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Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

	enue Service	Note. The fo	oundation may l	be able to use a copy of this	return to satisfy state repo	rting requirements.	
For calend	dar year 2009,	or tax year beginnin				MAR 31, 20	10
G Check	all that apply:	Initial retu		Initial return of a fo	rmer public charity	Final re	turn
Use the I	RO	oundation				A Employer identifica	tion number
Otherwis		O 2000, I	NC.			11-26549	45
print		street (or PO box numb	ber if mail is not de	livered to street address)	Room/suite	B Telephone number	
or type	. <u> E O DO</u>	X 1130				(607)547	-8881
See Spec Instructio	and City of too	vn, state, and ZIP cod				C if exemption application	· • —
	COOPE	RSTOWN, N		6-1130		D 1. Foreign organizat	tions, check here
	type of organiz			empt private foundation		check here and attac	s meeting the 85% test, ch computation
) nonexempt charitat		Other taxable private founda			status was terminated
		assets at end of year		•	Accrual	under section 507(b)(1)(A), check here
	Part II, col (c),			her (specify) mn (d) must be on cash t			n a 60-month termination
Dort !	Analysis of B	evenue and Expense				under section 507(t	(d) Disbursements
Parti	The total of am	ounts in columns (b), (c), all the amounts in column	and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
í		gifts, grants, etc., rec		132,378.		N/A	
-		if the foundation is not require gs and temporary	ed to attach Sch B	104	104		CONTRACTOR 1
3	cash investment			124. 7,944.	124. 7,944.		STATEMENT 1 STATEMENT 2
4	_	interest from securiti	ies	1,944.	7,344.		STATEMENT Z
	Gross rents Net rental income	o er (1000)			······································		
62		from sale of assets not o	on line 10	6,532.			
₽ P	Gross sales price assets on line 6a	for all	7,047.	0,3021			
0 (ncome (from Part IV, line			6,532.		
æ 8	Net short-term	capital gain					
9	Income modifi						
10a	Gross sales less and allowances						
R		sold					
C_	Gross profit-or	·(loss) ု ပျ					
8 14 C	Other income	10 O		32,213.	0.		STATEMENT 3
181 181	Total: Add'hii	es 1 through 11		179,191.	14,600.		40.000
13	Compensation o	cofficers, directors, truste esdiaries and wages	ees, etc	48,000. 18,582.	<u> </u>		48,000. 18,582.
(9)	Calle faultfoxe	e salaries arju wages , employee benefits	1	11,302.	0.		11,302.
8 460	Legal fees		TMT 4	30,664.	0.		30,664.
SE S	Accounting fee		TMT 5	4,100.	0.		4,100.
X c	Other professi		TMT 6	6,352.	0.		6,352.
9 17	Interest		-	•			
[편] 18	Taxes						
[일 19	Depreciation a	nd depletion		1,275.	0.		
<u>E</u> 20	Occupancy			10,556.	0.		10,556.
ĕ 21		ences, and meetings		5,225.	0.		5,225.
[22	Printing and p		_			<u> </u>	
<u>E</u> 23	Other expense		TMT 7	39,683.	0.		31,580.
TE 24	-	g and administrative		175 720	^		166 361
\sim 1	-	d lines 13 through 23	3	175,739. 15,218.	0.	-	166,361. 15,218.
25		gifts, grants paid		15,216.			15,210.
I	Add lines 24 a	s and disbursements	3 .	190,957.	0.		181,579.
		6 from line 12;		10,00,00	0.		101,3/3.
		e over expenses and disl	bursements	-11,766.			
		nt income (if negative, e			14,600.		
C	"	ncome (if negative, ente				N/A_	
923501	- 77 II II			Act Notice, see the instruc	tions.		Form 990-PF (2009)

