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Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)

OMB No 1545-0047

2009

Open to Public
Inspection

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

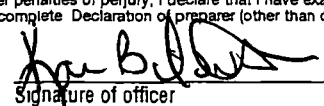
A For the 2009 calendar year, or tax year beginning and ending

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C Name of organization THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION, INC. Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite 6 TOWER PLACE City or town, state or country, and ZIP + 4 ALBANY, NY 12203	D Employer identification number 14-1505623
	F Name and address of principal officer: KAREN BILOWITH SAME AS C ABOVE	E Telephone number (518) 446-9638
	I Tax-exempt status: ☒ 501(c) (3) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527	G Gross receipts \$ 32,842,951.
	J Website: ▶ WWW.CFGCR.ORG	H(a) Is this a group return for affiliates? ☐ Yes ☒ No H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶		L Year of formation 1968 M State of legal domicile NY

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: TO PROVIDE PHILANTHROPIC OPPORTUNITIES IN THE CAPITAL REGION, AND TO IMPROVE THE QUALITY OF
	2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.
	3	Number of voting members of the governing body (Part VI, line 1a) 3 23
	4	Number of independent voting members of the governing body (Part VI, line 1b) 4 23
	5	Total number of employees (Part V, line 2a) 5 9
	6	Total number of volunteers (estimate if necessary) 6 35
Revenue	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12 7a 0.
	7b	Net unrelated business taxable income from Form 990-T, line 34 7b 0.
	8	Contributions and grants (Part VIII, line 1h) 8 1,563,070.
	9	Program service revenue (Part VIII, line 2g) 9 22,440.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 1,372,384.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 9d, and 1e) 11 24,173.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 2,982,067.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-9) 13 1,850,715.
	14	Benefits paid to or for members (Part IX, column (A), line 4) 14 2,257,261.
	Expenses	15
16a		Professional fundraising fees (Part IX, column (A), line 11e) 16a 482,982.
16b		Total fundraising expenses (Part IX, column (D), line 25) ▶ 118,031.
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 17 757,678.
18		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 3,101,291.
19		Revenue less expenses. Subtract line 18 from line 12 19 -119,224.
Net Assets or Fund Balances	20	Total assets (Part X, line 16) 20 31,359,494.
	21	Total liabilities (Part X, line 26) 21 2,936,485.
	22	Net assets or fund balances. Subtract line 21 from line 20 22 28,423,009.

Part II Signature Block

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	
	Signature of officer  KAREN BILOWITH, PRESIDENT Type or print name and title	Date 9/29/10
Paid Preparer's Use Only	Preparer's signature  Firm's name (or yours if self-employed), address, and ZIP + 4 BST ADVISORS, LLC 26 COMPUTER DRIVE WEST ALBANY, NEW YORK 12205	Date 9/27/10 Check if self-employed ☐ Preparer's identifying number (see instructions) EIN ▶ Phone no ▶ (518) 459-6700

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

SCANNED OCT 25 2010

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THE COMMUNITY FOUNDATION FOR THE GREATER
CAPITAL REGION, INC.

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Part III Statement of Program Service Accomplishments

- 1 Briefly describe the organization's mission:
THE MISSION OF THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION IS TO STRENGTHEN OUR COMMUNITY BY ATTRACTING CHARITABLE ENDOWMENTS BOTH LARGE AND SMALL, MAXIMIZING BENEFITS TO DONORS, MAKING EFFECTIVE GRANTS, AND PROVIDING LEADERSHIP TO ADDRESS COMMUNITY NEEDS.
- 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 exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 2,817,543. including grants of \$) (Revenue \$ 6,936,459.)
THE PURPOSE OF FOUNDATION IS TO USE, APPLY & DEVOTE PROPERTIES & FUNDS EXCLUSIVELY FOR CHARITABLE, SCIENTIFIC, CULTURAL & EDUCATIONAL PURPOSES THROUGH DISBURSEMENT OF GRANTS TO DULY AUTHORIZED PERSONS, INSTITUTIONS & ORGANIZATIONS.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$ 19,828.)
MANAGEMENT FEES

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services. (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses \$ 2,817,543.

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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>		
• Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i>		
• Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>		
• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i>		
• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>		
• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? <i>If "Yes," complete Schedule D, Part X.</i>		
12 Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>	X	
12A Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X

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Part IV Checklist of Required Schedules (continued)

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

Note. All Form 990 filers are required to complete Schedule O.

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Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body	23	
b Enter the number of voting members that are independent	23	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	X
5 Did the organization become aware during the year of a material diversion of the organization's assets?	5	X
6 Does the organization have members or stockholders?	6	X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8a	X
b Each committee with authority to act on behalf of the governing body?	8b	X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	X

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

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?	10a	X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X
11A Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	X
13 Does the organization have a written whistleblower policy?	13	X
14 Does the organization have a written document retention and destruction policy?	14	X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a	X
b Other officers or key employees of the organization	15b	X
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **►**
THE ORGANIZATION - (518) 446-9638
6 TOWER PLACE, ALBANY, NY 12203

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

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

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

☐ Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(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			
MAGGIE VINCIGUERRA CHAIRMAN	1.00	X						0.	0.	0.
JOHN MACAFFER FIRST VICE CHAIRMAN	1.00	X						0.	0.	0.
DEBORAH ONSLOW SECOND VICE CHAIRMAN	1.00	X						0.	0.	0.
C. WAYNE WILLIAMS SECRETARY	1.00	X						0.	0.	0.
SHERIDAN BIGGS TREASURER	1.00	X						0.	0.	0.
STEVEN BOUCHEY ASSISTANT TREASURER	1.00	X						0.	0.	0.
JAMES PROUT IMMED PAST CHAIR	1.00	X						0.	0.	0.
MATTHEW BENDER IV BOARD MEMBER	1.00	X						0.	0.	0.
ANTHONY CAPOBIANCO BOARD MEMBER	1.00	X						0.	0.	0.
LISA CLIFFORD BOARD MEMBER	1.00	X						0.	0.	0.
GLORIA DESOLE BOARD MEMBER	1.00	X						0.	0.	0.
BARBARA GLASER BOARD MEMBER	1.00	X						0.	0.	0.
CATHERINE HEDGEMAN BOARD MEMBER	1.00	X						0.	0.	0.
NANCY HOFFMAN BOARD MEMBER	1.00	X						0.	0.	0.
PAUL HOHENBERG BOARD MEMBER	1.00	X						0.	0.	0.
STEVEN LOBEL BOARD MEMBER	1.00	X						0.	0.	0.
MARCUS PRYOR BOARD MEMBER	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(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			
ELLEN SAX BOARD MEMBER	1.00	X						0.	0.	0.
CHRISTINE STANDISH BOARD MEMBER	1.00	X						0.	0.	0.
ROBIN WOOD BOARD MEMBER	1.00	X						0.	0.	0.
VINCENT VALENZA BOARD MEMBER	1.00	X						0.	0.	0.
KAREN BILOWITH DIR/PHILOTH DEV	37.50			X				91,466.	0.	4,077.
JACKIE MAHONEY DIR/GIFT PLANNING	37.50			X				78,048.	0.	5,897.
TOM HUDY DIR OF FINANCE	37.50			X				70,707.	0.	4,322.
E. KRISTEN FREDERICK PRESIDENT	37.50			X				43,708.	0.	5,798.
1b Total								283,929.	0.	20,094.

