSE, NY 13209	47-3788818		6,000				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CALVARY CHAPEL OF THE FINGER LAKES 1777 STATE ROUTE 332 FARMINGTON, NY 14425			20,000				SUPPORT FOR CALVARY CHAPEL ACADEMY
CATHOLIC CHARITIES 1654 W ONONDAGA ST SYRACUSE, NY 13204	15-0532085		58,500				GENERAL SUPPORT; PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CATHOLIC CHARITIESOXFORD STREET INN SHELTER 1654 WEST ONONDAGA STREET SYRACUSE, NY 13204	15-0532085		50,000				GENERAL SUPPORT
CAYUGA COMMUNITY COLLEGE 197 FRANKLIN STREET BUILDING M 232 AUBURN, NY 13021			29,854				SCHOLARSHIPS

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CAYUGA COUNTY COMMUNITY HEALTH NETWORK 2119 W GENESEE ST RD AUBURN, NY 13021	16-1552889		6,500				SUPPORT FOR DIABETES PRESENTATION
CAYUGA MUSEUM OF HISTORY AND ART 203 GENESEE STREET AUBURN, NY 13021	15-0533567		5,783				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CAZENOVIA COLLEGE 22 SULLIVAN STREET CAZENOVIA, NY 13035			11,624				GENERAL SUPPORT; SCHOLARSHIPS
CAZENOVIA PUBLIC LIBRARY 100 ALBANY STREET CAZENOVIA, NY 13035	15-0532080		51,910				GENERAL SUPPORT; PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CENTER FOR COMMUNITY ALTERNATIVES (CCA) 115 EAST JEFFERSON ST - STE 300 SYRACUSE, NY 13202	16-1395992		21,750				GENERAL SUPPORT
CENTERSTATE CEO FOUNDATION 115 WEST FAYETTE STREET SYRACUSE, NY 13202	22-2305294		5,000				PROJECT SUPPORT



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CENTRAL NEW YORK DIAPER BANK INC 3649 ERIE BLVD EAST SYRACUSE, NY 13214	81-2106440		11,250				GENERAL SUPPORT
CHARLES N GORDON WILDLIFE REHABILITATION CENTER INC PO BOX 90 HAMILTON, NY 13346	83-2797618		10,000				SUPPORT FOR CATCH AND RELEASE RACCOON CAGES

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CHILD ADVOCACY OF OSWEGO 163 S FIRST STREET FULTON, NY 13069	16-1603892		13,390				GENERAL SUPPORT
CHRISTIAN BROTHERS ACADEMY 6245 RANDALL ROAD SYRACUSE, NY 13214			130,500				GENERAL SUPPORT; SCHOLARSHIPS; CAPITAL CAMPAIGN

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CITY OF SYRACUSE COMMISSIONER OF FINANCE 233 EAST WASHINGTON STREET SYRACUSE, NY 13202			10,000				SUPPORT FOR CENSUS 2020 COMPLETE COUNT COORDINATOR
CLARKSON UNIVERSITY PO BOX 5500 POTSDAM, NY 13699			40,121				SCHOLARSHIPS

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CLEAR PATH FOR VETERANS INC 1223 SALT SPRINGS ROAD CHITTENANGO, NY 13037	27-5206513		10,820				GENERAL SUPPORT
CNY CHILDREN'S FOUNDATION INC PO BOX 90 CANASTOTA, NY 13032	47-4220332		7,000				SUPPORT FOR ADA-COMPLIANT PLAYGROUND EQUIPMENT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CNY JAZZ ARTS FOUNDATION INC 441 EAST WASHINGTON STREET SYRACUSE, NY 13202	16-1546134		27,450				GENERAL SUPPORT
CNY LAND TRUST PO BOX 9417 SYRACUSE, NY 13290	23-7399316		65,500				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CNY RONALD MCDONALD HOUSE CHARITIES INC 1100 EAST GENESEE STREET SYRACUSE, NY 13210	22-2371193		12,800				GENERAL SUPPORT
CNY SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS 5878 EAST MOLLOY RD SYRACUSE, NY 13211	15-0532072		9,792				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
COMMUNITY ACTION PROGRAM FOR MADISON COUNTY 3 E MAIN STREET PO BOX 249 MORRISVILLE, NY 13408	16-1289461		20,100				GENERAL SUPPORT
COMMUNITY FOUNDATION OF HERKIMER & ONEIDA COUNTIES INC 2608 GENESEE ST UTICA, NY 13502	15-6016932		20,000				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CONNECT AFRICA FOUNDATION INC 222 PLEASANT STREET NEWTON CENTER, MA 02459	37-1496337		20,000				GENERAL SUPPORT
CORNELL UNIVERSITY 144 EAST AVE ITHACA, NY 14853			29,675				SCHOLARSHIPS; PROGRAM SUPPORT



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CORTLAND AREA COMMUNITIES THAT CARE COALITION 33-35 CENTRAL AVE CORTLAND, NY 13045	34-2064367		55,000				PROGRAM SUPPORT
CORTLAND CHENANGO RURAL SERVICES INC PO BOX 57 CINCINNATUS, NY 13040	45-5599324		5,000				CAPITAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CORTLAND COMMUNITY FOUNDATION 3334 NYS ROUTE 215 PO BOX 466 CORTLAND, NY 13045	16-1561037		15,800				PROGRAM SUPPORT; SPONSORSHIP SUPPORT
CORTLAND COUNTY COMMUNITY ACTION PROGRAM INC 32 NORTH MAIN ST CORTLAND, NY 13045	16-1004653		13,000				PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CORTLAND COUNTY FAMILY YMCA 22 TOMPKINS STREET CORTLAND, NY 13045	15-0533570		5,000				CAPITAL SUPPORT
CORTLAND COUNTY HISTORICAL SOCIETY INC 25 HOMER AVENUE CORTLAND, NY 13045	15-0555683		15,000				PROJECT SUPPORT; PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CORTLAND LOAVES & FISHES PO BOX 170 CORTLAND, NY 13045	16-1236737		7,000				GENERAL SUPPORT; PROGRAM SUPPORT
CORTLAND MEMORIAL FOUNDATION INC 134 HOMER AVENUE CORTLAND, NY 13045	22-2230692		5,000				PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CORTLAND REPERTORY THEATRE 24 PORT WATSON ST CORTLAND, NY 13045	16-1004610		5,665				GENERAL SUPPORT
COVENANT HOUSE - NEW YORK NY 461 EIGHTH AVENUE NEW YORK, NY 10001	13-2725416		12,900				GENERAL SUPPORT; CAMPAIGN SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CRADLES TO CRAYONS INC 155 NORTH BEACON STREET BRIGHTON, MA 02135	04-3584367		5,000				GENERAL SUPPORT
CROUSE HEALTH FOUNDATION 736 IRVING AVE SYRACUSE, NY 13210	16-1035427		88,900				GENERAL SUPPORT; SPONSORSHIP SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
DANA-FARBER CANCER INSTITUTE INC THE JIMMY FUND PO BOX 849168 BOSTON, MA 02284	04-2263040		13,025				JIMMY FUND; SPONSORSHIP SUPPORT
DANCE THEATER OF SYRACUSE 117 HARVARD PL SYRACUSE, NY 132102653	47-4526049		6,592				CAPITAL IMPROVEMENTS; PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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DAVID'S REFUGE 8195 CAZENOVIA ROAD MANLIUS, NY 13104	45-3686680		24,199				GENERAL SUPPORT; SPONSORSHIP SUPPORT
DELTA TORCH FOUNDATION PO BOX 6578 SYRACUSE, NY 13217	16-1480742		7,038				SCHOLARSHIPS



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
DEWITT COMMUNITY CHURCH 3600 ERIE BLVD E DEWITT, NY 13214			28,800				GENERAL SUPPORT; UPKEEP OF CEMETERY
DOCTORS WITHOUT BORDERS PO BOX 5030 HAGERSTOWN, MD 21741	13-3433452		5,400				GENERAL SUPPORT; DISASTER RELIEF