	190-PF (2009) OTSEGO 2000, INC.	Beginning of year	End of y	654945 Page year
Par	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	111,037.	8,710.	8,710
2	Savings and temporary cash investments	•		
3	Accounts receivable ►			
	Less: allowance for doubtful accounts ▶			
4	Pledges receivable ►			
	Less; allowance for doubtful accounts ▶			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons			
7	Other notes and loans receivable			
	Less; allowance for doubtful accounts ▶			
3 8	Inventories for sale or use		:	
9	Prepaid expenses and deferred charges			· · · · · · · · · · · · · · · · · · ·
10	a Investments - U.S. and state government obligations			
	b Investments - corporate stock STMT 8	17,807.	11,488.	11,488
	c Investments - corporate bonds			
11	Investments - land, buildings, and equipment basis			
	Less accumulated depreciation			
12		00.044	400.005	100 005
13	•	82,044.	193,095.	193,095
14		F 60F	E 406	E 406
1,-	Less accumulated depreciation 24,547.	7,607.	7,426.	7,426.
15	Other assets (describe ▶)			
16	Total assets (to be completed by all filers)	218,495.	220,719.	220,719
\neg	Accounts payable and accrued expenses	1,639.	696.	
18		270031		
	[
20	 	· · · · · · · · · · · · · · · · · · ·		
20	Mortgages and other notes payable			
i ₂₂				
23	Total liabilities (add lines 17 through 22)	1,639.	696.	
	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31.			
24	Unrestricted	216,856.	220,023.	
25	Temporarily restricted			
26	Permanently restricted			
<u> </u>	Foundations that do not follow SFAS 117, check here			
	and complete lines 27 through 31.			
24 25 26 27 28 29 30	Capital stock, trust principal, or current funds			
28				
į 29				
30	Total net assets or fund balances	216,856.	220,023.	
		010 10	222 = 11	
31	Total liabilities and net assets/fund balances	218,495.	220,719.	

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	216,856.
2	Enter amount from Part I, line 27a	2	-11,766.
3	Other increases not included in line 2 (itemize) ► UNREALIZED GAIN ON INVESTMENTS	3	14,933.
4	Add lines 1, 2, and 3	4	220,023.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	220,023.

182,673.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

See the Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4

	990-PF (2009) OTSEGO 2000, INC. 1	1-	26549	45	1	Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	48 -	see in	stru	ctior	าร)
1a	Exempt operating foundations described in section 4940(d)(2), check here \(\bigs \) and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1			2	<u>92.</u>
	of Part I, line 27b	- 1				
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)	1				_
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				<u>0.</u>
	Add lines 1 and 2	3			2	<u>92.</u>
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				<u>92.</u>
	Credits/Payments:					
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 21.					
	Exempt foreign organizations - tax withheld at source 6b					
	Tax paid with application for extension of time to file (Form 8868) 6c 271.					
	Backup withholding erroneously withheld 6d 6d	_			2	0.0
	Total credits and payments. Add lines 6a through 6d	7				<u>92.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be; Credited to 2010 estimated tax ▶ Refunded ▶ Int VII-A Statements Regarding Activities	11				
					Yes	No
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	ı	L	10	163	X
			<u> -</u>	1a 1b		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	~~	-	עו		
	distributed by the foundation in connection with the activities.	OI .				
	Did the foundation file Form 1120-POL for this year?			1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		-	-16		
	(1) On the foundation. \$\begin{align*} 0 & \qu					
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. > \$					
	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities.			-		
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or					
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A [4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	•	·	5		X
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state la	aw				
	remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
	If "Yes," complete Part II, col. (c), and Part XV					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	NY					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation		L	8b	Х	
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarion claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarion within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarion within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarion within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarion within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarion within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarion within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarion within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarion within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarion within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarion within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarion within the meaning of section 4942(j)(3) or 4942(j)(4) for calendarion within the meaning of section within the meaning of section 4942(j)(4) for calendarion within the action within the section 4942(j)(4) for calendarion within the section	dar				
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV		L	9		<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		Х

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Pa	rt VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before				
	August 17, 2008?		12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	Х	
	Website address ► WWW.OTSEGO2000.ORG		ستنسا		
14		o. ▶ (607)	547	_ 8.8	81
• •	Located at ▶ PO BOX 1130, COOPERSTOWN, NY	ZIP+4 ▶1			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		7920		$\tilde{\Box}$
	•	15	N	/A	
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	13		/ 11	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		T	Yes	No
4-	During the year did the foundation (either directly or indirectly):			103	110
Па		Yes X No			
		TES LAJ NO			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	Yes X No			
	a disqualified person?				
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	[77]			
		Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"				
	If the foundation agreed to make a grant to or to employ the official for a period after			- 1	
		Yes X No			
þ	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		1	-	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	N/A	16		
	Organizations relying on a current notice regarding disaster assistance check here	▶∟			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected				
	before the first day of the tax year beginning in 2009?		1c		_X_
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5));	OΠ			
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) begins	nina		- 1	
-		Yes X No		1	
	If "Yes," list the years ▶ , , , , ,				
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorr	ect			
_	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and atta				
	statement - see instructions.)	N/A	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	21, 22			 -
٠	, , , ,				
32	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
Ju		Yes X No			
h	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons			ļ	
J	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to				
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule	•			
	Form 4720, to determine if the foundation had excess business holdings in 2009)	N/A	3b		
4-	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	M/ M			
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purp	nea that	4a	\dashv	
U		USC IIIAI	,,		v
	had not been removed from jeopardy before the first day of the tax year beginning in 2009?		<u> 4b</u> m 990	_DE //	X_
		F0	III 330	-rr(2009)