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

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. **NONE**

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

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

**THE COMMUNITY FOUNDATION FOR THE GREATER
CAPITAL REGION, INC.**

Form 990 (2009)

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Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	6,936,459.				
	g Noncash contributions included in lines 1a-1f \$		4,179,663.				
	h Total. Add lines 1a-1f		▶	6,936,459.			
Program Service Revenue	2 a MANAGEMENT FEES	Business Code	561000	19,828.	19,828.		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f		▶	19,828.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			▶	1,017,910.		1017910.
	4 Income from investment of tax-exempt bond proceeds			▶			
	5 Royalties			▶			
	6 a Gross Rents	(i) Real	(ii) Personal				
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)			▶			
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other	24845039			
	b Less: cost or other basis and sales expenses			25998584			
	c Gain or (loss)			-1153545			
	d Net gain or (loss)			▶	-1153545.		-1153545.
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a		23,715.			
	b Less: direct expenses	b		39,970.			
	c Net income or (loss) from fundraising events			▶	-16,255.		-16,255.
	9 a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses	b						
c Net income or (loss) from gaming activities			▶				
10 a Gross sales of inventory, less returns and allowances	a						
b Less: cost of goods sold	b						
c Net income or (loss) from sales of inventory			▶				
Miscellaneous Revenue			Business Code				
11 a							
b							
c							
d All other revenue							
e Total. Add lines 11a-11d			▶				
12 Total revenue. See instructions			▶	6,804,397.	19,828.	0.	-151,890.

**THE COMMUNITY FOUNDATION FOR THE GREATER
CAPITAL REGION, INC.**

Form 990 (2009)

14-1505623 Page **10**

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) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	2,234,931.	2,234,931.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	22,330.	22,330.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	283,929.	202,098.	72,450.	9,381.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	135,453.	43,071.	56,585.	35,797.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	4,507.	3,037.	1,287.	183.
9 Other employee benefits	22,255.	14,854.	6,228.	1,173.
10 Payroll taxes	36,838.	21,537.	11,332.	3,969.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	78,388.		43,388.	35,000.
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other	30,058.	811.	29,097.	150.
12 Advertising and promotion	20,921.			20,921.
13 Office expenses	22,401.		22,401.	
14 Information technology	5,711.		5,711.	
15 Royalties				
16 Occupancy	40,608.	13,401.	20,304.	6,903.
17 Travel	6,800.		6,800.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	6,997.	266.	6,731.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	21,781.		21,781.	
23 Insurance	14,270.		14,270.	
24 Other expenses. Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a <u>BANK AND INVESTMENT FEE</u>	145,786.	140,769.	5,017.	
b <u>PASSTHROUGH GRANTS</u>	120,438.	120,438.		
c <u>MISCELLANEOUS</u>	67,343.		67,343.	
d <u>EQUIPMENT LEASES/MAINTENANCE</u>	22,048.		22,048.	
e <u>OTHER</u>	6,381.		1,827.	4,554.
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	3,350,174.	2,817,543.	414,600.	118,031.
26 Joint costs. Check here ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

THE COMMUNITY FOUNDATION FOR THE GREATER
CAPITAL REGION, INC.

Form 990 (2009)

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Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	2,739,393.	2	1,967,994.
	3 Pledges and grants receivable, net	30,650.	3	379,305.
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	18,979.	9	17,425.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 188,036.		
	b Less: accumulated depreciation	10b 180,360.	28,141.	10c 7,676.
	11 Investments - publicly traded securities	2,947,352.	11	3,952,944.
	12 Investments - other securities. See Part IV, line 11	22,427,832.	12	33,828,290.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	3,167,147.	15	2,883,870.
16 Total assets. Add lines 1 through 15 (must equal line 34)	31,359,494.	16	43,037,504.	
Liabilities	17 Accounts payable and accrued expenses	28,511.	17	7,557.
	18 Grants payable	261,926.	18	389,030.
	19 Deferred revenue	2,646,048.	19	3,122,436.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	2,936,485.	26	3,519,023.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	27,521,021.	27	38,562,612.
	28 Temporarily restricted net assets	901,988.	28	955,869.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	28,423,009.	33	39,518,481.
34 Total liabilities and net assets/fund balances	31,359,494.	34	43,037,504.	

Form 990 (2009)

THE COMMUNITY FOUNDATION FOR THE GREATER
CAPITAL REGION, INC.

Form 990 (2009)

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Part XI Financial Statements and Reporting

- 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?
- b Were the organization's financial statements audited by an independent accountant?
- 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.
- d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:
☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- 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
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2009)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization **THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION, INC.** Employer identification number **14-1505623**

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 11, check only one box.)

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

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

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

Schedule A (Form 990 or 990-EZ) 2009

THE COMMUNITY FOUNDATION FOR THE GREATER

Schedule A (Form 990 or 990-EZ) 2009 **CAPITAL REGION, INC.**

14-1505623 Page 2

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2084299.	2776001.	4460589.	1560882.	6936459.	17818230.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	2084299.	2776001.	4460589.	1560882.	6936459.	17818230.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						4281807.
6 Public support. Subtract line 5 from line 4						13536423.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	2084299.	2776001.	4460589.	1560882.	6936459.	17818230.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	827,411.	1807316.	927,351.	1305841.	1017910.	5885829.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10						23704059.
12 Gross receipts from related activities, etc. (see instructions)					12	126,380.
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

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	57.11	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	66.28	%
16a 33 1/3% support test - 2009. 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 - 2008. 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 - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐			
b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐			
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 ▶ ☐			

Schedule A (Form 990 or 990-EZ) 2009

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I)**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

- 19a 33 1/3% support tests - 2009.** 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 - 2008.** 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 ▶ ☐

Schedule D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**

▶ Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009Open to Public
InspectionName of the organization **THE COMMUNITY FOUNDATION FOR THE GREATER
CAPITAL REGION, INC.**Employer identification number
14-1505623**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	116	
2 Aggregate contributions to (during year)	4,406,800.	
3 Aggregate grants from (during year)	1,389,775.	
4 Aggregate value at end of year	20,239,130.	
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?	☒ Yes ☐ No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	☒ Yes ☐ No	

Part II Conservation Easements. Complete if the organization answered "Yes" to 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 (e.g., recreation or pleasure)	☐ Preservation of an historically important land area
☐ Protection of natural habitat	☐ Preservation of a certified historic structure
☐ Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, 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)? ☐ Yes ☐ No

9 In Part XIV, 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" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenues included in 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 relating to these items:
- a Revenues included in 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 XIV.

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 organization answered "Yes" to 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 XIV and complete the following table:

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ☐ _____ %
 b Permanent endowment ☐ _____ %
 c Term endowment ☐ _____ %

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

- (i) unrelated organizations
 (ii) related organizations

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

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

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

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		188,036.	180,360.	7,676.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				7,676.

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

Part VIII	Investments - Program Related. See Form 990, Part X, line 13.
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Part IX **Other Assets.** See Form 990, Part X, line 15.

Part X	Other Liabilities. See Form 990, Part X, line 25.
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2. FIN 48 Footnote. In Part XIV, 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

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	6,804,397.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	3,350,174.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	3,454,223.
4	Net unrealized gains (losses) on investments	4	7,641,249.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	7,641,249.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	11,095,472.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	14,485,616.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	7,641,249.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	39,970.
e	Add lines 2a through 2d	2e	7,681,219.
3	Subtract line 2e from line 1	3	6,804,397.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	6,804,397.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	3,390,144.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	39,970.
e	Add lines 2a through 2d	2e	39,970.
3	Subtract line 2e from line 1	3	3,350,174.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	3,350,174.

Part XIV Supplemental Information

Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENTS EXPENSE: 39970.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENTS EXPENSE: 39970.

THE COMMUNITY FOUNDATION IS EXEMPT FROM TAX ON INCOME UNDER SECTION

501(C)(3) OF THE INTERNAL REVENUE CODE (CODE) AND RELATED NEW YORK STATE

Part XIV Supplemental Information (continued)

LAW. THE COMMUNITY FOUNDATION HAS BEEN CLASSIFIED AS A PUBLICLY-SUPPORTED ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION UNDER SECTION 509(A)(1) OF THE CODE.