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
DUCKS UNLIMITED INC ONE WATERFOWL WAY MEMPHIS, TN 38120	13-5643799		10,000				SCHOLARSHIPS
DUNBAR ASSOCIATION INC 1453 S STATE STREET SYRACUSE, NY 13205	15-0533563		7,100				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
EARLVILLE FREE LIBRARY PO BOX 120 - N MAIN ST EARLVILLE, NY 13332	15-0618864		39,235				GENERAL SUPPORT
EAST AREA FAMILY YMCA 200 TOWNE DRIVE FAYETTEVILLE, NY 13066	15-0532278		12,250				GENERAL AND PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ELMCREST CHILDREN'S CENTER 960 SALT SPRINGS RD SYRACUSE, NY 13224	15-0539090		26,700				GENERAL SUPPORT; CAPITAL CAMPAIGN
ENCOUNTER CHRISTIAN FELLOWSHIP 705 HAMILTON ST SYRACUSE, NY 13204	15-6025819		5,000				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ERIE CANAL MUSEUM 318 ERIE BLVD EAST SYRACUSE, NY 13202	15-0624395		37,450				GENERAL AND PROGRAM SUPPORT; ADDITIONAL STAFF
EVERSON MUSEUM OF ART 401 HARRISON STREET SYRACUSE, NY 13202	15-0616499		167,797				GENERAL AND PROGRAM SUPPORT; CAPITAL CAMPAIGN

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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FAITH HERITAGE SCHOOL 3740 MIDLAND AVE SYRACUSE, NY 13205			10,250				GENERAL SUPPORT
FAMILY COUNSELING SERVICES OF CORTLAND COUNTY 165 MAIN ST STE A CORTLAND, NY 13045	16-0975006		5,000				TOO GOOD FOR DRUGS PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
FARNHAM FAMILY SERVICES 283 WEST SECOND ST STE 200 OSWEGO, NY 13126	16-0990872		25,000				SUPPORT FOR POTENTIAL STRATEGIC PARTNERSHIP
FASHION INSTITUTE OF TECHNOLOGY 227 WEST 27TH STREET ROOM A-212A NEW YORK, NY 10001			8,240				SAY YES TO EDUCATION SCHOLARSHIPS

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
FELLOWSHIP OF CHRISTIAN ATHLETES 1301 EAST COLVIN ST ROOM 105 SYRACUSE, NY 13244	44-0610626		20,200				GENERAL SUPPORT
FIGHT FOR HEARTS 103 CLAIRE RD SYRACUSE, NY 13214	46-4012014		8,596				EQUIPMENT PURCHASE; PROGRAM SUPPORT



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
FINGER LAKES COMMUNITY COLLEGE 3325 MARVIN SANDS DR RM D-229 CANANDAIGUA, NY 14424			6,111				SCHOLARSHIPS
FINGER LAKES LAND TRUST 202 EAST COURT STREET ITHACA, NY 14850	22-2983688		133,000				GENERAL AND PROGRAM SUPPORT; CAPITAL CAMPAIGN

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
FIRST BAPTIST CHURCH OF PULASKI 7 BRIDGE STREET PULASKI, NY 13142			7,800				GENERAL SUPPORT
FIRST BAPTIST CHURCH OF SYRACUSE 5833 EAST SENECA TURNPIKE JAMESVILLE, NY 13078			9,000				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
FIRST PRESBYTERIAN CHURCH 27 ALBANY ST CAZENOVIA, NY 13035			24,000				GENERAL SUPPORT; CAPITAL CAMPAIGN
FIRST UNITARIAN UNIVERSALIST SOCIETY OF SYRACUSE 109 WARING ROAD SYRACUSE, NY 13224			6,000				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
FOOD BANK OF CNY 7066 INTERSTATE ISLAND ROAD SYRACUSE, NY 13209	20-2816988		71,575				GENERAL SUPPORT; CAPITAL SUPPORT; PROGRAM SUPPORT
FRACTURED ATLAS INC PO BOX 55 HARTSDALE, NY 105300055	11-3451703		8,000				SPONSORSHIP SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
FRANCIS HOUSE 108 MICHAELS AVE SYRACUSE, NY 13208	16-1585910		36,050				GENERAL SUPPORT; SPONSORSHIP SUPPORT
FRANK H HISCOCK LEGAL AID SOCIETY 351 SOUTH WARREN STREET SYACUSE, NY 13202	15-0527253		6,700				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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FREE WHEELCHAIR MISSION PO BOX 52001 DEPARTMENT 921 PHOENIX, AZ 85072	31-1781635		55,000				GENERAL SUPPORT
FRIENDS OF CENTRAL LIBRARY (FOCL) 447 SOUTH SALINA STREET 2ND FLOOR SYRACUSE, NY 13202	16-1440173		6,700				GENERAL SUPPORT; SPONSORSHIP SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
FRIENDS OF ISRAEL DEFENSE FORCES PO BOX 4224 NEW YORK, NY 10163	13-3156445		10,000				CAMPAIGN SUPPORT
FRIENDS OF THE ROSAMOND GIFFORD ZOO AT BURNET PARK 1 CONSERVATION PLACE SYRACUSE, NY 13204	23-7083532		85,205				GENERAL SUPPORT; SPONSORSHIP SUPPORT; PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
FRIENDS OF THE SCCS PLANETARIUM PO BOX 186 AURORA, NY 13026	27-1794748		120,000				GENERAL SUPPORT
GAY & LESBIAN COMMUNITY CENTER OF GREATER FORT LAUDERDALE 2040 N DIXIE HIGHWAY WILTON MANORS, FL 33305	65-0431045		12,240				GENERAL SUPPORT



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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GEORGE & REBECCA BARNES FOUNDATION 930 JAMES STREET SYRACUSE, NY 13203	20-1811339		10,000				CAPITAL SUPPORT
GEORGETOWN UNIVERSITY 2115 WISCONSIN AVE NW SUITE 500 WASHINGTON, DC 20007			22,500				GENERAL SUPPORT; SCHOLARSHIP SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
GLOBAL LYME ALLIANCE INC 1290 E MAIN ST FL 3 STAMFORD, CT 06902	06-1559393		10,500				GENERAL SUPPORT
GOOD LIFE YOUTH FOUNDATION 2610 SOUTH SALINA STREET 4 SYRACUSE, NY 13205	26-1123420		7,350				GENERAL SUPPORT; PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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GOVERNANCE MATTERS 272 BROADWAY ALBANY, NY 12204	46-4094066		10,000				PROGRAM SUPPORT
GRACE CHAPEL 1674 CHERRY VALLEY TURNPIKE SKANEATELES, NY 13152			30,000				CAPITAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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GRACE EPISCOPAL CHURCH - SYRACUSE 819 MADISON ST SYRACUSE, NY 13210			12,500				GENERAL SUPPORT; CAPITAL SUPPORT
GREATER SYRACUSE PROPERTY DEVELOPMENT CORPORATION 431 EAST FAYETTE STREET SYRACUSE, NY 13202	46-2382007		150,000				PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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GULF COAST COMMUNITY FOUNDATION 601 TAMIAMI TRAIL SOUTH VENICE, FL 34285	59-1052433		100,000				GENERAL SUPPORT
HABITAT FOR HUMANITYTOMPKINS & CORTLAND COUNTIES PO BOX 4683 ITHACA, NY 14852	90-0238478		5,000				PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
HALF-SHIRE HISTORICAL SOCIETY PO BOX 73 1100 COUNTY ROUTE 48 RICHLAND, NY 13144	22-2142376		7,835				CAPITAL SUPPORT
HAMILTON CENTRAL SCHOOL 47 WEST KENDRICK SCHOOL HAMILTON, NY 13346			17,995				PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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HAMILTON COLLEGE 198 COLLEGE HILL ROAD CLINTON, NY 13323			12,000				GENERAL SUPPORT; SCHOLARSHIP SUPPORT
HEART TO HEART INTERNATIONAL INC 13250 WEST 98TH ST LENEXA, KS 66215	48-1108359		50,000				CAMPAIGN SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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HEIFER PROJECT INTERNATIONAL 1 WORLD AVENUE LITTLE ROCK, AR 72202	35-1019477		5,212				GENERAL SUPPORT
HELIO HEALTH 770 JAMES STREET SUITE 141 SYRACUSE, NY 13203	15-0532288		25,000				OPERATIONAL SUPPORT