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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Y6	es X No		
(2) Influence the outcome of any specific public election (see section 4955); or	r to carry on, directly or indire	ectly,			
any voter registration drive?		Y6	es 🗓 No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	,		s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
509(a)(1), (2), or (3), or section 4940(d)(2)?		☐ Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f				
the prevention of cruelty to children or animals?	,		s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	er the exceptions described i				
section 53.4945 or in a current notice regarding disaster assistance (see instrui	•		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check hi	· ·			-	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ınad			
expenditure responsibility for the grant?		r/A □ Ye	es 🗆 No		
		I/A 10	s L NO		
If "Yes," attach the statement required by Regulations section 53 4945			l		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p a personal benefit contract?	ay premiums on	[es X No		
•	orongol benefit contractO	Y6	S LALINO	C.	v
b Did the foundation, during the year, pay premiums, directly or indirectly, on a pr	ersonal benefit contract?		F	6b	X
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax sl		L	es X No		
b If yes, did the foundation receive any proceeds or have any net income attributa			N/A	7b	
Part VIII Information About Officers, Directors, Truster Paid Employees, and Contractors	es, Foundation Ma	inagers, Higni	,		
List all officers, directors, trustees, foundation managers and their of	compensation.				
alot dis officiologi disoctor, a accocci foundation managero disa titoli	(b) Title, and average	(c) Compensation	(d) Contributions to	[e]	Expense
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	acco	ount, other
	to position	enter -0-)	compensation	all all	owances
ADD CONTROL 10		40.000	F 266	ŀ	•
SEE STATEMENT 10		48,000.	5,266	•	<u> </u>
	·			 	
				ŀ	
				ŀ	
· · · · · · · · · · · · · · · · · · ·				<u> </u>	
Compensation of five highest-paid employees (other than those inc		enter "NONE."	(4)		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans	(e)) Expense ount, other
(a) name and address of each employee paid more than \$60,000	devoted to position	(C) compensation	and deferred compensation	ali	owances
NONE					
			<u> </u>		
				T	
		 -		†	
· · · · · · · · · · · · · · · · · · ·					
Total number of other employees paid over \$50,000		1			

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	▶ 0
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 PLANNING AND LAND USE ACTIVITIES IN OTSEGO COUNTY (APPROXIMATELY 60,000 RESIDENTS)	
(III TROMITMENT OF TOO REDIDERED)	49,718.
2	
ODD CONTROL 11	4 500
SEE STATEMENT 11 3 AGRICULTURAL ECONOMIC DEVELOPMENT: SEASONAL PROMOTION OF	4,593.
AGRICULTURAL PRODUCTS THROUGH THE FARMERS MARKET AND	1
SPONSORSHIP AND PROMOTION OF THE RURAL ECONOMY	17,672.
4 PROTECTION OF THE RURAL LANDSCAPE: EDUCATION AND ADVOCACY ON	
NATURAL GAS DRILLING ISSUES	
Part IX-B Summary of Program-Related Investments	31,519.
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	, who are
2	
	-
All other program-related investments. See instructions.	
	_
Total. Add lines 1 through 3	0.

P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations	ndations	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	172,247.
b	Average of monthly cash balances	1b	172,247. 65,203.
C	Fair market value of all other assets	1c	31,426.
d	Total (add lines 1a, b, and c)	1d	268,876.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	268,876.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,033.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	264,843.
6	Minimum investment return. Enter 5% of line 5	6	13,242.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here in and do not complete this part.)	nd certain	-
1	Minimum investment return from Part X, line 6	1	13,242.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)]	
C	Add lines 2a and 2b	2c	292.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	12,950.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	12,950.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	12,950.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	_1a	181,579.
b	Program-related investments - total from Part IX-B	1b	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	1,094.
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	<u></u>
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	182,673.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	182,673.