ON JANUARY 1, 2009, THE COMMUNITY FOUNDATION ADOPTED ASC 740-10-25, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. MANAGEMENT EVALUATED THE COMMUNITY FOUNDATION'S TAX POSITIONS AND CONCLUDED THAT THE COMMUNITY FOUNDATION HAD TAKEN NO TAX POSITIONS THAT REQUIRED ADJUSTMENT IN ITS FINANCIAL STATEMENTS.

FORMS 990 FILED BY THE COMMUNITY FOUNDATION ARE SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE UP TO THREE YEARS FROM THE EXTENDED DUE DATE OF EACH RETURN. FORMS 990 FILED BY THE COMMUNITY FOUNDATION ARE NO LONGER SUBJECT TO EXAMINATION FOR THE FISCAL YEARS ENDED DECEMBER 31, 2005, AND PRIOR PERIODS.

**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. ► See separate instructions.**

OMB No 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

THE COMMUNITY FOUNDATION FOR THE GREATER
CAPITAL REGION, INC.

Employer identification number

14-1505623

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

1 For grantmakers. 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 For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States.

3 Activities per Region. (Use Schedule F-1 (Form 990) if additional space is needed.)

(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
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTMAKING		22,330.
Totals	0	0			22,330.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2009

Part I	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 13, for any
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Grants and Other Assistance to Organizations or Enterprises

Use Schedule E-1 (Form 990) if additional space is needed.

[illegible]

Organization	State	Year	Amount	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

THE COMMUNITY FOUNDATION
CAPITAL REGION, INC.

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Use Schedule F-1 (Form 990) if additional space is needed.

[illegible]

Part IV Supplemental Information

Complete this part to provide the information required in Part I, line 2, and any additional information.

SCHEDULE F, PART I, LINE 2: ALL GRANTS MADE TO ORGANIZATIONS OR
INDIVIDUALS ARE MONITORED FOR INTENDED CHARITABLE USES IN THE
ACCOMPLISHMENT OF THE ORGANIZATION'S TAX-EXEMPT PURPOSES. FOR GRANTS TO
ORGANIZATIONS THE GRANTEE IS REQUIRED TO PROVIDE A 6-MONTH AND 12-MONTH
ACTIVITY REPORT.

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047

2009

Open To Public Inspection

Name of the organization THE COMMUNITY FOUNDATION FOR THE GREATER
CAPITAL REGION, INC.

Employer identification number
14-1505623

Part I

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

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

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

- 2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☐ Yes☐ No

- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

[illegible]

- 3** List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

**THE COMMUNITY FOUNDATION FOR THE GREATER
CAPITAL REGION, INC.**

Schedule G (Form 990 or 990-EZ) 2009

14-1505623 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1 FUNDRAISING EVENT	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts	23,715.			23,715.
	2 Less: Charitable contributions				
	3 Gross income (line 1 minus line 2)	23,715.			23,715.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	39,970.			39,970.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				(39,970)
	11 Net income summary. Combine line 3, column (d), and line 10				-16,255.

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
Direct Expenses	6 Volunteer labor	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				()
	8 Net gaming income summary. Combine line 1, column (d), and line 7				

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

a Is the organization licensed to operate gaming activities in each of these states?

b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If "Yes," explain:

11 Does the organization operate gaming activities with nonmembers?

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

	Yes	No
9a		
10a		
11		
12		

		Yes	No
13 Indicate the percentage of gaming activity operated in: a The organization's facility b An outside facility		13a %	
		13b %	
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
Name ► _____			
Address ► _____			
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		15a	
b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____.			
c If "Yes," enter name and address of the third party:			
Name ► _____			
Address ► _____			
16 Gaming manager information:			
Name ► _____			
Gaming manager compensation ► \$ _____			
Description of services provided ► _____ _____ _____			
☐ Director/officer ☐ Employee ☐ Independent contractor			
17 Mandatory distributions:			
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		17a	
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____			

[illegible]

2 Enter total number of section 501(c)(3) and government organizations

3 Enter total number of other organizations

3 Enter total number of other organizations **1HA** For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2009

Part III

Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.
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FINANCIAL AND NARRATIVE REPORTS COMPARE ACTUAL EXPENDITURES AND

Part IV Supplemental Information

ACCOMPLISHMENTS WITH THE BUDGET AND OBJECTIVES CITED IN THE ORIGINAL PROPOSAL. IN ADDITION, A SITE VISIT MAY BE REQUESTED BY THE COMMUNITY FUND DURING THE GRANT PERIOD. THE GRANTEEES ARE GIVEN ADVANCE NOTICE OF SUCH A REQUEST.

ALL GRANT RECIPIENTS MUST QUALIFY UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AS A NON-PROFIT ORGANIZATION OR OPERATE UNDER THE FISCAL SPONSORSHIP OF AN ORGANIZATION THAT DOES. ADDITIONALLY, ALL GRANT RECIPIENTS MUST SERVE RESIDENTS OF AND BE LOCATED WITHIN THE 10 COUNTY CAPITAL REGION OF NEW YORK STATE.

THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION
ATTACHMENT TO FORM 990, SCHEDULE I

<u>Grantee</u>	<u>Granted</u>
Academy of the Holy Names	1,500.00
Adaptive Sports Foundation	5,000.00
Adirondack Community College	2,000.00
Adirondack Community College Foundation	5,549.00
Adirondack Community College Foundation	25.99
Adirondack Community College Foundation	1,500.00
Adirondack Community College Foundation	601.50
Adirondack Community College Foundation	120.65
Adirondack Tri-County Nursing & Rehabilitatio	100.00
Adkins Pet Center	2,500.00
AIDS Council of NENY	100.00
Albany City School District - Albany High Sch	1,000.00
Albany Community Action Partnership	3,000.00
Albany Community Action Partnership	8,000.00
Albany County Historical Association	12,680.00
Albany Damien Center	1,000.00
Albany Friends Meeting	250.00
Albany Friends Meeting	250.00
Albany Friends Meeting	500.00
Albany Institute of History & Art	6,000.00
Albany Institute of History & Art	1,000.00
Albany Institute of History & Art	600.00
Albany Institute of History & Art	1,500.00
Albany Institute of History & Art	250.00
Albany Institute of History & Art	7,000.00
Albany Jewish Community Center	300.00
Albany Jewish Community Center	300.00
Albany Medical Center	1,000.00
Albany Medical Center Foundation	100.00
Albany Medical Center Foundation	100.00
Albany Medical Center Foundation	250.00
Albany Medical Center Foundation	300.00
Albany Medical Center Foundation	500.00
Albany Medical Center Foundation	562.50
Albany Medical Center Foundation	100.00
Albany Medical Center Foundation	5,000.00
Albany Medical Center Foundation	583.00
Albany Medical Center Foundation	1,500.00
Albany Medical Center Foundation	1,000.00
Albany Medical Center Foundation	300.00
Albany Medical Center Foundation	15,000.00
Albany Medical College	10,000.00
Albany Medical College	15,000.00
Albany Music Foundation	25,000.00
Albany Pro Musica	400.00
Albany Pro Musica	100.00

THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION
ATTACHMENT TO FORM 990, SCHEDULE I