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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HELPING HOUNDS DOG RESCUE 6606 KINNE ROAD DEWITT, NY 13214	26-4132608		170,192				GENERAL SUPPORT; PROGRAM SUPPORT; CAPITAL SUPPORT
HERKIMER COUNTY COMMUNITY COLLEGE 100 RESERVOIR ROAD HERKIMER, NY 13350			5,000				SCHOLARSHIP SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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HILLSIDE CHILDREN'S FOUNDATIONALBANY PO BOX 1901 ALBANY, NY 12201	16-0743039		15,400				GENERAL SUPPORT; SPONSORSHIP SUPPORT
HOBART & WILLIAM SMITH COLLEGES 615 SOUTH MAIN STREET GENEVA, NY 14456			22,100				GENERAL SUPPORT; SCHOLARSHIP SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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HOLY CROSS CHURCH 4112 E GENESEE ST DEWITT, NY 13214			9,000				GENERAL SUPPORT
HOLY CROSS SCHOOL 4200 E GENESEE ST DEWITT, NY 13214			10,500				EDUCATIONAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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HOLY FAMILY HOSPITAL FOUNDATION 2000 P ST NW STE 310 WASHINGTON, DC 20036	52-2050117		5,000				GENERAL SUPPORT
HOME HEADQUARTERS 538 ERIE BLVD WEST SYRACUSE, NY 13204	22-2982267		165,000				CAPITAL SUPPORT; PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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HOMEVILLE MUSEUM INC PO BOX 162 HOMER, NY 13077	20-4130195		5,000				PROGRAM SUPPORT
HOPE FOR ARIANG FOUNDATION INC PO BOX 15327 SYRACUSE, NY 13215	20-8067683		5,000				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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HOPE FOR BEREAVED 4500 ONONDAGA BLVD SYRACUSE, NY 13219	16-1370553		22,925				GENERAL SUPPORT; SPONSORSHIP SUPPORT
HOSPICE FOUNDATION OF CNY INC 990 SEVENTH NORTH STREET LIVERPOOL, NY 13088	16-1438980		16,292				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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HOSPICE OF CNY 990 SEVENTH NORTH ST LIVERPOOL, NY 13088	16-1438980		5,550				GENERAL SUPPORT
HUMANE SOCIETY OF BROWARD COUNTY 2070 GRIFFIN RD FORT LAUDERDALE, FL 33312	59-6002321		12,240				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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IGNATIAN VOLUNTEER CORPS 1419 SALT SPRINGS ROAD SYRACUSE, NY 13214	52-1885486		7,000				PROGRAM SUPPORT
IMAGE INITIATIVE INC 4465 EAST GENESEE STREET 175 DEWITT, NY 13214	61-1494484		20,000				PROGRAM SUPPORT; SPONSORSHIP SUPPORT



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IMMACULATE CONCEPTION CHURCH 400 SALT SPRINGS ST FAYETTEVILLE, NY 13066			31,000				GENERAL SUPPORT; CAPITAL SUPPORT; HOPE APPEAL
IMPACT FOUNDATION PO BOX 25277 OVERLAND PARK, KS 66225	47-3574130		103,000				ADDITION TO FUND

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IN MY FATHER'S KITCHEN PO BOX 11328 SYRACUSE, NY 13218	45-2777205		7,000				GENERAL SUPPORT; PROGRAM SUPPORT
INLET VOLUNTEER EMERGENCY SERVICES INC PO BOX 300 INLET, NY 13360	16-1549797		5,000				CAPITAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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INTERFAITH WORKS OF CENTRAL NEW YORK 1010 JAMES STREET SYRACUSE, NY 13203	16-1064233		98,069				GENERAL SUPPORT; SPONSORSHIP SUPPORT; PROGRAM SUPPORT; CAPITAL SUPPORT
ITHACA COLLEGE 953 DANBY ROAD ITHACA, NY 14850			36,700				GENERAL SUPPORT; SCHOLARSHIP SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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JEFFERSON COMMUNITY COLLEGE 1220 OUTER COFFEEN STREET WATERTOWN, NY 13601			6,375				SCHOLARSHIP SUPPORT
JEWISH COMMUNITY FOUNDATION OF CENTAL NEW YORK 5655 THOMPSON ROAD DEWITT, NY 13214	16-1599356		25,801				GENERAL SUPPORT

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JEWISH FEDERATION OF CENTRAL NEW YORK INC 5655 THOMPSON ROAD DEWITT, NY 13214	15-0543614		36,956				GENERAL SUPPORT
JEWISH HOME OF CENTRAL NEW YORK INC 4101 E GENESEE ST SYRACUSE, NY 13214	15-0539103		23,650				CAPITAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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JIM AND JULI BOEHEIM FOUNDATION INC 1075 COMSTOCK AVE SYRACUSE, NY 13244	80-0434367		31,000				GENERAL SUPPORT; SPONSORSHIP SUPPORT
JOSEPH'S HOUSE FOR WOMEN INC 1101 BURNET AVE SYRACUSE, NY 13203	46-2485173		131,655				GENERAL SUPPORT; PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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JOWONIO SCHOOL 3049 E GENESEE STREET SYRACUSE, NY 13224			6,000				GENERAL SUPPORT
JUBILEE HOMES OF SYRACUSE INC 119 SOUTH AVE SYRACUSE, NY 13204	16-1330593		10,000				PROGRAM SUPPORT

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JUNIOR ACHIEVEMENT OF CENTRAL UPSTATE NY 290 ELWOOD DAVIS RD STE 290 6 LIVERPOOL, NY 13088	16-0956147		10,000				PROGRAM SUPPORT
JUSTICE RESOURCE INSTITUTE INC 160 GOULD STREET SUITE 300 NEEDHAM, MA 02494	04-2526357		10,000				GENERAL SUPPORT



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KIMBALL UNION ACADEMY PO BOX 188 MERIDEN, NH 03770	02-0222147		75,000				GENERAL SUPPORT
LAKE ERIE COLLEGE OF OSTEOPATHIC MEDICINE INC 5515 PEACH ST ERIE, PA 16509	25-1698677		5,000				GENERAL SUPPORT

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LEAD NEW YORK PROGRAM 275B WARREN HALL ITHACA, NY 14853	22-6506148		8,560				GENERAL SUPPORT
LEAGUE OF WOMEN VOTERS PO BOX 11866 SYRACUSE, NY 13218	13-6215058		7,000				PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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LEGAL SERVICES OF CENTRAL NEW YORK INC 221 S WARREN ST STE 300 SYRACUSE, NY 13202	16-0925269		25,250				GENERAL SUPPORT; PROGRAM SUPPORT
LEMOYNE COLLEGE 1419 SALT SPRINGS ROAD SYRACUSE, NY 13214			271,565				GENERAL & PROGRAM SUPPORT; SCHOLARSHIPS; CAPITAL IMPROVEMENTS

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
LIBERTY RESOURCES INC - CORTLAND 149 S MAIN ST CORTLAND, NY 13045	16-1129675		5,000				PROGRAM SUPPORT
LIME HOLLOW NATURE CENTER INC 338 MCLEAN RD CORTLAND, NY 13045	23-7339667		25,000				CAPITAL SUPPORT; EDUCATIONAL SUPPORT

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<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
LITERACY COALITION OF ONONDAGA COUNTY PO BOX 2129 518 JAMES STREET SYRACUSE, NY 13220	15-0532073		61,046				SUPPORT FOR LITERACY COALITION OF ONONDAGA COUNTY OPERATIONS
LITERACYCNY 100 NEW STREET SYRACUSE, NY 13202	16-1002098		29,900				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
LIVERPOOL PUBLIC LIBRARY 310 TULIP ST LIVERPOOL, NY 13088	16-1463853		13,500				SUPPORT FOR SHELVING FOR CHILDREN'S ROOM
LONGHOUSE COUNCIL BSA 2803 BREWERTON ROAD SYRACUSE, NY 13211	16-0966978		11,550				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
LORETTO FOUNDATION 700 EAST BRIGHTON AVE SYRACUSE, NY 13205	22-2339225		10,776				GENERAL SUPPORT; SUPPORT FOR PASTORAL SPACE
LORETTO HEALTH & REHABILITATION CENTER 700 E BRIGHTON AVE SYRACUSE, NY 13205	20-0503099		75,000				GENERAL SUPPORT; COVID RELIEF SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
LOTUS SCHOOL OF LIBERAL ARTS PO BOX 340 OTTSVILLE, PA 18942	81-2067627		8,500				CARPENTRY PROJECTS; STAFF SUPPORT
MAKE-A-WISH FOUNDATION OF CENTRAL NEW YORK INC 5005 CAMPUSWOOD DR EAST SYRACUSE, NY 13057	22-2572086		11,450				GENERAL SUPPORT