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(2)	(h)	(2)	
	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,				
line 7				12,950.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years:				
3 Excess distributions carryover, if any, to 2009:		0.		 -
a From 2004 87, 983.				
b From 2005 118,097.				
c From 2006 185,802.				
d From 2007 238, 198.				
e From 2008 180,340.				
f Total of lines 3a through e	810,420.			
4 Qualifying distributions for 2009 from	020/2200			
Part XII, line 4: ►\$ 182,673.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				12,950.
e Remaining amount distributed out of corpus	169,723.			
Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	980,143.			
b Prior years' undistributed income. Subtract	, ,		7.00	
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004	05 000			
not applied on line 5 or line 7	87,983.			
9 Excess distributions carryover to 2010.	002 160			
Subtract lines 7 and 8 from line 6a	892,160.			
10 Analysis of line 9: a Excess from 2005 118,097.				
b Excess from 2006 185,802.				
c Excess from 2007 238, 198.				
d Excess from 2008 180, 340.				
e Excess from 2009 169,723.				
			· ,, ,	Form 990-PF (2009)

	2000, INC.	-tt	Δ		54945 Page 10
Part XIV Private Operating Fo			-A, question 9)	N/A	
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for	•	•	▶ └─		
b Check box to indicate whether the found		ng foundation described i		4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2009	(b) 2008	Prior 3 years	(4) 2006	(a) Tatal
income from Part I or the minimum	(a) 2009	(0) 2000	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon; a "Assets" alternative test - enter;					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter		· · · · · · · · · · · · · · · · · · ·			
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					1
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public			 		
and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income Part XV Supplementary Information	rmation (Comple	to this part only	if the foundation	had \$5 000 ar m	oro in cocoto
at any time during the			ii tile loulluation	nau \$5,000 or m	ore in assets
1 Information Regarding Foundation		than 30/ of the total cont	ributions resoured by the	foundation before the ele	
a List any managers of the foundation who year (but only if they have contributed m			ributions received by tile	ioundation before the cit	ose of any tax
NONE	40,000). (000 0				
b List any managers of the foundation who	o own 10% or more of th	on stock of a corporation (or an equally large ports	on of the ownership of a	
other entity) of which the foundation has			or an equally large portion	on or the ownership of a p	Jaruiership of
NONE	·				
2 Information Regarding Contribution	on Grant Gift Loon	Sabalarahin eta De		·	·
Check here X if the foundation of				et cocot upobleited rea	usata far funda. If
the foundation makes gifts, grants, etc. (iny makes commodulons (see instructions) to indi	uduals or organizations u	organizations and does r	ioi accepi unsolicileu req amplete iteme 2a h.c. an	uesis for funds. If
			···	mpiete items za, b, c, an	
a The name, address, and telephone number	Jei OI lile person to who	m applications should be	audressed.		
h. The form in which applications should be	a submitted and informs	tion and materials they of	aculd include:		
b The form in which applications should be	e suomitteo and informa	tion and materials they sr	ioula include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields,	kınds of institutions, or o	other factors:	
923601 02-02-10			.		Form 990-PF (2009)

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Y		Payment		
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year ADVOCATES FOR SPRINGFIELD P.O. BOX 25 SPRINGFIELD CENTER, NY 13468	NONE	BUSINESS TRUST	HISTORIC PRESERVATION	14,468.
OTSEGO COUNTY CONSERVATION ASSOCIATION P.O. BOX 931 COOPERSTOWN, NY 13326	NONE	501(C)(3)	EARTH FESTIVAL	250.
OTSEGO COUNTY CONSERVATION ASSOCIATION P.O. BOX 931 COOPERSTOWN, NY 13326	NONE	501(C)(3)	OTSEGO WALKS AND PADDLES	250.
OTSEGO COUNTY PLANNING DEPARTMENT 197 MAIN STREET COOPERSTOWN, NY 13326	NONE	MUNICIPALI	DON'T FLUSH YOUR DRUGS	250.
Total			▶ 3a	15,218.
NONE				
	1		1	
Total	J		▶ 3b	0.

