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Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

2009

Open to Public
Inspection

Form **990-EZ**

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

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.
▶ *The organization may have to use a copy of this return to satisfy state reporting requirements.*

Department of the Treasury
Internal Revenue Service

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

<p>B Check if applicable:</p> <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<p>Please use IRS label or print or type. See Specific Instructions.</p>	<p>C Name of organization PARTNERSHIP FOR COMMUNITY DEVELOPMENT, LTD Number and street (or P.O. box, if mail is not delivered to street address) Room/suite PO BOX 37 City or town, state or country, and ZIP + 4 HAMILTON, NY 13346</p>	<p>D Employer identification number 16-1572206</p> <p>E Telephone number (315) 824-1063</p> <p>F Group Exemption Number ▶</p>
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• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method: Cash Accrual
 Other (specify) ▶

I Website: ▶ **WWW.PARTNERSATWORK.ORG**

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

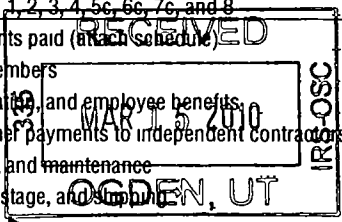
K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ **\$ 142,456.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)			
Revenue	1 Contributions, gifts, grants, and similar amounts received	1	108,163.
	2 Program service revenue including government fees and contracts	2	625.
	3 Membership dues and assessments	3	
	4 Investment income	4	
	5a Gross amount from sale of assets other than inventory	5a	
	b Less: cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>		
	a Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	
	b Less: direct expenses other than fundraising expenses	6b	
	c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	
	7a Gross sales of inventory, less returns and allowances	7a	
	b Less: cost of goods sold	7b	
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	8 Other revenue (describe ▶ SEE STATEMENT 4)	8	33,668.
	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	142,456.
Expenses	10 Grants and similar amounts paid (attach schedule)	10	
	11 Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	21,538.
	13 Professional fees and other payments to independent contractors	13	59,840.
	14 Occupancy, rent, utilities, and maintenance	14	
	15 Printing, publications, postage, and supplies	15	1,797.
	16 Other expenses (describe ▶ SEE STATEMENT 1)	16	15,049.
	17 Total expenses. Add lines 10 through 16	17	98,224.
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	44,232.
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	16,861.
	20 Other changes in net assets or fund balances (attach explanation)	20	
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	61,093.

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ. (See the instructions for Part II.)			
		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	40,850.	52,040.
23	Land and buildings	23	0.
24	Other assets (describe ▶ SEE STATEMENT 2)	46,961.	15,438.
25	Total assets	87,811.	67,478.
26	Total liabilities (describe ▶ SEE STATEMENT 3)	70,950.	6,385.
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	16,861.	61,093.

SCANNED APR 01 2010



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PARTNERSHIP FOR COMMUNITY DEVELOPMENT, LTD

Part V Other Information (Note the statement requirements in the instructions for Part V.)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		
a	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Sch. N		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0.		
b	Did the organization file Form 1120-POL for this year?		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A		
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9 39a N/A		
b	Gross receipts, included on line 9, for public use of club facilities 39b N/A		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0. ; section 4912 ▶ 0. ; section 4955 ▶ 0.		
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0.		
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ 0.		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		X
41	List the states with which a copy of this return is filed. ▶ NY		
42a	The organization's books are in care of ▶ JENNIFER DEANGELIS, BUSINESS Telephone no. ▶ (315)824-1063 Located at ▶ 11 PAYNE STREET, HAMILTON, NY ZIP + 4 ▶ 13346		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts	Yes	No
42b			X
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ▶ _____		X
42c			X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43 N/A		
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
44			X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
45			X

PARTNERSHIP FOR COMMUNITY DEVELOPMENT, LTD

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

Table with 3 columns: Question (46-49b), Yes, No. Contains questions about political campaign activities, lobbying, school status, and transfers to exempt organizations.

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

Table with 5 columns: (a) Name and address of each employee paid more than \$100,000, (b) Title and average hours per week devoted to position, (c) Compensation, (d) Contributions to employee benefit plans & deferred compensation, (e) Expense account and other allowances. All entries are NONE.

f Total number of other employees paid over \$100,000

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

Table with 3 columns: (a) Name and address of each independent contractor paid more than \$100,000, (b) Type of service, (c) Compensation. All entries are NONE.

d Total number of other independent contractors each receiving over \$100,000

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: Roger Barajas, Managing Director. Date: 13/4/10.