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
MANLIUS PEBBLE HILL SCHOOL 5300 JAMESVILLE RD SYRACUSE, NY 13214			1,472,736				GENERAL & PROGRAM SUPPORT; CAPITAL PROJECTS
MARY NELSON'S YOUTH DAY FOUNDATION 2849 S SALINA ST SYRACUSE, NY 13205	25-1916320		5,250				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
MATTHEW HOUSE INC 43 METCALF DRIVE AUBURN, NY 13021	16-1591811		34,014				GENERAL SUPPORT
MCMAHONRYAN CHILD ADVOCACY SITE 601 EAST GENESEE ST SYRACUSE, NY 13202	16-1563195		116,615				GENERAL & PROGRAM SUPPORT; CAPITAL IMPROVEMENTS

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
MEALS ON WHEELS OF SYRACUSE 300 BURT STREET SYRACUSE, NY 13202	16-0970999		17,660				GENERAL & PROGRAM SUPPORT; CAPITAL IMPROVEMENTS
MEDAILLE COLLEGE 18 AGASSIZ CIRCLE BUFFALO, NY 14214			10,000				SAY YES TO EDUCATION SCHOLARSHIPS

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
MERCY WORKS INC 1221 S SALINA ST SYRACUSE, NY 13202	16-1553234		52,350				GENERAL & PROGRAM SUPPORT
MERCYHURST COLLEGE 501 E 38TH ST ERIE, PA 16546			5,400				SCHOLARSHIPS

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
MICHIGANS THANKSGIVING PARADE 9500 MT ELLIOTT STUDIO A DETROIT, MI 48211	38-2460378		7,750				GENERAL SUPPORT
MIDDLE TENNESSEE STATE UNIVERSITY 1301 EAST MAIN ST MURFREESBORO, TN 371320001			8,200				SCHOLARSHIPS

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
MILLBROOK SCHOOL 131 MILLBROOK SCHOOL RD MILLBROOK, NY 12545			17,500				GENERAL SUPPORT; SCHOLARSHIPS
MOHAWK VALLEY COMMUNITY COLLEGE PAYNE HALL 1101 SHERMAN DRIVE UTICA, NY 13501			11,721				SCHOLARSHIPS

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
MONROE COMMUNITY COLLEGE 1000 EAST HENRIETTA ROAD ROCHESTER, NY 14623			25,028				SAY YES TO EDUCATION SCHOLARSHIPS
MORRISVILLE COLLEGE FOUNDATION INC PO BOX 901 MORRISVILLE, NY 13408	51-0205028		25,000				SUPPORT FOR RECYCLING PROGRAM

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
MOST HOLY NAME OF JESUS PARISH 1700 HARPSTER ST PITTSBURGH, PA 15212			5,000				PROGRAM SUPPORT
MUSCULAR DYSTROPHY ASSOCIATION OF CENTRAL & NORTHERN NY 6315 FLY ROAD SUITE 102 EAST SYRACUSE, NY 13057	13-1665552		5,800				GENERAL & PROGRAM SUPPORT



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
MUSEUM OF SCIENCE & TECHNOLOGY FOUNDATION 500 S FRANKLIN ST SYRACUSE, NY 13202	22-3158446		87,450				GENERAL SUPPORT; SCHOLARSHIP
MUSICAL ASSOCIATES OF CENTRAL NEW YORK INC DBA SYMPHORIA PO BOX 1161 SYRACUSE, NY 13201	46-1080817		22,920				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
NATIONAL BRAILLE ASSOCIATION INC 95 ALLENS CREEK RD STE 2 ROCHESTER, NY 14618	22-6064715		5,100				GENERAL SUPPORT
NATIONAL COUNCIL OF TEACHERS OF ENGLISH 1111 WEST KENYON ROAD URBANA, IL 61801	37-0715886		16,200				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
NATIONAL MATH FOUNDATION INC PO BOX 155 ITHACA, NY 148510155	46-1116885		20,000				PROGRAM SUPPORT
NATIONAL MUSEUM OF POLO & HALL OF FAME 9011 LAKE WORTH RD LAKE WORTH, FL 33467	36-3308567		60,000				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
NATURAL HERITAGE TRUST ALBANY OFFICE 625 BROADWAY ALBANY, NY 12207	16-1019635		5,500				SUPPORT FOR GREEN LAKES
NATURE CONSERVANCY CENTRAL & WESTERN NY 274 N GOODMAN ST STE B261 ROCHESTER, NY 14607	53-0242652		22,000				PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
NEBRASKA FARM BUREAU FOUNDATION PO BOX 80299 LINCOLN, NE 68501	46-1740947		10,000				DISASTER RELIEF
NEHDA - NORTHEAST HAWLEY DEVELOPMENT ASSN 101 GERTRUDE ST SYRACUSE, NY 13203	16-1117485		11,540				SUPPORT FOR STRATEGIC PLANNING

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
NEIGHBORHOOD INNOVATIONS INC 516 BURT ST SYRACUSE, NY 13202	27-3672698		100,000				EQUIPMENT PURCHASE
NEW YORK ANIMAL AGRICULTURE COALITION PO BOX 147 GREENWICH, NY 12834	46-5077587		15,100				GENERAL SUPPORT; DAIRY COW BIRTHING CENTER

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
NEW YORK CIVIL LIBERTIES UNION FOUNDATION 125 BROAD STREET - FLOOR 17 NEW YORK, NY 10275	90-0808294		70,700				GENERAL & PROGRAM SUPPORT
NEW YORK FFA LEADERSHIP TRAINING FOUNDATION INC 9340 LONG POND RD CROGHAN, NY 13327	15-6012484		21,650				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
NORTH AREA MEALS ON WHEELS INC 413 CHURCH STREET NORTH SYRACUSE, NY 13212	22-2296486		10,100				GENERAL SUPPORT; EQUIPMENT PURCHASE
NORTH SIDE LEARNING CENTER 501 PARK STREET SYRACUSE, NY 13203	27-1357086		6,500				GENERAL SUPPORT; EQUIPMENT PURCHASE



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
NORTH SYRACUSE EDUCATION FOUNDATION INC PO BOX 5225 SYRACUSE, NY 13220	16-1605888		5,600				GENERAL SUPPORT
NORTHEAST COMMUNITY CENTER (NECC) 716 HAWLEY AVE SYRACUSE, NY 13203			29,887				PROGRAM SUPPORT; SUPPORT FOR DATABASE EVALUATION

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
NORTHEASTERN UNIVERSITY 400 HUNTINGTON AVENUE BOSTON, MA 02115			7,750				SCHOLARSHIPS; SUPPORT FOR SCHOOL OF LAW
NORTHWEST YMCA 8040 RIVER RD BALDWINVILLE, NY 13027	15-0532278		11,000				CAPITAL CAMPAIGN

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
NYS AGRICULTURAL SOCIETY FOUNDATION INC 1818 LINWOOD RD LINWOOD, NY 14486	27-1174254		10,300				GENERAL SUPPORT
ON POINT FOR COLLEGE 488 W ONONDAGA ST SYRACUSE, NY 13202			53,100				GENERAL & PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ONEIDA AREA DAY CARE CENTER INC 447 SAYLES STREET ONEIDA, NY 13421	16-0985068		15,000				CAPITAL IMPROVEMENTS; EQUIPMENT PURCHASES
ONEIDA FAMILY YMCA 701 SENECA STREET ONEIDA, NY 13421	23-7045379		18,000				CAPITAL IMPROVEMENTS

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ONONDAGA COMMUNITY COLLEGE 4585 WEST SENECA TURNPIKE RM 220 SYRACUSE, NY 13215			199,313				SCHOLARSHIPS
ONONDAGA COUNTY 421 MONTGOMERY ST FL 14 SYRACUSE, NY 13202			10,000				PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ONONDAGA COUNTY DEPARTMENT OF CHILD & FAMILY SERVICES 421 MONTGOMERY ST 7TH FLOOR SYRACUSE, NY 13202			1,501,000				SUPPORT FOR SAY YES TO EDUCATION PROGRAMS
ONONDAGA COUNTY DEPT OF COMMUNITY DEVELOPMENT 421 MONTGOMERY ST FL 11 SYRACUSE, NY 13202			7,200				SUPPORT FOR CENSUS 2020

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ONONDAGA HISTORICAL ASSOCIATION 321 MONTGOMERY STREET SYRACUSE, NY 13202	15-0533554		62,800				GENERAL & PROGRAM SUPPORT
OPEN FIGURE DRAWING INC 101 ELOISE TERRACE SYRACUSE, NY 13207	59-3763087		5,000				EQUIPMENT PURCHASE