X9601__1

	11				
Part XVI-A	∟ ∆nal	veie nf	Income.	.Producina	Activities
I WILKEL		7313 01	111001110	I I Oddonig	MOUNTINGS

Enter gross amounts unless otherwise indicated.	Unrelated	business income		d by section 512, 513, or 514	(e)
	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue: a FARMERS MARKET	code		1000		
b REIMBURSED EXPENSES	 		+-+		24,590. 7,623.
			+ +		1,023.
C			 -		
d			 		
e					
g Fees and contracts from government agencies					
2 Membership dues and assessments		· <u></u>		-	
3 Interest on savings and temporary cash		-			
investments			14	124.	
4 Dividends and interest from securities	·	· -	14	7,944.	
5 Net rental income or (loss) from real estate:				,,,,,,,,,,	_
a Debt-financed property			 		
b Not debt-financed property			+		· · · · · · · · · · · · · · · · · · ·
6 Net rental income or (loss) from personal			+		
property					
7 Other investment income			1 1		
8 Gain or (loss) from sales of assets other			+		
than inventory			18	6,532.	
9 Net income or (loss) from special events			1 20	0,332.	
10 Gross profit or (loss) from sales of inventory			1 1		
11 Other revenue:			1 1		
a b			 		.,
c			1 1		
d			1 1		
e			1 1		
12 Subtotal. Add columns (b), (d), and (e)		0.	j i	14,600.	32,213.
13 Total. Add line 12, columns (b), (d), and (e)				13	
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities t	o the Accor	nplishment of E	xempt	Purposes	
Line No. Explain below how each activity for which inco			\ contribut	ted importantly to the accomp	plishment of
the foundation's exempt purposes (other than			ama		
1A SEASONAL PROMOTION OF A 1B VARIOUS REIMBURSEMENT (JE EAEMD	T DITED OF T	TODII	DODMENTO	
TE VARIOUS REIMBURSEMENT (Jr EXEMP	I PURPUSE I	TODU	KOEMENTO	
					
				,	
					-
	···				
					-
		. _			
					·
		-		· · · · · · · · · · · · · · · · · · ·	*
		-			

2a	Is the	foundation directly or indire	tly affilia	ted with, or related	to, one or mor	e tax-exempt orga	ınızatıons descrit	oed				
	ın sec	tion 501(c) of the Code (othe	r than se	ection 501(c)(3)) o	r in section 527	7?					Yes	X No
b	If "Yes	s," complete the following scl	edule.									
		(a) Name of or	anizatio	n	(b) T	ype of organization	າ 📗	(0	;) Description	of rela	tionship	
		N/A										
		enalties of perjury, I declare that I							ny knowledge a	and belie	f, it is true, correct	ι,
ı	and com	iplete Declaration of preparer (oth	er than tax	cpayer or ficuciary) is t	oased on all intorr		-	-	· 0 -			
ı	_	mod Ken	<u> </u>			11/11/2010	<u> </u>	3 3). Den	SUR	er_	
Here	Sig	gnature of officer or trustee		//		Date	Title					-
딜		Preparer's					Date /		ck if	P	reparer's identifyir	ng number
Sign .	Paid Preparer's Use Only	signature /	41/1	<i>/</i>			11/4/10	self- emp	oloyed 🕨 🛚			
: ا	Paid spare	Firm's name (or yours CDLI	[& (COMPANY (CPA'S,	LLP			EIN ►			
	rei Usi	if self-employed), 401	E. 5	STATE ST.	, SUIT	E 500					_	
		address, and ZIP code ITH	CA,	NY 14850)				Phone no.	60	7-272-4	444

Schedule B (Form 990, 990-EZ,

or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

Name of the organization		Employer identification number
ro	SEGO 2000, INC.	11-2654945
Organization type (check o	one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ile. See instructions
General Rule		
X For an organization contributor Comp	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in m lete Parts I and II	oney or property) from any one
Special Rules		
509(a)(1) and 170(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II	
aggregate contribu	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contrutions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, cruelty to children or animals. Complete Parts I, II, and III.	
contributions for u If this box is check purpose. Do not co	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions did not agreed, enter here the total contributions that were received during the year for an exclusive complete any of the parts unless the General Rule applies to this organization because reference, contributions of \$5,000 or more during the year.	gregate to more than \$1,000. ely religious, charitable, etc,
but it must answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule I Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line and requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	, , , , , , , , , , , , , , , , , , , ,
LHA For Privacy Act and for Form 990, 990-E		3 (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization

Employer identification number

TSEGO	2000	TNC

11-2654945

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	THE SCRIVEN FOUNDATION 1 ROCKEFELLER PLAZA NEW YORK, NY 10020	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	NYS COUNCIL ON THE ARTS 175 VARICK STREET NEW YORK , NY 10014	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroli Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
022452 02 0		\$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Asset					Description o		<u> </u>	990-FF
Number	Date placed in service	Method/ IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
1	FULLY DE							
	VARIES		5.00	16	10,595.		10,591.	<u>4.</u>
2	STORAGE 0 3 1 3 0 1			17	250		252	
	KITCHENE			ш/	259.		253.	0.
	012402	SL	39.00	17	3,424.		634.	88.
	OFFICE F 030102	200DB	7.00	17	1,607.		1,607.	0.
5	OFFICE F			14.77	140		140	
	031402			17	140.	· · · · · · · · · · · · · · · · · · ·	140.	0.
•	WINDOW E			17	881.		848.	33.
					ALLATION		040•	<u></u>
•	041502				1,359.		694.	78.
8	CHAIRS							
	122202			17	400.		385.	15.
9	DELL COM							
	03,17,03		5.00	17	2,985.	· · · · · · · · · · · · · · · · · · ·	2,899.	0.
10	CANOPIES		- O O	4.17	200		240	
11	083003			17	389.		342.	31.
ניד	090904			17	1,375.		1,309.	66.
12	OFFICE T						1,303.	
	120604			17	411.		391.	20.
13	VINYL FI							
	031306	150DB	15.00	017	1,137.		318.	82.
14	FRAMING							
	070605			17	152.		127.	17.
15	MARKET 1 01,15,07			JN'I' I 17	3,350.		1,702.	471.
16	COPIER	מַעטטאַןי	17.00	11 /	3,330.		1,702.	4/1.
10	041806	200DB	5.00	17	1,208.		925.	113.
17	COMPUTER		13.00	<u></u>	1/2001	 -		<u> </u>
	100108		5.00	16	297.		30.	59.
18	SOFTWARE							
	100108			16	432.		43.	<u>86.</u>
19	OFFICE E			Ta .c			1 40 1	
	100108		7.00	16	164.		12.	23.
۷(EQUIPMEN 100108		7.00	16	314.		22.	45.
$\frac{}{21}$	LSOFTWARE		17.00	10]			<u> </u>
7.	12100		5.00	16	575.			38.
22	HANDWASI						<u></u>	
	021610)SL	7.00	16	519.			6.
	* TOTAL	990-P	F PG	1 D	EPR			
		1			31,973.	0	. 23,272.	1,275.
		1	1	T	T			
			1					
		$T^{}$	Τ	Ţ	<u> </u>			
		-	1		<u> </u>			
				<u></u>			<u></u>	
916261				#	- Current year section 179	(D) - Asset disp	osea	

FORM 990-PF INTEREST ON SAV	INGS AND TE	MPORARY CA	SH :	INVESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
KEY INVESTMENT SERVICES			,	·	1	24.
TOTAL TO FORM 990-PF, PART I	, LINE 3, C	OLUMN A		=	1	24.
FORM 990-PF DIVIDEN	DS AND INTE	REST FROM	SEC	URITIES	STATEMENT	2
SOURCE	GROS	S AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT)
KEY INVESTMENT SERVICES		7,944.		0.	7,9	44.
TOTAL TO FM 990-PF, PART I,	LN 4	7,944.		0.	7,9	44.
FORM 990-PF	OTHER	INCOME			STATEMENT	3
DESCRIPTION		(A) REVENUE PER BOOKS	;	(B) NET INVEST- MENT INCOME		
FARMERS MARKET REIMBURSED EXPENSES	_	24,5 7,6	90.	0		
TOTAL TO FORM 990-PF, PART I	, LINE 11 =	32,2	213.	0	•	
FORM 990-PF	LEGA	L FEES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM	(D) CHARITA E PURPOS	
LEGAL FEES	30,664	•	0	•	30,6	64.
TO FM 990-PF, PG 1, LN 16A	30,664	•	0	•	30,6	64.