Albany Pro Musica	300.00
Albany Pro Musica	2,700.00
Albany Public Library Foundataion	2,500.00
Albany Rural Cemetery	700.00
Albany Symphony Orchestra	1,500.00
Albany Symphony Orchestra	1,000.00
Albany Symphony Orchestra	1,000.00
Albany Symphony Orchestra	250.00
Albany Symphony Orchestra	1,000.00
Albany Symphony Orchestra	5,000.00
Albany Symphony Orchestra	500.00
Albany Symphony Orchestra	2,500.00
Albany Symphony Orchestra	750.00
Albany Symphony Orchestra	10,000.00
Albany_Tula Alliance	500.00
Aloha Foundation, Inc.	900.00
Aloha Foundation, Inc.	2,300.00
Alzheimers Disease Research	50.00
American Baptist Churches of New York State	1,000.00
American Cancer Society	1,000.00
American Cancer Society	3,730.00
American Civil Liberties Union Foundation	250.00
American Diabetes Association	200.00
American Express -VD- Feb/Mar 09 Expe	100.00
American Printing House for the Blind	100.00
American Red Cross of Northeastern New York	100.00
American Red Cross of Northeastern New York	4,000.00
American Red Cross of Northeastern New York	500.00
American Red Cross of Northeastern New York	100.00
American Red Cross of Northeastern New York	972.00
American Red Cross of Northeastern New York	100.00
American Red Cross of Northeastern New York	500.00
American Red Cross of Northeastern New York	5,000.00
American Red Cross of Northeastern New York	200.00
Americares	100.00
Amnesty International	150.00
Animal Protective Foundation	100.00
Animal Protective Foundation	200.00
Animal Shelter of Schoharie Valley	200.00
Animal Welfare League of the Greater Capital	400.00
Anti-Defamation League	7,500.00
Arbor Hill Community Center, Inc.	1,000.00
Arizona State University	500.00
Art Resource Transfer	1,000.00
Arthritis Foundation, Northeastern New York C	50.00
Arthritis Foundation, Northeastern New York C	200.00
Arts Center of the Capital Region	1,000.00

THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION

ATTACHMENT TO FORM 990, SCHEDULE I

Arts Center of the Capital Region	1,000.00
Arts Center of the Capital Region	500.00
ASPCA	200.00
Assisi in Albany	1,000.00
Association for the Protection of the Adirond	1,000.00
Autism Speaks	150.00
Beaver Cross Summer Camp	12,000.00
Bellport High School	351.00
Berkshire Taconic Community Foundation	6,327.00
Best Buddies New York	15,000.00
Bethesda House of Schenectady	5,000.00
Bethesda House of Schenectady	100.00
Bethesda House of Schenectady	500.00
Bethlehem Central Community Endowment Fund	937.00
Bethlehem Central Community Endowment Fund	750.00
Bethlehem Central High School	1,000.00
Birthright of Schenectady	100.00
Bishop's Appeal	4,000.00
Boca Raton Community Hospital	3,500.00
Boston College	5,000.00
Boston University	20,000.00
Boston University Development and Alumni Rela	1,000.00
Boston University School of Management	100.00
Bowling Green State University	4,500.00
Bowling Green State University	4,500.00
Boys & Girls Club of Albany	50.00
Boys & Girls Club of Albany	1,000.00
Boys & Girls Club of Albany	10,000.00
Boys & Girls Club of Schenectady	250.00
Brunswick Community Library	5,000.00
Business and Marketing Educators' Assoc. of t	1,000.00
Buxton School	10,000.00
Families in Need of Assistance	1,000.00
Camp Chingachgook - Capital District YMCA	1,000.00
Camp New Hope	500.00
Cancer Care, Inc.	200.00
Canine Working Companions	550.00
Capital City Rescue Mission	500.00
Capital City Rescue Mission	5,000.00
Capital City Rescue Mission	100.00
Capital City Rescue Mission	168.00
Capital City Rescue Mission	12,680.00
Capital City Rescue Mission	1,000.00
Capital District Child Care Coordinating Council	4,082.00
Capital District Child Care Coordinating Council	10,082.00
Capital District Community Gardens, Inc.	100.00
Capital District Community Gardens, Inc.	1,000.00

THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION
ATTACHMENT TO FORM 990, SCHEDULE I

Capital District Community Gardens, Inc.	5,000.00
Capital District Community Gardens, Inc.	10,000.00
Capital District Habitat for Humanity	4,485.00
Capital District Senior Softball Inc.	1,000.00
Capital District YMCA	300.00
Capital District YMCA	4,000.00
Capital Region Action Against Breast Cancer	5,000.00
Capital Region Sponsor-A-Scholar	500.00
Capital Region Sponsor-A-Scholar	2,000.00
Capital Region Sponsor-A-Scholar	1,930.00
Capital Region Sponsor-A-Scholar	1,500.00
Capital Region Sponsor-A-Scholar	1,500.00
Capital Region Youth Tennis Foundation	5,000.00
Capital Region Youth Tennis Foundation	250.00
Capital Region Youth Tennis Foundation	100.00
Capital Region Youth Tennis Foundation	1,000.00
Capital Repertory Company	250.00
Capital Repertory Company	150.00
Capital Repertory Company	200.00
Capital Repertory Company	300.00
CAPTAIN Youth & Family Services, Inc.	5,000.00
CARE	100.00
CARES, Inc.	1,000.00
Castleton State College	2,000.00
Catholic Charities of Rensselaer County	2,000.00
Catholic Charities of the Diocese of Albany	5,000.00
Catholic Charities of the Diocese of Albany	2,750.00
Catholic Charities of the Diocese of Albany	2,000.00
Catholic Charities of the Diocese of Albany	7,500.00
Catholic Charities of the Diocese of Albany	500.00
Cazenovia College	5,000.00
Center for Natural Wellness School of Massage	2,000.00
Center for the Disabled	500.00
Charitable Venture Foundation -VD- Re	4,000.00
Children's Literacy Initiative	8,000.00
Children's Literacy Initiative	2,400.00
Christian Appalachian Development Projects	100.00
Christian Brothers Academy	1,500.00
Christmas Feeling Fund	345.69
Christopher and Dana Reeve Foundation	500.00
Circle of Life Inc.	3,000.00
City Mission of Schenectady	100.00
City Mission of Schenectady	150.00
City of Albany, Dept. of Development & Planni	7,000.00
Clarkson University	1,000.00
ClearView Center, Inc.	15,000.00
Cobleskill Partnership, Inc.	2,000.00

THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION
ATTACHMENT TO FORM 990, SCHEDULE I

Cobbleskill Partnership, Inc.	7,500.00
Cobbleskill Partnership, Inc.	2,500.00
Cohoes Community Center, Inc.	5,000.00
Cohoes Community Center, Inc.	3,500.00
Cohoes Community Center, Inc.	8,000.00
Cohoes Community Center, Inc.	1,000.00
Colgate University	2,500.00
College at Old Westbury	900.00
College at Old Westbury	2,400.00
College at Oneonta	5,000.00
College of Environmental Science & Forestry	4,500.00
Colonie Senior Services Centers, Inc.	100.00
Colonie Youth Center Foundation, Inc.	5,000.00
Columbia Greene Community College	2,000.00
Commission on Economic Opportunity	7,000.00
Community Maternity Services	950.00
Compassion in Action	3,000.00
Concerned for the Hungry	2,000.00
Concerned for the Hungry	100.00
Concerned for the Hungry	200.00
Congregation Beth Emeth	450.00
Congregation Ohav Shalom	1,500.00
Congregation Rodeth Shalom	2,360.80
Connecticut College	(1,000.00)
Cornell Cooperative Extension Schenectady Cou	1,400.00
Cornell University	6,500.00
Cornell University	100,000.00
Cornell University Law School	250.00
Council on Foundations	3,190.00
Covenant House New York	100.00
C-R Productions at the Cohoes Music Hall	500.00
Dartmouth College	1,000.00
Dartmouth College	500.00
Daughters of Sarah Jewish Foundation	1,250.00
Deerfield Academy Memorial Fund	300.00
Defenders of Wildlife	100.00
DeMatha High School	500.00
Desert Hills Presbyterian Church	2,000.00
Destroyer Escort Historical Foundation	5,000.00
Double "H" Hole in the Woods Ranch	500.00
Duanesburg Area Community Center	10,000.00
Dudley Observatory	2,500.00
Dudley Observatory	5,000.00
Dudley Observatory	3,000.00
Dutchess Com College	(1,500.00)
eba Dance Theater	1,000.00
Ellis Hospital Foundation	1,500.00

THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION
ATTACHMENT TO FORM 990, SCHEDULE I

Ellis Hospital Foundation	1,000.00
Elmira College	5,000.00
Emma Willard School	250.00
Empire State Youth Orchestra	550.00
Empire State Youth Orchestra	100.00
Endicott College	5,000.00
Endicott College	5,000.00
Environmental Advocates of New York	150.00
Environmental Defense	100.00
Equinox, Inc.	200.00
Equinox, Inc.	5,000.00
Equinox, Inc.	100.00
Equinox, Inc.	5,000.00
Equinox, Inc.	250.00
Equinox, Inc.	30,000.00
Equinox, Inc.	400.00
Family of Woodstock	2,000.00
Feed the Children	100.00
Fellowship of Christian Athletes (FCA)	250.00
FINCA International, Inc.	300.00
First Avenue Peer Support Center	3,000.00
First Reformed Church of Glenville	200.00
Five Rivers Limited Education Center	366.00
FOCUS Churches of Albany	5,000.00
Food Pantries for the Capital District	500.00
Fort Edward Fire Company	300.00
Fort Edward Union Free School District	500.00
Fort Ticonderoga	100.00
Franklin & Marshall College	1,787.00
Fresh Air Fund	100.00
Fresh Air Fund	2,500.00
Friends of Tanglewood	650.00
Friends of Tanglewood	(700.00)
George Washington University	3,000.00
Gilda's Club Capital Region New York, Inc.	100.00
Gilda's Club Capital Region New York, Inc.	5,000.00
Girl Scouts of Northeastern New York	500.00
Girl Scouts of Northeastern New York	5,000.00
Girls Incorporated of the Greater Capital Reg	300.00
Girls Incorporated of the Greater Capital Reg	5,000.00
Girls Incorporated of the Greater Capital Reg	650.00
Girls Incorporated of the Greater Capital Reg	5,000.00
Glenclyff Elementary School	500.00
Glens Falls Family YMCA	250.00
Glens Falls Hospital Foundation	1,000.00
Glimmerglass Opera, Inc.	1,200.00
Glimmerglass Opera, Inc.	150.00

THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION
ATTACHMENT TO FORM 990, SCHEDULE I

Grafton Community Library	3,241.00
Grafton Community Library	482.00
Grand Boulevard Fire Company, Inc.	500.00
Grand Street Community Arts	3,000.00
Grand Valley State University	2,750.00
Green Acres School	1,250.00
Green Mountain College	4,000.00
Greenville College	2,750.00
Guilderland Babe Ruth, LLC	10,000.00
Habitat For Humanity	100.00
Habitat for Humanity of No. Saratoga, Warren	1,025.00
Habitat for Humanity of Schenectady County	200.00
Habitat for Humanity of Schenectady County	100.00
Hale House	100.00
Hamilton Hill Arts Center	6,000.00
Hannah's Hope Fund	200.00
Harrisena Community Church	500.00
Hartwick College	1,000.00
Haven of Schenectady, Inc.	325.00
High Peaks Hospice	1,000.00
Historic St. Agnes Cemetery	3,000.00
Hoosac School	7,000.00
Hospice and Palliative Care Association of Ne	100.00
Hospitallier Brothers St. John of God School	100.00
Houghton College and Ms. Kerstin Chee	(2,000.00)
Hudson Crossing Park	5,000.00
Hudson Crossing Park	5,000.00
Hudson Mohawk Industrial Gateway	500.00
Hudson Post #184 American Legion	1,725.00
Hudson Valley Community College	3,000.00
Hudson Valley Community College	5,000.00
Hudson Valley Community College	5,000.00
Hudson Valley Community College	950.00
Hudson Valley Community College	200.00
Hudson Valley Community College	550.00
Hudson Valley Community College	300.00
Hudson Valley Community College	4,000.00
Hudson Valley Community College	(1,500.00)
Hudson Valley Community College	(1,500.00)
Hudson Valley Community College	(300.00)
Imagination Stage	200.00
Interfaith Partnership for the Homeless	17,500.00
Interfaith Partnership for the Homeless	10,000.00
Ithaca College	5,000.00
Ithaca College	5,000.00
Jacob's Pillow Dance Festival	500.00
Jerusalem Reformed Church	5,500.00

THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION
ATTACHMENT TO FORM 990, SCHEDULE I

Jewish Family Services of Northeastern New Yo	400.00
Jewish Federation of Palm Beach County	3,500.00
Johnsburg Emergency Squad Inc	100.00
Junior Achievement of Northeastern New York,	500.00
Juvenile Diabetes Research Foundation	150.00
Keuka College	11,000.00
La Salle Institute	300.00
La Salle Institute	5,000.00
La Salle School, Inc.	1,000.00
Lake George Land Basin Conservancy	250.00
Lance Armstrong Foundation	500.00
Legal Aid Society of Northeastern New York, I	5,000.00
Leukemia & Lymphoma Society, Upstate New York	50.00
Leukemia & Lymphoma Society, Upstate New York	250.00
Leukemia & Lymphoma Society, Upstate New York	250.00
Lifetime Care, Inc.	5,000.00
Lighthouse International	50.00
Lincoln University	5,000.00
Literacy New York Greater Capital Region	2,500.00
Literacy Volunteers of America - Greater Rens	100.00
Literacy Volunteers of America - Mohawk/Hudso	100.00
Little Sisters of the Poor	3,245.00
Livingston Tanzania Trust	4,000.00
Livingston Tanzania Trust	9,850.00
Livingston Tanzania Trust	(2,630.00)
Livingston Tanzania Trust	12,480.00
M.D. Anderson Cancer Center	100.00
Macular Degeneration Research	50.00
Maimonides Hebrew Day School	5,100.00
Make-A-Wish Foundation of Northeast New York	1,000.00
Make-A-Wish Foundation of Northeast New York	200.00
Make-A-Wish Foundation of Northeast New York	100.00
MAPS	500.00
Marathon for a Better Life	6,725.00
Maria College	1,000.00
Martha's Vineyard Hospital, Inc.	500.00
Martha's Vineyard Preservation Trust	250.00
Massachusetts College of Liberal Arts	1,000.00
Media Alliance	1,000.00
Mercersburg Academy	6,000.00
Mercy Home for Boys and Girls	200.00
Metropolitan Opera Guild	125.00
Michigan State University Foundation	1,500.00
Middle Grove United Methodist Church	919.00
Miracle House	100.00
Mohawk and Hudson River Humane Society	375.00
Mohawk Hudson Land Conservancy	500.00

THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION
ATTACHMENT TO FORM 990, SCHEDULE I