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
OPERATION WALK NEW YORK INC 5824 WIDEWATERS PKWY EAST SYRACUSE, NY 13057	27-4787826		20,000				GENERAL SUPPORT
OPHELIA'S PLACE PO BOX 621 LIVERPOOL, NY 13088	74-3043020		5,000				CAPITAL IMPROVEMENTS



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
OPTOMETRIC CENTER OF NEW YORK 33 WEST 42ND ST NEW YORK, NY 10036	13-1819472		26,000				SCHOLARSHIPS
ORDER OF MALTA - FEDERAL ASSOCIATION PO BOX 223132 CHANTILLY, VA 20153	52-1113253		14,150				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
OSBORNE ASSOCIATION 809 WESTCHESTER AVE BRONX, NY 10455	13-5563028		21,750				GENERAL SUPPORT
OWASCO WATERSHED LAKE ASSOCIATION INC PO BOX 1 AUBURN, NY 13021	22-2921543		9,000				SUPPORT FOR ROADSIDE DITCH EROSION MITIGATION PROJECT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
PARK CENTRAL PRESBYTERIAN CHURCH 504 EAST FAYETTE STREET SYRACUSE, NY 13202			10,600				GENERAL SUPPORT
PARKLAND COLLEGE FOUNDATION 2400 W BRADLEY AVE CHAMPAIGN, IL 61821	23-7025130		10,000				SCHOLARSHIP

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
PATRIOT ART FOUNDATION 5174 FOREST OAKS DR HOLLYWOOD, SC 29449	83-2039772		5,000				PROGRAM SUPPORT
PEACE INC 217 SOUTH SALINA ST 2ND FLOOR SYRACUSE, NY 13202	16-6095039		6,100				GENERAL & PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
PENN STATE UNIVERSITY 103 SHIELDS BUILDING UNIVERSITY PARK, PA 16802			15,000				SCHOLARSHIPS
PGR FOUNDATION INC 121 TILDEN DR EAST SYRACUSE, NY 13057	47-2407532		5,000				SUPPORT FOR SAFE SITTER TRAINING

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
PHILLIPS FREE LIBRARY 37 S MAIN ST HOMER, NY 13077	15-0532226		6,000				SUPPORT FOR TECH EXPLORERS PROGRAM
PLANNED PARENTHOOD OF CENTRAL AND WESTERN NEW YORK 1120 E GENESEE ST SYRACUSE, NY 13210	16-0746860		25,090				GENERAL & PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
PROVIDENCE COLLEGE 333 EATON STREET PROVIDENCE, RI 02908			5,000				SAY YES TO EDUCATION SCHOLARSHIPS
PROVIDENCE SERVICES OF SYRACUSE INC 1201 E FAYETTE ST SUITE 13 SYRACUSE, NY 13210	47-1431103		5,000				SUPPORT FOR SHUTTLE TO WORK

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
PULASKI ACADEMY & CENTRAL SCHOOLS 2 HINMAN ROAD PULASKI, NY 13142			8,699				GENERAL SUPPORT; SCHOLARSHIPS
PUNTO DE CONTACTO - POINT OF CONTACT 350 WEST FAYETTE STREET SYRACUSE, NY 13202	13-3020607		9,000				PROGRAM SUPPORT



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
PURPOSE FARM INC 1454 WEST GENESEE RD BALDWINVILLE, NY 13027	46-1446338		33,900				SUPPORT TO HIRE STAFF
REDHOUSE ARTS CENTER INC PO BOX 603 SYRACUSE, NY 13201	22-2366669		416,998				GENERAL & PROGRAM SUPPORT; EQUIPMENT PURCHASE

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
RENSSELAER POLYTECHNIC INSTITUTE 110 8TH STREET TROY, NY 12180	14-1340095		10,200				SCHOLARSHIPS
RESCUE MISSION ALLIANCE 155 GIFFORD STREET PO BOX 11122 SYRACUSE, NY 13202	15-0532073		234,608				GENERAL & PROGRAM SUPPORT; CAPITAL IMPROVEMENTS

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
RINGLING COLLEGE OF ART AND DESIGN 2700 N TAMIAMI TRAIL SARASOTA, FL 34234			5,000				GENERAL SUPPORT
RIVER HOSPITAL INC 4 FULLER ST ALEXANDRIA BAY, NY 13607	42-1585479		22,100				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ROAD TO EMMAUS MINISTRY OF SYRACUSE INC PO BOX 15224 SYRACUSE, NY 13215	81-2536179		55,400				GENERAL & PROGRAM SUPPORT; CAPITAL CAMPAIGN
ROCHESTER COMMUNITY INCLUSIVE ROWING INC 265 BRETLYN CIR ROCHESTER, NY 14618	45-1832009		10,000				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ROCHESTER INSTITUTE OF TECHNOLOGY 56 LOMB MEMORIAL DRIVE ROCHESTER, NY 14623			28,500				SCHOLARSHIP
ROMAN CATHOLIC DIOCESE OF SYRACUSE 240 EAST ONONDAGA STREET SYRACUSE, NY 13202			91,200				ANNUAL APPEAL; CAPITAL IMPROVEMENTS

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SAGE UPSTATE 431 EAST FAYETTE STREET SUITE 050 SYRACUSE, NY 13202	16-1540763		12,500				GENERAL SUPPORT; BRIDGE FUNDING
SAINT AGATHA FOUNDATION CO NATIONAL PHILANTHROPIC TRUST 165 TOWNSHIP LINE RD STE 150 JENKINTOWN, PA 190463533	06-0012966		50,000				PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SALVATION ARMY 138 SOUTH MAIN STREET BOX 781 CORTLAND, NY 13045	13-5562351		12,800				GENERAL & PROGRAM SUPPORT
SAMARITAN'S PURSE 801 BAMBOO ROAD PO BOX 3000 BOONE, NC 28607	58-1437002		6,000				GENERAL & PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SARAH LAWRENCE COLLEGE 1 MEAD WAY BRONXVILLE, NY 10708			7,500				SAY YES TO EDUCATION SCHOLARSHIPS
SARAH'S GUEST HOUSE INC 130 ROBERTS AVENUE SYRACUSE, NY 13207	16-1426336		10,514				GENERAL SUPPORT



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SAVANNAH COLLEGE OF ART AND DESIGN PO BOX 2701 SAVANNAH, GA 31402			5,000				SCHOLARSHIPS
SCHEPENS EYE RESEARCH INSTITUTE 20 STANIFORD STREET BOSTON, MA 02114	04-2129889		9,600				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SEBREE FIRST BAPTIST CHURCH 12100 STATE HIGHWAY 132 E SEBREE, KY 42455			15,000				GENERAL SUPPORT
SHERBURNE-EARLVILLE CENTRAL SCHOOL DISTRICT 15 SCHOOL STREET SHERBURNE, NY 13460			16,200				SCHOLARSHIPS

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SISTERS OF ST FRANCIS OF THE NEUMANN COMMUNITIES FRANCISCAN VILLA 6900 BUCKLEY RD SYRACUSE, NY 13212	20-4292535		7,000				GENERAL & PROGRAM SUPPORT
SKANEATELES CENTRAL SCHOOL DISTRICT 49 E ELIZABETH ST SKANEATELES, NY 13152			10,000				PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SKANEATELES COMMUNITY CENTER 97 STATE STREET RD SKANEATELES, NY 13152	16-1556745		10,100				GENERAL SUPPORT
SKANEATELES EARLY CHILDHOOD CENTER 1574 US ROUTE 20 SKANEATELES, NY 13152	22-2316055		10,000				CAPITAL IMPROVEMENTS

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SKANEATELES FESTIVAL INC 97 EAST GENESEE STREET SKANEATELES, NY 13152	22-2317577		66,264				GENERAL & PROGRAM SUPPORT
SKANEATELES HISTORICAL SOCIETY 28 HANNUM ST SKANEATELES, NY 13152	23-7339639		5,714				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SKANEATELES LAKE ASSOCIATION INC PO BOX 862 SKANEATELES, NY 13152	23-7045486		56,400				GENERAL SUPPORT
SLEEP IN HEAVENLY PEACE INCSYRACUSE CHAPTER 8417 OSWEGO RD 260 BALDWINVILLE, NY 13027	46-4346568		12,640				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SOLVAY DOLLARS FOR SCHOLARS 400 SPENCER STREET SYRACUSE, NY 13204	46-4788252		5,950				SCHOLARSHIPS
ST ANDREW BY THE SEA 20 POPE AVENUE HILTON HEAD, SC 29928	57-0545273		10,000				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ST DAVID'S EPISCOPAL CHURCH PO BOX 261 DEWITT, NY 13214			8,820				GENERAL SUPPORT
ST JAMES CHURCH 6 GREEN ST CAZENOVIA, NY 13035			40,550				PROGRAM SUPPORT