FORM 990-PF	ACCOUNTI	NG FEES	S	PATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING AND BOOKKEEPING	4,100.	0.		4,100.
TO FORM 990-PF, PG 1, LN 16B	4,100.	0.		4,100.
FORM 990-PF C	THER PROFES	SIONAL FEES	S	ratement 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
CONSULTANTS	6,352.	0.		6,352.
TO FORM 990-PF, PG 1, LN 16C	6,352.	0.		6,352.
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PAYROLL PROCESSING INSURANCE TELEPHONE SUPPLIES EQUIPMENT RENTAL EQUIPMENT REPAIR AND MAINTENANCE POSTAGE AND SHIPPING ADVERTISING BANK AND INVESTMENT FEES BOOKS AND PUBLICATIONS	976. 2,713. 6,187. 3,918. 1,280. 1,110. 1,182. 10,660. 437. 258.	0. 0. 0. 0. 0. 0.		976. 2,713. 6,187. 3,918. 1,280. 1,110. 1,182. 10,660. 437. 258.
FILING FEES DUES AND SUBSCRIPTIONS STAFF DEVELOPMENT MISCELLANEOUS FARMERS MARKET EXPENSES	375. 1,328. 404. 752. 8,103.	0. 0. 0.		375. 1,328. 404. 752. 0.
TO FORM 990-PF, PG 1, LN 23	39,683.	0.		31,580.

FORM 990-PF`	CORPORATE STOCK		STATEMENT 8
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCK		11,488.	11,488.
TOTAL TO FORM 990-PF, PART II	I, LINE 10B	11,488.	11,488.
FORM 990-PF	OTHER INVESTMENTS		STATEMENT 9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
MUTUAL FUNDS EXCHANGE TRADED FUNDS	FMV FMV	154,652. 38,443.	154,652. 38,443.
TOTAL TO FORM 990-PF, PART II	LINE 13	193,095.	193,095.

	LIST OF OFFICERS, DI AND FOUNDATION MANAC		STATI	EMENT 10
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
HENRY S. F. COOPER, JR. P.O. BOX 1130 COOPERSTOWN, NY 13326	CHAIRMAN 1.00	0.	0.	0.
NICOLE DILLINGHAM P.O. BOX 1130 COOPERSTOWN, NY 13326	PRESIDENT 1.00	0.	0.	0.
BRADLEY GOODYEAR SMITH P.O. BOX 1130 COOPERSTOWN, NY 13326	SECRETARY 1.00	0.	0.	0.
SUZANNE RENCKENS P.O. BOX 1130 COOPERSTOWN, NY 13326	DIRECTOR 1.00	0.	0.	0.
MARY BAKER P.O. BOX 1130 COOPERSTOWN, NY 13326	DIRECTOR 1.00	0.	0.	0.
KENT BARWICK P.O. BOX 1130 COOPERSTOWN, NY 13326	VICE PRESIDENT 1.00	0.	0.	0.
WILLARD HARMAN P.O. BOX 1130 COOPERSTOWN, NY 13326	DIRECTOR 1.00	0.	0.	0.
ALLISON HILL-EDGAR P.O. BOX 1130 COOPERSTOWN, NY 13326	DIRECTOR 1.00	0.	0.	0.
HUGH C. MACDOUGALL P.O. BOX 1130 COOPERSTOWN, NY 13326	DIRECTOR 1.00	0.	0.	0.
MARTHA MCGOWAN P.O. BOX 1130 COOPERSTOWN, NY 13326	DIRECTOR 1.00	0.	0.	0.
JAMES L. NORTHRUP P.O. BOX 1130 COOPERSTOWN, NY 13326	DIRECTOR 1.00	0.	0.	0.

OTSEGO 2000, INC.			11-	2654945
JAMES PATRICK P.O. BOX 1130 COOPERSTOWN, NY 13326	DIRECTOR 1.00	0.	0.	0.
ROBERT POULSON P.O. BOX 1130 COOPERSTOWN, NY 13326	DIRECTOR 1.00	0.	0.	0.
TARA SUMNER P.O. BOX 1130 COOPERSTOWN, NY 13326	DIRECTOR 1.00	0.	0.	0.
ELINOR VINCENT P.O. BOX 1130 COOPERSTOWN, NY 13326	TREASURER 1.00	0.	0.	0.
SYDNEY WALLER P.O. BOX 1130 COOPERSTOWN, NY 13326	DIRECTOR 1.00	0.	0.	0.
JUDY WERTENBAKER P.O. BOX 1130 COOPERSTOWN, NY 13326	DIRECTOR 1.00	0.	0.	0.
ROBIN KRAWITZ P.O. BOX 1130 COOPERSTOWN, NY 13326	EXECUTIVE DIREC	TOR 48,000.	5,266.	0.
ELIZABETH HORVATH P.O. BOX 1130 COOPERSTOWN, NY 13326	DIRECTOR 1.00	0.	0.	0.
SUSAN J. HUXTABLE P.O. BOX 1130 COOPERSTOWN, NY 13326	DIRECTOR 1.00	0.	0.	0.
M. LANGHORNE KEITH P.O. BOX 1130 COOPERSTOWN, NY 13326	DIRECTOR 1.00	0.	0.	0.
KATHARINE MUIR P.O. BOX 1130 COOPERSTOWN, NY 13326	DIRECTOR 1.00	0.	0.	0.
ELLEN POPE P.O. BOX 1130 COOPERSTOWN, NY 13326	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, P.	AGE 6, PART VIII	48,000.	5,266.	0.