Monroe Community College	2,000.00
Montgomery Blair High School	250.00
Mount Holyoke College Art Museum	1,000.00
Mount Holyoke College Art Museum	500.00
Mount St. Mary's College	2,000.00
Ms. Magazine	100.00
Math Olympics	750.00
Music Mobile, Inc.	2,000.00
Music Mobile, Inc.	500.00
Musicians of Ma'alwyck, Inc.	250.00
National Anti-Vivisection Society	100.00
National Brain Tumor Society	3,500.00
National Kidney Foundation of Northeast New Y	100.00
National Multiple Sclerosis Society	100.00
National Multiple Sclerosis Society	200.00
Natural History Museum of the Adirondacks	1,000.00
Nature Conservancy	100.00
New England Institute of Art	4,500.00
New York State for Veterans, Inc.	3,500.00
New York University	4,800.00
Niskayuna Booster Club	325.00
Niskayuna Central School District	1,358.76
Niskayuna Central School District	500.00
Niskayuna Central School District	100.00
Niskayuna Central School District	5,000.00
Niskayuna Community Day Care	600.00
Niskayuna High School	500.00
Niskayuna High School	1,000.00
Niskayuna High School	1,000.00
North Country Community College	3,000.00
North Country Ministry	250.00
North Country Public Radio	200.00
North River Volunteer Fire Department	100.00
Northeast Health Foundation	1,000.00
Northeast Health Foundation	500.00
Northeast Parent and Child Society	300.00
Northeastern Association of the Blind	3,000.00
Northeastern Association of the Blind	3,245.00
Northeastern Association of the Blind	300.00
Norwich University	1,000.00
Ohio Wesleyan University	25.00
Oley Foundation	2,000.00
Olivet Nazarene University	(250.00)
Olivet Nazarene University	(250.00)
Our Lady of Hope Residence	100.00
Our Town Theatre Group	100.00
Outward Bound Wilderness	1,000.00

THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION
ATTACHMENT TO FORM 990, SCHEDULE I

Park Playhouse	350.00
Park Playhouse	600.00
Park Playhouse	2,000.00
Parks & Trails New York	3,000.00
Parsons Child and Family Center	576.00
Parsons Child and Family Center	400.00
Paul Smith's College	4,500.00
Paul Smith's College	4,500.00
PAZAPA	250.00
Peaceful Acres	10,000.00
Pediatric Early Developmental and Screening	5,000.00
Pendale Hill School	250.00
Peter G. Young Foundation	2,100.00
Planned Parenthood Mohawk Hudson, Inc.	250.00
Planned Parenthood Mohawk Hudson, Inc.	1,000.00
Powell House	150.00
Pratt at Munson Williams	50.00
Pratt Institute	500.00
Proctor's Theatre	500.00
Proctor's Theatre	1,000.00
Proctor's Theatre	5,000.00
Proctor's Theatre	5,000.00
Project Hope	100.00
Prospect Child and Family Center	400.00
Protect the Adirondacks	5,000.00
Rally Foundation, Inc.	100.00
Rebuild Together Saratoga County, Inc.	1,025.00
Rebuild Together Saratoga County, Inc.	10,000.00
Rebuild Together Saratoga County, Inc.	12,000.00
Recording for the Blind and Dyslexic, Inc.	200.00
Regional Food Bank of Northeastern New York	100.00
Regional Food Bank of Northeastern New York	150.00
Regional Food Bank of Northeastern New York	350.00
Regional Food Bank of Northeastern New York	375.00
Regional Food Bank of Northeastern New York	440.00
Regional Food Bank of Northeastern New York	450.00
Regional Food Bank of Northeastern New York	545.00
Regional Food Bank of Northeastern New York	100.00
Regional Food Bank of Northeastern New York	250.00
Regional Food Bank of Northeastern New York	100.00
Regional Food Bank of Northeastern New York	250.00
Regional Food Bank of Northeastern New York	500.00
Rensselaer County Historical Society	5,000.00
Rensselaer County Historical Society	2,000.00
Rensselaer Polytechnic Institute	4,000.00
Rensselaer Polytechnic Institute	(700.00)
Rensselaer Polytechnic Institute	(225.00)

THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION
ATTACHMENT TO FORM 990, SCHEDULE I

Rensselaer Presbyterian Church	2,000.00
Residents Committee to Protect the Adirondack	5,000.00
Ringling College of Art & Design	5,000.00
Rochester Institute of Technology	4,500.00
Rochester Institute of Technology	1,666.00
Rochester Institute of Technology	3,334.00
Roessleville School	150.00
Ronald McDonald House Charities of the Capital Region	1,250.00
Rosarian Academy	1,000.00
Rosendale Elementary School	500.00
Sacred Heart Church	1,000.00
Sacred Heart School	500.00
Sacred Heart School	500.00
Sacred Heart School	500.00
Safe Incorporated of Schenectady	250.00
Salvation Army Schenectady Citadel Corps.	200.00
Salvation Army, Albany Chapter	10,000.00
Salvation Army, Albany Chapter	100.00
Salvation Army, Albany Chapter	500.00
San Francisco Camerawork	1,127.00
Sand Lake Ambulance, Inc.	4,950.00
Saratoga Bridges - NYSARC	5,000.00
Saratoga Care Foundation	50,000.00
Saratoga County Animal Shelter	1,000.00
Saratoga County Animal Shelter	1,250.00
Saratoga County Rural Preservation Co.	1,000.00
Saratoga County Rural Preservation Co.	1,250.00
Saratoga P.L.A.N.	10,000.00
Saratoga P.L.A.N.	6,000.00
Saratoga Performing Arts Center, Inc.	1,350.00
Saratoga Performing Arts Center, Inc.	1,500.00
Saratoga Springs High School	10,000.00
Save the Children	100.00
Schenectady ARC	14,975.00
Schenectady County Community College	951.00
Schenectady County Community College	750.00
Schenectady County Community College	3,000.00
Schenectady County Community College	2,000.00
Schenectady County Community College	952.00
Schenectady County Working Group on Girls	1,000.00
Schenectady Day Nursery	7,500.00
Schenectady Inner City Ministry	375.00
Schenectady Inner City Ministry	5,000.00
Schenectady Inner City Ministry	1,000.00
Schenectady Inner City Ministry	100.00
Schenectady Museum and Planetarium	100.00
Schenectady Symphony Orchestra Association	500.00

THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION
ATTACHMENT TO FORM 990, SCHEDULE I

Schenectady Symphony Orchestra Association	100.00
Schodack Central School District	1,000.00
Schoharie County Arts Council, Inc.	2,500.00
Science Teachers Association of New York Stat	600.00
Scotia Glenville Middle School	800.00
Scotia-Glenville Childrens Museum	5,000.00
Senior Services of Albany	100.00
Senior Services of Albany	360.00
Senior Services of Albany	1,000.00
Senior Services of Albany Foundation	500.00
Seton Health Foundation, Inc.	500.00
Sharon Springs Central School	200.00
Sharon Springs Central School	400.00
Shelters of Saratoga	4,000.00
Shenendehowa Dollars for Scholars	1,000.00
Siena College	5,000.00
Siena College	5,000.00
Siena College	50,000.00
Skidmore College	100,000.00
Snyder Printer -VD- Women's Fund News	947.00
South Kortright Central School	345.69
Spark the Wave	500.00
Special Olympics New York	50.00
Springfield College	5,000.00
St. Anne Institute Foundation	2,500.00
St. Anne Institute Foundation	300.00
St. Bonaventure University	4,500.00
St. Catherine's Center for Children	200.00
St. Catherine's Center for Children	2,000.00
St. Catherine's Center for Children	1,000.00
St. Catherine's Center for Children	300.00
St. John Fisher College	4,000.00
St. John Fisher College	5,000.00
St. John's-St. Ann's Center	100.00
St. Joseph's Indian School	100.00
St. Jude Children's Research Hospital	100.00
St. Jude Children's Research Hospital	555.00
St. Labre Indian School	100.00
St. Margaret's Center for Children	300.00
St. Mary's Academy	3,000.00
St. Patrick Catholic Church	10,000.00
St. Peter's Hospital	50,000.00
St. Peter's Hospital	5,000.00
St. Peter's Hospital Foundation, Inc.	1,000.00
St. Peter's Hospital Foundation, Inc.	100.00
St. Peter's Hospital Foundation, Inc.	1,000.00
St. Pius X Church	4,000.00

THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION
ATTACHMENT TO FORM 990, SCHEDULE I

Stars Interger Corporation	500.00
Stars Interger Corporation	1,000.00
Stillwater Free Library	250.00
Stillwater United Church	250.00
STRIDE, Inc.	4,000.00
STRIDE, Inc.	12,000.00
Sunnyview Hospital and Rehabilitation Center	1,000.00
Sunnyview Hospital and Rehabilitation Center	1,000.00
Sunnyview Hospital and Rehabilitation Center	250.00
SUNY Binghamton University	500.00
SUNY Canton	4,000.00
SUNY Canton	4,000.00
SUNY Cobleskill Foundation	350.00
SUNY Cobleskill Foundation	4,000.00
SUNY Cortland - Office of Financial Aid	4,000.00
SUNY Cortland - Office of Financial Aid	10,000.00
SUNY Delhi, Enrollment Services	4,500.00
SUNY Delhi, Enrollment Services	4,500.00
SUNY Delhi, Enrollment Services	500.00
SUNY Geneseo	1,000.00
SUNY Institute of Technology	1,000.00
SUNY Morrisville	3,000.00
SUNY New Paltz	1,500.00
SUNY Oneonta	4,000.00
SUNY Oneonta	2,000.00
SUNY Oneonta	1,200.00
SUNY Plattsburgh	4,000.00
SUNY Plattsburgh	4,000.00
SUNY Plattsburgh	4,000.00
SUNY Plattsburgh	500.00
SUNY Potsdam	500.00
SUNY Potsdam	4,000.00
SUNY Potsdam	4,500.00
SUNY Upstate Medical University	4,350.00
Swarthmore College	250.00
Syracuse University	1,000.00
Syracuse University	700.00
Syracuse University	675.00
Tannery Pond Community Center Association	100.00
Temple Beth El	360.00
Teresian House Nursing Home Company, Inc.	1,000.00
The Adirondack Council	100.00
The Albany Academies	2,000.00
The Alliance to End Hunger	1,000.00
The Ballston Spa Business & Professional Asss	200.00
The Beacon Institute for Rivers and Estuaries	10,000.00
The Catie Hoch Foundation	1,000.00

THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION
ATTACHMENT TO FORM 990, SCHEDULE I

The Center for International Education	157,500.00
The Center for International Education	20,000.00
The Children's Museum of Science and Technolo	4,000.00
The Children's Museum of Science and Technolo	2,500.00
The Children's Museum of Science and Technolo	100.00
The Children's Museum of Science and Technolo	250.00
The Children's Museum of Science and Technolo	15,000.00
The College of Saint Rose	2,000.00
The College of Saint Rose	2,500.00
The College of Saint Rose	5,000.00
The College of Saint Rose	1,000.00
The College of Saint Rose	3,000.00
The College of Saint Rose	5,000.00
The College of Saint Rose	10,000.00
The Community Hospice Foundation	200.00
The Community Hospice Foundation	300.00
The Community Hospice Foundation	1,000.00
The Community Hospice Foundation	250.00
The Community Hospice Foundation	500.00
The Community Hospice, Inc	100.00
The Cousteau Society	250.00
The Doane Stuart School	500.00
The Emmanuel United Church Youth Theatre Mini	500.00
The Fast Break Fund	2,250.00
The Fearless Theatre Company, Ltd.	500.00
The Fund for Lake George	250.00
The Hole in the Wall Gang Camp	500.00
The Hudson Valley Writers Guild	100.00
The Jim Arden Foundation	300.00
The Lake George Association	250.00
The Lake George Association	250.00
The Lamplighter Foundation, Inc.	1,000.00
The Lamplighter Foundation, Inc.	5,000.00
The Legal Project	4,000.00
The Loomis Chaffee School	25.00
The Nature Conservancy Eastern New York Chapt	3,000.00
The New England Anti-Vivisection Society	200.00
The New York Bar Foundation	250.00
The North Queensbury Rescue Squad	500.00
The North Queensbury Volunteer Fire Departmen	500.00
The Oriental Shrine Circus	100.00
The Reformed Church of New Paltz	1,000.00
The Rensselaerville Institute	3,300.00
The Roman Catholic Diocese of Albany	5,000.00
The Sage Colleges	2,000.00
The Sage Colleges	500.00
The Sage Colleges	4,500.00

THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION
ATTACHMENT TO FORM 990, SCHEDULE I

The Sage Colleges	500.00
The Sage Colleges	300.00
The Salvation Army	500.00
The Salvation Army, Schenectady	100.00
The Samaritan Counseling Center of the Capital	15,000.00
The Southern Poverty Law Center	250.00
The Spartanburg County Foundation	500.00
The Stakeholders Foundation	100.00
The Stakeholders Foundation	3,500.00
The Stakeholders Foundation	5,500.00
The Tunahaki Foundation	500.00
The University at Albany Foundation	1,500.00
The University at Albany Foundation	7,500.00
The University at Albany Foundation	100.00
The University at Albany Foundation	5,000.00
The University at Albany Foundation	10,000.00
The University at Albany Foundation	250.00
The Vineyard Playhouse	100.00
The Wooster School	50.00
The Writer's Center	250.00
To Life! Inc.	2,000.00
Totem Project c/o Ecologia - Virtual Foundati	3,500.00
Town of Johnsbury Library Foundation, Inc.	100.00
Town of Sharon	200.00
Trinity Alliance of the Capital District	100.00
Trinity Alliance of the Capital District	100.00
Trinity Alliance of the Capital District	400.00
Trinity Institution - Homer Perkins Center, I	8,840.00
Troy Boys and Girls Club	100.00
Troy Boys and Girls Club	10,000.00
Troy Savings Bank Music Hall Corp.	1,000.00
UNICEF	100.00
Union College	1,000.00
Union College	2,400.00
Union College	1,000.00
Union College	6,000.00
United Jewish Federation of Northeastern NY	5,000.00
United Jewish Federation of Northeastern NY	3,200.00
United Jewish Federation of Northeastern NY	2,500.00
United Jewish Federation of Northeastern NY	360.00
United Jewish Federation of Northeastern NY	109.00
United Negro College Fund	250.00
United Way of Palm Beach County, Inc.	500.00
United Way of the Greater Capital Region, Inc	800.00
United Way of the Greater Capital Region, Inc	400.00
United Way of the Greater Capital Region, Inc	20,000.00
United Way of the Greater Capital Region, Inc	5,000.00

THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION
ATTACHMENT TO FORM 990, SCHEDULE I