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ST JAMES EPISCOPAL CHURCH 9 WILLIAMS STREET CLINTON, NY 13323			37,800				GENERAL SUPPORT
ST JOHN FISHER COLLEGE 3690 EAST AVENUE ROCHESTER, NY 14618			20,260				SCHOLARSHIPS

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ST JOSEPH'S ROMAN CATHOLIC CHURCH 5600 W GENESEE ST CAMILLUS, NY 130311311			6,000				GENERAL SUPPORT; CAPITAL CAMPAIGN
ST MARY OF THE ASSUMPTION 47 SYRACUSE ST BALDWINSVILLE, NY 13027			55,000				GENERAL & PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ST MARY'S OF THE LAKE CHURCH 81 JORDAN STREET SKANEATELES, NY 13152			5,650				GENERAL SUPPORT
ST PAUL'S UNITED METHODIST CHURCH 2200 VALLEY DR SYRACUSE, NY 13207			6,000				SUPPORT FOR GENERAL MAINTENANCE

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ST ROSE OF LIMA SCHOOL 407 S MAIN ST NORTH SYRACUSE, NY 132122811			6,000				TUITION ASSISTANCE
STEWART B LANG MEMORIAL LIBRARY 2577 E MAIN ST CATO, NY 13033	16-1127864		5,000				SUPPORT FOR NEW BUILDING

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
STONE QUARRY HILL ART PARK INC PO BOX 251 CAZENOVIA, NY 13035	16-1406217		93,050				GENERAL & MAINTENANCE SUPPORT
STONEHILL COLLEGE 320 WASHINGTON ST EASTON, MA 02357			5,000				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SULLIVAN FREE LIBRARY 101 FALLS BLVD CHITTENANGO, NY 13037	23-7259944		15,000				PROGRAM SUPPORT
SUNY ALBANY 1400 WASHINGTON AVENUE ALBANY, NY 12222			18,723				SCHOLARSHIP SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SUNY BINGHAMTON PO BOX 6003 BINGHAMTON, NY 13902			53,681				SCHOLARSHIP SUPPORT
SUNY BROCKPORT 350 NEW CAMPUS DRIVE BROCKPORT, NY 14420			32,950				SCHOLARSHIP SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SUNY COBLESKILL 107 SUFFOLK CIRCLE COBLESKILL, NY 12043			9,570				SCHOLARSHIP SUPPORT
SUNY COLLEGE OF ESF 1 FORESTRY DRIVE 103 BRAY HALL SYRACUSE, NY 13210			35,582				SCHOLARSHIP SUPPORT



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SUNY CORTLAND PO BOX 2000 CORTLAND, NY 13045			45,042				SCHOLARSHIP SUPPORT
SUNY ESF COLLEGE FOUNDATION 1 FORESTRY DR OFC 1 214 BRAY HALL SYRACUSE, NY 13210	15-6023443		9,872				GENERAL SUPPORT; PROGRAM SUPPORT; SPONSORSHIP SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SUNY FREDONIA G140 WILLIAMS CENTER FREDONIA, NY 14063			18,258				SCHOLARSHIP SUPPORT
SUNY GENESEO 1 COLLEGE CIRCLE GENESEO, NY 14454			44,881				SCHOLARSHIP SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SUNY MORRISVILLE PO BOX 901 MORRISVILLE, NY 13408			45,216				SCHOLARSHIP SUPPORT
SUNY OSWEGO 408 CULKIN HALL OSWEGO, NY 13126			129,520				SCHOLARSHIP SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SUNY POLYTECHNIC INSTITUTE 100 SEYMOUR ROAD UTICA, NY 13502			13,369				SCHOLARSHIP SUPPORT
SUNY POTSDAM 44 PIERREPONT AVENUE POTSDAM, NY 13676			15,770				SCHOLARSHIP SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SUNY PURCHASE 735 ANDERSON HILL ROAD PURCHASE, NY 10577			17,484				SCHOLARSHIP SUPPORT
SUNY STONY BROOK 180 ADMINISTRATION BUILDING STONY BROOK, NY 11794			7,070				SCHOLARSHIP SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SUNY UPSTATE MEDICAL UNIVEMERGENCY MEDICINE INC 750 EAST ADAMS STREET SYRACUSE, NY 13210			11,500				GENERAL SUPPORT
SYRACUSE CITY BALLET INC 932 SPENCER STREET SYRACUSE, NY 13204	16-1530816		23,500				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SYRACUSE CSDROBERTS SCHOOL 715 GLENWOOD AVE SYRACUSE, NY 13207			9,200				PROGRAM SUPPORT
SYRACUSE FRIENDS OF CHAMBER MUSIC PO BOX 215 DEWITT, NY 13214	16-6053113		7,000				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SYRACUSE INTERNATIONAL FILM & VIDEO FESTIVAL 1153 WEST FAYETTE ST SYRACUSE, NY 13204	26-1969924		18,000				PROGRAM SUPPORT
SYRACUSE STAGE 820 E GENESEE ST SYRACUSE, NY 13210	15-0623468		64,775				GENERAL SUPPORT; PROGRAM SUPPORT



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SYRACUSE UNIVERSITY 900 SOUTH CROUSE AVENUE SYRACUSE, NY 13244			22,950				GENERAL SUPPORT; PROGRAM SUPPORT
SYRACUSE UNIVERSITY - BURSAR'S OFFICE 102 ARCHBOLD GYMNASIUM SYRACUSE, NY 132441140			6,172				SCHOLARSHIP SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SYRACUSE UNIVERSITY - OFFICE OF FINANCIAL AID 200 BOWNE HALL SYRACUSE, NY 13244			29,900				SCHOLARSHIP SUPPORT
SYRACUSE UNIVERSITY ADVANCEMENT & EXTERNAL AFFAIRS 640 SKYTOP RD 2ND FL SYRACUSE, NY 132445160			69,296				SCHOLARSHIP SUPPORT; PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SYRACUSE UNIVERSITYATHLETIC DEVELOPMENT 810 NOTTINGHAM RD SYRACUSE, NY 13224			25,000				GENERAL SUPPORT
SYRACUSE UNIVERSITYCOLLEGE OF LAW DINEEN HALL 950 IRVING AVENUE SYRACUSE, NY 13244			17,618				GENERAL SUPPORT; SCHOLARSHIP SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SYRACUSE UNIVERSITY L C SMITH COLLEGE OF ENGINEERING COMPUTER SCIENCE - 223 LINK HALL SYRACUSE, NY 13244			38,100				GENERAL SUPPORT
SYRACUSE UNIVERSITY MAXWELL POLICY RESEARCH 426 EGGERS HALL SYRACUSE, NY 13244			14,400				PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SYRACUSE UNIVERSITYMAXWELL SCHOOL 200 EGGERS HALL SYRACUSE, NY 13244			5,176				SCHOLARSHIP SUPPORT
TEMPLE EMANU-EL OF SARASOTA 151 MCINTOSH RD SARASOTA, FL 34232	59-1145961		18,400				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
TEMPLE SOCIETY OF CONCORD 910 MADISON STREET SYRACUSE, NY 13210			61,740				GENERAL SUPPORT; PROGRAM SUPPORT
THE COMMUNITY FOUNDATION OF SARASOTA COUNTY INC 2635 FRUITVILLE RD SARASOTA, FL 34237	59-1956886		9,300				GENERAL SUPPORT; ADDITION TO FUND

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
THE CORA FOUNDATION C/O ART RAGE GALLERY PO BOX 6865 SYRACUSE, NY 13217	16-1263983		19,768				ARTRAGE GALLERY
THE ELM PROJECT 88 HAMILTON AVENUE STAMFORD, CT 06902	06-1431690		10,000				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
THE FIRST BAPTIST CHURCH 22 SYRACUSE STREET BALDWINVILLE, NY 13027			48,010				GENERAL SUPPORT
THE FIRST TEE OF SYRACUSE 5050 JAMESVILLE RD JAMESVILLE, NY 13078	31-1724122		12,100				GENERAL SUPPORT; CAPITAL SUPPORT