OTSEGO 2000, INC.

11-2654945

FORM 990-PF'

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT

11

ACTIVITY TWO

HISTORIC PRESERVATION: (1) HISTORIC DISTRICT SUPPORT (GLIMMERGLASS, WAGGONER, HARTWICK) (2) SCENIC BY-WAYS (3) PRESERVATION AWARD (4) GENERAL HISTORICAL PRESERVATION OUTREACH AND ASSISTANCE

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 2

4,593.

Form **8868** (Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No 1545-1709

-	u are filing for an Automatic 3-Month Extension, complete only Part I and check this box		$ ightharpoons \overline{\mathbf{X}}$
	u are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this		
Do not	complete Part II unless you have already been granted an automatic 3-month extension on a previously f	iled Fo	rm 8868
Part	Automatic 3-Month Extension of Time. Only submit original (no copies needed)		
A corpo	oration required to file Form 990-T and requesting an automatic 6-month extension - check this box and cor	nplete	
Part I o	nly	•	▶ □
All othe	er corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request a	n exter	nsion of time
	ncome tax returns.		
noted b (not aut you mu	onic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electron tomatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or coast submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files gov/efile and click on e-file for Chanties & Nonprofits.	ically it	f (1) you want the additional ated Form 990-T Instead,
Type or	Name of Exempt Organization	Emp	loyer identification number
print		ا ا	
File by the	OTSEGO 2000, INC.	1	1-2654945
due date f filing your return Se	for Number, street, and room or suite no. If a P.O. box, see instructions PO. BOX. 1130		
instruction			
Check	type of return to be filed (file a separate application for each return)		
П	form 990 Form 990-T (corporation) Form 4	720	
=	form 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 5		
	form 990-EZ Form 990-T (trust other than above) Form 6		
	form 990-PF		
	THE FOUNDATION		
• The	books are in the care of ▶ PO BOX 1130 - COOPERSTOWN, NY 13326-113	0	
	phone No ▶ <u>(607) 547~8881</u> FAX No ▶		
Tele			
Tele	e organization does not have an office or place of business in the United States, check this box		▶ □
Tele	is is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the		
Tele	is is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the		
Tele If the If the box	is is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the	memb	ers the extension will cover
Tele If the If the	If the lift it is for part of the group, check this box and attach a list with the names and EINs of all request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time uninvovember 15, 2010, to file the exempt organization return for the organization named as for the organization's return for:	memb	ers the extension will cover
Tele If the If the If the	If the lift it is for part of the group, check this box and attach a list with the names and EINs of all request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time uninvovember 15, 2010, to file the exempt organization return for the organization named as for the organization's return for: Calendar year or APR 1, 2009, and ending MAR 31, 2010	memb	The extension Change in accounting period
Tele If the	If the lift it is for part of the group, check this box and attach a list with the names and EINs of all request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unit NOVEMBER 15, 2010, to file the exempt organization return for the organization named as for the organization's return for: Calendar year	memb	The extension Change in accounting period
Tele If the	If the lift it is for part of the group, check this box and attach a list with the names and EINs of all request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unit NOVEMBER 15, 2010, to file the exempt organization return for the organization named as for the organization's return for: Calendar year	memb	The extension Change in accounting period \$ 292.
Tele If the	If the lift it is for part of the group, check this box \[\bigstyle= \bigsty	memb	The extension Change in accounting period \$ 292.
Tele If the If t	If the sign of a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the sign of the group, check this box and attach a list with the names and EINs of all request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitary NOVEMBER 15, 2010, to file the exempt organization return for the organization named as for the organization's return for: Calendar year	memb	The extension Change in accounting period \$ 292.
Tele If the If the If the box 1	If the lift it is for part of the group, check this box \[\bigstyle= \bigsty	memb	The extension Change in accounting period \$ 292.