Paid Preparer's Use Only: Preparer's signature: Leonard Ramos, CPA. Date: 02/17/10. Check if self-employed: []. Preparer's identifying number (See instr): (315) 735-5216. Firm's name (or yours if self-employed), address, and ZIP + 4: D'ARCANGELO & CO., LLP, 200 E. GARDEN ST., P.O. BOX 4300, ROME, NY 13442. EIN: []. Phone no.:

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

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 **PARTNERSHIP FOR COMMUNITY DEVELOPMENT, LTD** Employer identification number **16-1572206**

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

PARTNERSHIP FOR COMMUNITY

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.")	296,567.	218,959.	242,555.	190,403.	108,163.	1,056,647.
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	296,567.	218,959.	242,555.	190,403.	108,163.	1,056,647.
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)						
6 Public support. Subtract line 5 from line 4						1,056,647.

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	296,567.	218,959.	242,555.	190,403.	108,163.	1,056,647.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,416.	5,491.	3,539.	1,871.	625.	13,942.
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)	19,885.	28,530.	104,509.	1,363.	33,043.	187,330.
11 Total support. Add lines 7 through 10						1,257,919.
12 Gross receipts from related activities, etc. (see instructions)					12	5,688.

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	84.00 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	86.80 %

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

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

IRS Form 990, Part III

Partnership for Community Development, Inc.
EIN: 16-1572206

2009 served as a “stabilizing” year for Partnership for Community Development (PCD). The organization’s efforts concentrated on solvency and fiscal responsibility, so that going forward the PCD could re-engage in programming commensurate with its intended goals. With that, the 2009 program activity consisted of (1) completion of the Façade Improvement, (2) Marketing and Development, (3) grant administration duties for the Town of Hamilton’s 2-year Community Development Block Grant, and (4) fall fundraising campaign.

<u>2009 Accomplishments</u>	<u>Service Expenses</u>
<p><i>Façade Improvements</i> The Hamilton Façade Program ended this year with the completion of its final façade project. This program has been deemed particularly successful in that numerous downtown- Hamilton businesses have had a “face-lift”, and the owners of said businesses have a vested interest in the outwardly appearance of their establishments. The community at large has been particularly complimentary of the results</p>	57,035
<p><i>Marketing and Development</i> Jill Smith was hired as the PCD’s Marketing and Development Coordinator in July 2009. Since then, her efforts have been dedicated to advancing the PCD’s mission to attract new businesses and sustain existing business (Hamilton, Madison County, central New York and beyond) via press releases, advertising, and grant applications. The PCD successfully hosted an Arts Symposium, organized an ongoing Traffic & Safety task force and study, and initiated a Hamilton retail/restaurant survey (leading up to a round-table discussion in 2010).</p>	14,110
<p><i>Grant Administration</i> In 2009 the Town of Hamilton was awarded a \$400K Community Development Block Grant by New York State Dept. of Community Renewal, in which the PCD was designated by the Town of Hamilton to serve as the program administrator. PCD’s functions in this capacity during 2009 included file maintenance, attending workshops, mass mailings, submitting formal announcements and legal notices in newspapers, creating <i>Request for Proposals</i>, compilation and submission of numerous mandatory program documents, hosting informational public hearings, and general procedural compliance and development.</p>	<u>3,000</u>
Total of Program Service Expenses	<u>\$ 74,145</u>
<p><i>Fundraising</i> Over 1,500 area residents and known donors were contacted (via mass mailing) for PCD’s fall fundraising campaign; over \$8,000 was raised during the year.</p>	<u>650</u>

FORM 990-EZ	OTHER EXPENSES	STATEMENT	1
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DESCRIPTION	AMOUNT
PAYROLL TAXES	4,096.
ADVERTISING	727.
MISCELLANEOUS	109.
TRAVEL	736.
TELEPHONE AND INTERNET	1,607.
OFFICE EXPENSES	1,669.
DEPRECIATION	2,468.
INSURANCE	3,260.
PLANNING AND DEVELOPMENT	342.
FILING FEES	35.
TOTAL TO FORM 990-EZ, LINE 16	15,049.

FORM 990-EZ	OTHER ASSETS	STATEMENT	2
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DESCRIPTION	BEG. OF YEAR	END OF YEAR
GRANTS RECEIVABLE	29,276.	0.
REVOLVING LOANS RECEIVABLE	14,184.	15,565.
UNAMORTIZED DISCOUNT ON LOAN INTEREST	-1,496.	-1,903.
OTHER ASSETS	718.	0.
OTHER DEPRECIABLE ASSETS	4,279.	1,776.
TOTAL TO FORM 990-EZ, LINE 24	46,961.	15,438.