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
THE FOUNDATION OF THE ROMAN CATHOLIC DIOCESE OF SYRACUSE 240 EAST ONONDAGA ST SYRACUSE, NY 13202	45-3364607		254,500				GENERAL SUPPORT; CAPITAL SUPPORT; HOPE APPEAL
THE GOVERNOR'S ACADEMY 1 ELM STREET BYFIELD, MA 01922	04-2103564		6,000				GENERAL SUPPORT; SCHOLARSHIP SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
THE GREAT SWAMP CONSERVANCY INC 8375 N MAIN STREET CANASTOTA, NY 13032	16-1529688		12,038				CAPITAL SUPPORT
THE HAVEN AT SKANDA 4000 MOSLEY ROAD CAZENOVIA, NY 13035	52-1053406		34,620				GENERAL SUPPORT; CAPITAL SUPPORT; PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
THE KEYS PROGRAM 308 SHERRILL ROAD SHERRILL, NY 13461	16-1609790		5,000				PROGRAM SUPPORT
THE MUSEUM OF SCIENCE & TECHNOLOGY FOUNDATION 500 S FRANKLIN ST SYRACUSE, NY 13202	22-3158446		106,250				GENERAL SUPPORT; CAPITAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
THE NEWLAND CENTER (THE LEARNING PLACE) 1443 E GENESEE ST SYRACUSE, NY 13210	86-1061215		6,600				GENERAL SUPPORT
THE PARTNERSHIP FOR COMMUNITY DEVELOPMENT LTD PO BOX 37 HAMILTON, NY 13346	16-1572206		10,699				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
THE READING LEAGUE 4031 HOWLETT HILL ROAD SYRACUSE, NY 13215	81-0820021		21,373				GENERAL & PROGRAM SUPPORT
THE REV THEATRE COMPANY 17 WILLIAM ST FL 2 AUBURN, NY 13201	26-1267593		50,700				GENERAL & PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
THE SALVATION ARMY 18 EAST GENESEE STREET AUBURN, NY 13021	13-5562351		5,000				GENERAL SUPPORT
THE SALVATION ARMY OF SYRACUSE 677 S SALINA STREET 100 SYRACUSE, NY 13202	13-2923701		131,108				GENERAL SUPPORT; PROGRAM SUPPORT; CAPITAL SUPPORT; SPONSORSHIP SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
THE SAMARITAN CENTER 215 NORTH STATE STREET SYRACUSE, NY 13203	16-1328786		12,275				GENERAL SUPPORT; SPONSORSHIP SUPPORT
THE TOWN AND COUNTRY GARDEN CLUB CORTLAND HOMER 16 PINECREST DR CORTLAND, NY 13045	33-1106452		5,000				GARDEN RESTORATION

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
THE UPSTATE FOUNDATION 750 EAST ADAMS STREET SYRACUSE, NY 13210	16-1068101		125,150				GENERAL & PROGRAM SUPPORT
TOMORROW'S NEIGHBORHOODS TODAY 201 E WASHINGTON ST SYRACUSE, NY 13202	47-5635762		33,182				PROGRAM SUPPORT; PARTICIPATORY BUDGETING



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
TOMPKINS CORTLAND COMMUNITY COLLEGE 170 NORTH STREET PO BOX 139 DRYDEN, NY 13053			45,525				SCHOLARSHIP SUPPORT
TOWN OF NELSON 4085 NELSON ROAD CAZENOVIA, NY 13035			20,000				PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
TYBURN ACADEMY 17 CLYMER ST AUBURN, NY 13021			5,000				GENERAL SUPPORT
UNION COLLEGE 807 UNION STREET SCHENECTADY, NY 12308			9,000				SCHOLARSHIP SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
UNITED WAY OF CENTRAL NEW YORK SUCCESS BY SIX PO BOX 2129 518 JAMES STREET SUITE 200 SYRACUSE, NY 13220	15-0532073		25,000				PROGRAM SUPPORT
UNITED WAY OF CNY PO BOX 2129 SYRACUSE, NY 13220	15-0532073		321,428				GENERAL SUPPORT; CAMPAIGN SUPPORT; PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
UNITED WAY OF INDIAN RIVER COUNTY 1836 14TH AVE VERO BEACH, FL 32960	27-4180892		10,000				CAMPAIGN SUPPORT
UNIVERSITY AT ALBANY 1400 WASHINGTON AVENUE ALBANY, NY 12222			37,470				SCHOLARSHIP SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
UNIVERSITY AT BUFFALO SUNY 232 CAPEN HALL BUFFALO, NY 14260			64,481				SCHOLARSHIP SUPPORT
UNIVERSITY OF NOTRE DAME 115 MAIN BUILDING NOTRE DAME, IN 46556			5,185				SCHOLARSHIP SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
UNIVERSITY OF PENNSYLVANIA 601 FRANKLIN BLDG 3451 WALNUT ST PHILADELPHIA, PA 19104			5,000				SCHOLARSHIP SUPPORT
UNIVERSITY OF ROCHESTER 330 MELIORA HALL PO BOX 270037 ROCHESTER, NY 14627			27,274				SCHOLARSHIP SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
UTICA CURLING CLUB 8300 CLARK MILLS RD WHITESBORO, NY 13492	15-0476440		5,000				CAPITAL SUPPORT
VASSAR COLLEGE 124 RAYMOND AVE BOX 8 POUGHKEEPSIE, NY 12604			5,000				SCHOLARSHIP SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
VERA HOUSE INC 723 JAMES ST SYRACUSE, NY 13203	51-0201530		77,714				GENERAL SUPPORT; PROGRAM SUPPORT; CAPITAL SUPPORT
WBUR 909 - BOSTON UNIVERSITY 890 COMMONWEALTH AVENUE BOSTON, MA 02215	26-3347402		5,000				GENERAL SUPPORT



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
WCNY TV24 - PUBLIC BROADCASTING COUNCIL OF CNY INC PO BOX 2400 SYRACUSE, NY 13220	16-0876277		64,148				GENERAL SUPPORT; SPONSORSHIP SUPPORT; PROGRAM SUPPORT
WHOLE ME INC 1010 JAMES STREET SYRACUSE, NY 13203	04-3743001		45,750				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
WHOLEHEART INC 88 HIGH MEADOW LN RICHMOND, VT 05477	46-4300314		15,000				PROGRAM SUPPORT
WISDOM THINKERS NETWORK 1736 STATE ROUTE 5 ELBRIDGE, NY 13060	22-2420597		5,000				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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WOMEN'S OPPORTUNITY CENTER 901 JAMES STREET SYRACUSE, NY 13203	16-1482758		20,250				GENERAL SUPPORT; PROGRAM SUPPORT
WRVO STATION 7060 STATE ROUTE 104 OSWEGO, NY 13126	15-0543477		6,440				GENERAL SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
YMCA OF GREATER SYRACUSE 340 MONTGOMERY STREET SYRACUSE, NY 13202	15-0532278		71,600				GENERAL SUPPORT; PROGRAM SUPPORT
YOU CAN'T FAIL INC 27 THORNTON AVE AUBURN, NY 13021	47-4610055		5,000				PROGRAM SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
YOUNG LIFE CNY REGION P O BOX 473 MANLIUS, NY 13104	84-0385934		5,000				GENERAL SUPPORT; PROGRAM SUPPORT
YWCA OF SYRACUSE & ONONDAGA COUNTY 401 DOUGLAS STREET SYRACUSE, NY 13203	15-0532277		21,444				GENERAL SUPPORT; PROGRAM SUPPORT; SPONSORSHIP SUPPORT

**Schedule J**  
(Form 990)

**Compensation Information**

OMB No. 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees  
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.  
 ▶ Attach to Form 990.  
 ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**2019**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
CENTRAL NEW YORK COMMUNITY FOUNDATION  
INC