United Way of the Greater Capital Region, Inc	800.00
Unity House of Troy, Inc.	5,000.00
Unity House of Troy, Inc.	-
Unity House of Troy, Inc.	7,500.00
Unity House of Troy, Inc.	(675.00)
University at Albany	1,000.00
University at Albany	3,000.00
University at Albany	4,500.00
University at Albany	4,500.00
University at Albany	4,500.00
University at Albany	4,000.00
University at Albany	4,500.00
University at Albany	4,500.00
University at Albany	(500.00)
University of Buffalo	(400.00)
University of Buffalo	3,000.00
University of Illinois at Urbana Champagne	(1,500.00)
University of Massachusetts at Lowell	2,000.00
Upper Hudson Musical Arts, Inc	100.00
Upper Hudson Planned Parenthood	500.00
Upper Hudson Planned Parenthood	100.00
Upper Hudson Planned Parenthood	500.00
Urban Ecology Center	125.00
Urban Ecology Center	125.00
Urban Initiatives	1,000.00
Vanderheyden Hall, Inc.	1,000.00
Vermont Land Trust	250.00
Visiting Nurse Association of Albany, Inc.	100.00
Visiting Nurse Association of Albany, Inc.	250.00
Volunteer Physicians Project of Schenectady,	30,000.00
Volunteer Physicians Project of Schenectady,	5,000.00
WAMC FM	100.00
WAMC FM	250.00
WAMC FM	250.00
Washington Park Conservancy	250.00
Watervliet Civic Chest, Inc.	170.00
West Valley Family YMCA	500.00
West Virginia University	4,500.00
Western New England College	4,500.00
Western New England College	4,500.00
Westfield State College	4,000.00
WETA	250.00
Wheelock College	5,000.00
Wide Horizons for Children	450.00
Wildwood Foundation	4,750.00
Wildwood Foundation	1,000.00
Wildwood Foundation	10,000.00

THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION
ATTACHMENT TO FORM 990, SCHEDULE I

Wildwood Foundation	800.00
William Woods University	200.00
WMHT Educational Telecommunications	250.00
WMHT Educational Telecommunications	250.00
WMHT Educational Telecommunications	250.00
WMHT Educational Telecommunications	100.00
WMHT Educational Telecommunications	250.00
WMHT Educational Telecommunications	1,500.00
WMHT Educational Telecommunications	800.00
Women for Afghan Women	500.00
Woodside Diversity Program	10,000.00
World Church Service, Inc.	500.00
Young Life Maryland 95	1,000.00
YWCA of Schenectady	5,000.00
YWCA of Schenectady	250.00
Other	66.42
	2,257,261.00

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

► **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
► **Attach to Form 990.**

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization **THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION, INC.**

Employer identification number
14-1505623

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art - Works of art				
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				
10 Securities - Closely held stock	X	1	3,987,200.	STOCK VALUATION REPO
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 Acknowledgment

29

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

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

31 Does the organization have a gift acceptance policy that requires the review of any non-standard 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 did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31	X	
32a		X

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2009

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization	THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION, INC.	Employer identification number 14-1505623
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FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

LIFE IN THE COMMUNITY.

FORM 990, PART VI, SECTION A, LINE 3: THE BOARD OF DIRECTORS OF THE
COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION (CFGCR), AND CFGCR
FINANCE COMMITTEE (THE "COMMITTEE") ARE CHARGED WITH THE RESPONSIBILITY FOR
THE INVESTMENT OF THE ENDOWED ASSETS (THE "PORTFOLIO") OF CFGCR. THE BOARD
OF DIRECTORS WORKS WITH INVESTMENT MANAGERS, AN INVESTMENT CONSULTANT AND A
CUSTODIAN TO MEET THE GOALS OF CFGCR'S STATEMENT OF INVESTMENT POLICY.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 WAS PRESENTED TO ALL
BOARD MEMBERS ELECTRONICALLY BEFORE FILING. BOARD MEMBERS ARE GIVEN TEN
BUSINESS DAYS TO RESPOND. IN ADDITION, THE AUDIT AND FINANCE COMMITTEES
REVIEW THE FORM 990. THE IRS FORM 990 IS FILED BY CFGCR'S AUDITING FIRM.

FORM 990, PART VI, SECTION B, LINE 12C: ALL BOARD, COMMITTEE VOLUNTEERS
AND STAFF ARE REQUIRED TO COMPLETE THE CODE OF CONDUCT, CONFIDENTIALITY AND
CONFLICT OF INTEREST DISCLOSURES ANNUALLY. THE DOCUMENTS ARE DISTRIBUTED
PRIOR TO THE FIRST MEETING OF THE BOARD TERM AND ARE KEPT ON FILE AT THE
CFGCR OFFICES.

FORM 990, PART VI, SECTION B, LINE 15: THE ORGANIZATION'S CEO IS EVALUATED
ANNUALLY BY THE CFGCR EXECUTIVE COMMITTEE. THE CEO COMPLETES A
SELF-EVALUATION AND PROVIDES THE COMMITTEE WITH THE CEO JOB DESCRIPTION AND
A CHART OF PROGRESS ON STATED GOALS. THE COMMITTEE ALSO RECEIVES

COMPARATIVE INFORMATION ON SALARIES OF COMMUNITY FOUNDATION CEO'S FROM THE

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

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Name of the organization

THE COMMUNITY FOUNDATION FOR THE GREATER
CAPITAL REGION, INC.

Employer identification number
14-1505623

COUNCIL ON FOUNDATION'S COMPENSATION SUMMARY. THE COMMITTEE REVIEWS THE
INFORMATION PROVIDED AND COMPLETES A REVIEW OF THE CEO. THIS EVALUATION IS
SHARED WITH THE CEO AND THE ENTIRE BOARD. THE BOARD CONFIRMS ANY CHANGES TO
SALARY AND BENEFITS BASED ON THE EVALUATION AND BUDGET CONSIDERATIONS.

FORM 990, PART VI, SECTION C, LINE 19: CFGCR MAKES ITS AUDITED FINANCIAL
STATEMENTS AVAILABLE TO THE PUBLIC ON ITS WEBSITE AND UPON REQUEST. OTHER
GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 2C

THIS PROCESS HAS NOT CHANGED SINCE THE PRIOR YEAR.

**Application for Extension of Time To File an
Exempt Organization Return**

OMB No. 1545-1709

► File a separate application for each return

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Type or print File by the due date for filing your return See instructions	Name of Exempt Organization THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION, INC.	Employer identification number 14-1505623
	Number, street, and room or suite no. If a P.O. box, see instructions. 6 TOWER PLACE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ALBANY, NY 12203	

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|------------------------------------|
| ☒ Form 990 | ☐ Form 990-T (corporation) | ☐ Form 4720 |
| ☐ Form 990-BL | ☐ Form 990-T (sec. 401(a) or 408(a) trust) | ☐ Form 5227 |
| ☐ Form 990-EZ | ☐ Form 990-T (trust other than above) | ☐ Form 6069 |
| ☐ Form 990-PF | ☐ Form 1041-A | ☐ Form 8870 |

THE ORGANIZATION

- The books are in the care of ► **6 TOWER PLACE - ALBANY, NY 12203**

Telephone No. ► **(518) 446-9638**

FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover.

- 1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2010**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ☒ calendar year **2009** or
- ☐ tax year beginning _____, and ending _____.

- 2 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$ N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev. 4-2009)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION, INC.	Employer identification number 14-1505623
	Number, street, and room or suite no. If a P.O. box, see instructions. 6 TOWER PLACE	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ALBANY, NY 12203	

Check type of return to be filed (File a separate application for each return):

- ☒ Form 990
 ☐ Form 990-EZ
 ☐ Form 990-T (sec. 401(a) or 408(a) trust)
 ☐ Form 1041-A
 ☐ Form 5227
 ☐ Form 8870
☐ Form 990-BL
☐ Form 990-PF
☐ Form 990-T (trust other than above)
☐ Form 4720
☐ Form 6069

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

THE ORGANIZATION

- The books are in the care of **6 TOWER PLACE - ALBANY, NY 12203**
 Telephone No. **(518) 446-9638** FAX No. _____
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 4 I request an additional 3-month extension of time until **NOVEMBER 15, 2010**.
- 5 For calendar year **2009**, or other tax year beginning _____, and ending _____.
- 6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period
- 7 State in detail why you need the extension
ADDITIONAL TIME IS NEEDED TO PREPARE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$ N/A

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ☐

Title **PRESIDENT**

Date ☐