FORM 990-EZ	OTHER LIABILITIES	STATEMENT	3
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DESCRIPTION	BEG. OF YEAR	END OF YEAR
COMPENSATED ABSENCES	491.	0.
OTHER CURRENT LIABILITIES	2,068.	2,068.
ACCOUNTS PAYABLE	39,973.	4,317.
	28,418.	0.
TOTAL TO FORM 990-EZ, LINE 26	70,950.	6,385.

FORM 990-EZ

OTHER REVENUE

STATEMENT 4

DESCRIPTION

AMOUNT

RENTAL INCOME

625.

OTHER INCOME

33,043.

TOTAL TO FORM 990-EZ, LINE 8

33,668.

FORM 990-EZ

INFORMATION REGARDING TRANSFERS
ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

STATEMENT 5

A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS,
DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL
BENEFIT CONTRACT? [] YES [X] NO

B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS,
DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? . . [] YES [X] NO

FACADE IMPROVEMENTS

THE HAMILTON FACADE PROGRAM ENDED THIS YEAR WITH THE COMPLETION OF ITS FINAL FACADE PROJECT. THIS PROGRAM HAS BEEN DEEMED PARTICULARLY SUCCESSFUL IN THAT NUMEROUS DOWNTOWN- HAMILTON BUSINESSES HAVE HAD A "FACE-LIFT", AND THE OWNERS OF SAID BUSINESSES HAVE A VESTED INTERESTED IN THE OUTWARDLY APPEARANCE OF THEIR ESTABLISHMENTS. THE COMMUNITY AT LARGE HAS BEEN PARTICULARLY COMPLIMENTARY OF THE RESULTS.

MARKETING AND DEVELOPMENT

JILL SMITH WAS HIRED AS THE PCD'S MARKETING AND DEVELOPMENT COORDINATOR IN JULY 2009. SINCE THEN, HER EFFORTS HAVE BEEN DEDICATED TO ADVANCING THE PCD'S MISSION TO ATTRACT NEW BUSINESSES AND SUSTAIN EXISTING BUSINESS (HAMILTON, MADISON COUNTY, CENTRAL NEW YORK AND BEYOND) VIA PRESS RELEASES, ADVERTISING, AND GRANT APPLICATIONS. THE PCD SUCCESSFULLY HOSTED AN ARTS SYMPOSIUM, ORGANIZED AN ONGOING TRAFFIC & SAFETY TASK FORCE AND STUDY, AND INITIATED A HAMILTON RETAIL/RESTAURANT SURVEY (LEADING UP TO A ROUND-TABLE DISCUSSION IN 2010).

GRANT ADMINISTRATION

IN 2009 THE TOWN OF HAMILTON WAS AWARDED A \$400K COMMUNITY DEVELOPMENT BLOCK GRANT BY NEW YORK STATE DEPT. OF COMMUNITY RENEWAL, IN WHICH THE PCD WAS DESIGNATED BY THE TOWN OF HAMILTON TO SERVE AS THE PROGRAM ADMINISTRATOR. PCD'S FUNCTIONS IN THIS CAPACITY DURING 2009 INCLUDED FILE MAINTENANCE, ATTENDING WORKSHOPS, MASS MAILINGS, SUBMITTING FORMAL ANNOUNCEMENTS AND LEGAL NOTICES IN NEWSPAPERS, CREATING REQUEST FOR PROPOSALS,, COMPILATION AND SUBMISSION OF NUMEROUS MANDATORY PROGRAM DOCUMENTS, HOSTING INFORMATIONAL PUBLIC HEARINGS, AND GENERAL PROCEDURAL COMPLIANCE AND DEVELOPMENT.

TO ENHANCE THE ECONOMIC AND COMMUNITY VITALITY OF THE AREA OF THE TOWN/VILLGE OF HAMILTON, NY.

2009 SERVED AS A "STABILIZING" YEAR FOR PARTNERSHIP FOR COMMUNITY DEVELOPMENT (PCD). THE ORGANIZATION'S EFFORTS CONCENTRATED ON SOLVENCY AND FISCAL RESPONSIBILITY, SO THAT GOING FORWARD THE PCD COULD RE- ENGAGE IN PROGRAMMING COMMENSURATE WITH ITS INTENDED GOALS. WITH THAT, THE 2009 PROGRAM ACTIVITY CONSISTED OF (1) COMPLETION OF THE FACADE IMPROVEMENT, (2) MARKETING AND DEVELOPMENT, (3) GRANT ADMINISTRATION DUTIES FOR THE TOWN OF HAMILTON'S 2-YEAR COMMUNITY DEVELOPMENT BLOCK GRANT, AND (4) FALL FUNDRAISING CAMPAIGN.