Employer identification number  
15-0626910

**Part I Questions Regarding Compensation**

	Yes	No
<p><b>1a</b> Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <p> <input type="checkbox"/> First-class or charter travel  <input type="checkbox"/> Travel for companions  <input type="checkbox"/> Tax idemnification and gross-up payments  <input type="checkbox"/> Discretionary spending account                 </p> <p> <input type="checkbox"/> Housing allowance or residence for personal use  <input type="checkbox"/> Payments for business use of personal residence  <input checked="" type="checkbox"/> Health or social club dues or initiation fees  <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)                 </p>		
<p><b>b</b> If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>		No
<p><b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?</p>	Yes	
<p><b>3</b> Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <p> <input type="checkbox"/> Compensation committee  <input type="checkbox"/> Independent compensation consultant  <input checked="" type="checkbox"/> Form 990 of other organizations                 </p> <p> <input type="checkbox"/> Written employment contract  <input checked="" type="checkbox"/> Compensation survey or study  <input checked="" type="checkbox"/> Approval by the board or compensation committee                 </p>		
<p><b>4</b> During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:</p> <p><b>a</b> Receive a severance payment or change-of-control payment?</p> <p><b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p><b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>		No
<p><b>4a</b></p>		No
<p><b>4b</b></p>	Yes	
<p><b>4c</b></p>		No
<p><b>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</b></p> <p><b>5</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p> <p><b>a</b> The organization?</p> <p><b>b</b> Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III.</p>		No
<p><b>5a</b></p>		No
<p><b>5b</b></p>		No
<p><b>6</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p> <p><b>a</b> The organization?</p> <p><b>b</b> Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III.</p>		No
<p><b>6a</b></p>		No
<p><b>6b</b></p>		No
<p><b>7</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.</p>		No
<p><b>7</b></p>		No
<p><b>8</b> Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.</p>		No
<p><b>8</b></p>		No
<p><b>9</b> If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>		
<p><b>9</b></p>		

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

**Note.** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
<b>1</b> PETER A DUNN PRESIDENT & CEO	(i)	226,170	16,500	17,376	20,765	1,527	282,338	0
	(ii)	0	0	0	0	0	0	0
<b>2</b> KIMBERLY SADOWSKI SR. VICE PRESIDENT & CFO	(i)	141,444	10,000	167	13,802	1,464	166,877	0
	(ii)	0	0	0	0	0	0	0

**Part III Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 1A	PETER A. DUNN IS REIMBURSED FOR CENTURY CLUB DUES TO BE USED FOR BUSINESS PURPOSES ONLY. THESE ARE VALID BUSINESS EXPENSES AND BECAUSE THERE IS NO PERSONAL USE, NO PORTION IS TREATED AS COMPENSATION. ANY PERSONAL USE PORTION IS PAID DIRECTLY BY THE CEO.
PART I, LINE 4B	PETER A. DUNN \$16,500



**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2019**

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**  
 ▶ **Attach to Form 990.**  
 ▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
CENTRAL NEW YORK COMMUNITY FOUNDATION  
INC

Employer identification number  
15-0626910

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .		0		
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	149	8,490,433	STOCK PROCEEDS
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ▶ ( _____ )				
26 Other ▶ ( _____ )				
27 Other ▶ ( _____ )				
28 Other ▶ ( _____ )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29	
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30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? . . . . .

	Yes	No
30a		No
31	Yes	
32a		No

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

**Part II** **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
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**SCHEDULE O**  
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2019****Open to Public Inspection**

Department of the Treasury

Name of the organization

CENTRAL NEW YORK COMMUNITY FOUNDATION  
INC

Employer identification number

15-0626910

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE CHIEF FINANCIAL OFFICER CONDUCTS A COMPLETE REVIEW OF THE IRS FORM 990 AND DISCUSSES A NY ISSUES/ QUESTIONS WITH THE PERSON WHO PREPARED THE RETURN, THE CEO AND TREASURER OF THE BOARD. THE AUDIT COMMITTEE REVIEWS THE RETURN, AS WELL.

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART VI, SECTION B, LINE 12C	PURSUANT TO THE CONFLICT OF INTEREST POLICY, AN ANNUAL CONFLICT OF INTEREST QUESTIONNAIRE, AIMED AT DETERMINING ANY FAMILY AND BUSINESS RELATIONSHIPS AND TRANSACTIONS OR OTHER TRANSACTIONS THAT MAY POSE A POTENTIAL CONFLICT, IS DISTRIBUTED TO ALL COVERED PERSONS (IE. BOARD MEMBERS, OFFICERS AND EXECUTIVE LEADERSHIP AND EMPLOYEES). COVERED PERSONS ARE REQUIRED TO DISCLOSE REAL OR POTENTIAL CONFLICTS AT THE TIME WHEN SUCH CONFLICTS ARISE. FURTHER, THE PERSON WITH THE CONFLICT OF INTEREST WITH RESPECT TO A TRANSACTION IS REQUIRED TO RECUSE THEMSELVES FROM DELIBERATIONS AND DECISION REGARDING THE TRANSACTIONS WHEN SOMEONE BECOMES A COVERED PERSON AND ANNUALLY THEREAFTER EACH COVERED PERSON IS REQUIRED TO SIGN A STATEMENT AFFIRMING THAT HE/SHE (1) HAS RECEIVED A COPY OF THE CONFLICT OF INTEREST POLICY, (2) HAS READ THE POLICY AND UNDERSTANDS THE POLICY, AND (3) AGREES TO COMPLY WITH ALL REQUIREMENTS OF THE POLICY, INCLUDING COMPLETING THE CONFLICT OF INTEREST QUESTIONNAIRE.

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE PROCESS FOR DETERMINING COMPENSATION OF THE COMMUNITY FOUNDATION'S PRESIDENT AND CEO, OFFICERS, AND KEY EMPLOYEES INCLUDES COMPARING THE COMPENSATION PAID BY THE COMMUNITY FOUNDATION TO COMPENSATION OF OTHER ORGANIZATIONS AS REPORTED ON THE IRS FORM 990, THE USE OF COMPENSATION SURVEYS AND STUDIES, AND APPROVAL BY THE BOARD OF DIRECTORS.

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 18	A COPY OF THE MOST RECENT IRS FORM 990 CAN BE FOUND ON THE COMMUNITY FOUNDATION'S WEBSITE. PRIOR YEAR TAX RETURNS ARE AVAILABLE UPON REQUEST.

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE MOST RECENT AUDITED FINANCIAL STATEMENTS CAN BE FOUND ON THE COMMUNITY FOUNDATION'S WEBSITE.

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART XI, LINE 9:	CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS -112,545.



**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047

**2019**

**Open to Public  
Inspection**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**  
▶ **Attach to Form 990.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
CENTRAL NEW YORK COMMUNITY FOUNDATION  
INC

**Employer identification number**

15-0626910

**Part I Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
<b>(1)</b> CNY PHILANTHROPY CENTER LLC 431 E FAYETTE ST SYRACUSE, NY 13202 26-4462686	HOLDS THE REAL PROPERTY AT 431 E. FAYETTE STREET	NY	117,927	4,399,056	CENTRAL NEW YORK COMMUNITY FOUNDATION INC

**Part II Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

**Part III Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
<b>1</b> During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
<b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity . . . . .	<b>1a</b>	
<b>b</b> Gift, grant, or capital contribution to related organization(s) . . . . .	<b>1b</b>	
<b>c</b> Gift, grant, or capital contribution from related organization(s) . . . . .	<b>1c</b>	
<b>d</b> Loans or loan guarantees to or for related organization(s) . . . . .	<b>1d</b>	
<b>e</b> Loans or loan guarantees by related organization(s) . . . . .	<b>1e</b>	
<b>f</b> Dividends from related organization(s) . . . . .	<b>1f</b>	
<b>g</b> Sale of assets to related organization(s) . . . . .	<b>1g</b>	
<b>h</b> Purchase of assets from related organization(s) . . . . .	<b>1h</b>	
<b>i</b> Exchange of assets with related organization(s) . . . . .	<b>1i</b>	
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) . . . . .	<b>1j</b>	
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) . . . . .	<b>1k</b>	
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) . . . . .	<b>1l</b>	
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) . . . . .	<b>1m</b>	
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .	<b>1n</b>	
<b>o</b> Sharing of paid employees with related organization(s) . . . . .	<b>1o</b>	
<b>p</b> Reimbursement paid to related organization(s) for expenses . . . . .	<b>1p</b>	
<b>q</b> Reimbursement paid by related organization(s) for expenses . . . . .	<b>1q</b>	
<b>r</b> Other transfer of cash or property to related organization(s) . . . . .	<b>1r</b>	
<b>s</b> Other transfer of cash or property from related organization(s) . . . . .	<b>1s</b>	

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

**Part VI Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

**Part VII**    **Supplemental Information**

Provide additional information for responses to questions on Schedule R. (see instructions).

<b>Return Reference</b>	<b>Explanation</b>