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## Return of Organization Exempt From Income Tax

2012

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

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

|                                                                                                                                                                                                                                                                                               |                                                                                                                  |                                                                                                                                                                                                                                                                                     |                                                              |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| <b>A For the 2012 calendar year, or tax year beginning</b>                                                                                                                                                                                                                                    |                                                                                                                  | <b>2012, and ending</b>                                                                                                                                                                                                                                                             |                                                              |
| <b>B</b> Check if applicable:<br><input type="checkbox"/> Address change<br><input type="checkbox"/> Name change<br><input type="checkbox"/> Initial return<br><input type="checkbox"/> Terminated<br><input type="checkbox"/> Amended return<br><input type="checkbox"/> Application pending | <b>C</b> Name of organization <b>CHAUTAUQUA REGION COMMUNITY FOUNDATION, INC.</b>                                |                                                                                                                                                                                                                                                                                     | <b>D</b> Employer Identification Number<br><b>16-1116837</b> |
|                                                                                                                                                                                                                                                                                               | Doing Business As                                                                                                |                                                                                                                                                                                                                                                                                     | <b>E</b> Telephone number<br><b>(716) 661-3390</b>           |
|                                                                                                                                                                                                                                                                                               | Number and street (or P O box if mail is not delivered to street addr) Room/suite<br><b>418 SPRING STREET</b>    |                                                                                                                                                                                                                                                                                     |                                                              |
|                                                                                                                                                                                                                                                                                               | City, town or country State ZIP code + 4<br><b>JAMESTOWN NY 14701</b>                                            |                                                                                                                                                                                                                                                                                     |                                                              |
|                                                                                                                                                                                                                                                                                               | <b>F</b> Name and address of principal officer<br><b>RANDALL J. SWEENEY 418 SPRING STREET JAMESTOWN NY 14701</b> |                                                                                                                                                                                                                                                                                     | <b>G</b> Gross receipts \$ <b>22,890,164.</b>                |
| <b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527                                                                                                  |                                                                                                                  | <b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If 'No,' attach a list (see instructions) |                                                              |
| <b>J</b> Website: <b>www.crcfonline.org</b>                                                                                                                                                                                                                                                   |                                                                                                                  |                                                                                                                                                                                                                                                                                     |                                                              |
| <b>K</b> Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other                                                                                                              |                                                                                                                  | <b>L</b> Year of Formation <b>1978</b>                                                                                                                                                                                                                                              | <b>M</b> State of legal domicile <b>NY</b>                   |

**Part I Summary**

|                                                                      |                                                                                                                                                 |  |            |
|----------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|--|------------|
| <b>Activities &amp; Governance</b>                                   | <b>1</b> Briefly describe the organization's mission or most significant activities: <u>SEE SCHEDULE O.</u>                                     |  |            |
|                                                                      | -----                                                                                                                                           |  |            |
|                                                                      | -----                                                                                                                                           |  |            |
|                                                                      | <b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets |  |            |
|                                                                      | <b>3</b>                                                                                                                                        |  | <b>11</b>  |
|                                                                      | <b>4</b>                                                                                                                                        |  | <b>11</b>  |
|                                                                      | <b>5</b>                                                                                                                                        |  | <b>8</b>   |
| <b>Revenue</b>                                                       | <b>6</b>                                                                                                                                        |  | <b>183</b> |
|                                                                      | <b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12                                                                  |  |            |
|                                                                      | <b>7a</b>                                                                                                                                       |  | <b>0.</b>  |
|                                                                      | <b>b</b> Net unrelated business taxable income from Form 990-T, line 34                                                                         |  |            |
|                                                                      | <b>7b</b>                                                                                                                                       |  |            |
|                                                                      |                                                                                                                                                 |  |            |
|                                                                      |                                                                                                                                                 |  |            |
| <b>Expenses</b>                                                      | <b>8</b> Contributions and grants (Part VIII, line 1h)                                                                                          |  |            |
|                                                                      | <b>9</b> Program service revenue (Part VIII, line 2g)                                                                                           |  |            |
|                                                                      | <b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)                                                                         |  |            |
|                                                                      | <b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)                                                              |  |            |
|                                                                      | <b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)                                                    |  |            |
|                                                                      | <b>13</b> Grants and similar amounts paid (Part IX, column (A), line 13)                                                                        |  |            |
|                                                                      | <b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)                                                                         |  |            |
| <b>Not Assets or Fund Balances</b>                                   | <b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)                                                     |  |            |
|                                                                      | <b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)                                                                        |  |            |
|                                                                      | <b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <b>314,041.</b>                                                              |  |            |
|                                                                      | <b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)                                                                          |  |            |
|                                                                      | <b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)                                                             |  |            |
|                                                                      | <b>19</b> Revenue less expenses. Subtract line 18 from line 12                                                                                  |  |            |
|                                                                      |                                                                                                                                                 |  |            |
| <b>20</b> Total assets (Part X, line 16)                             |                                                                                                                                                 |  |            |
| <b>21</b> Total liabilities (Part X, line 26)                        |                                                                                                                                                 |  |            |
| <b>22</b> Net assets or fund balances. Subtract line 21 from line 20 |                                                                                                                                                 |  |            |

**Part II Signature Block**

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

|                               |                                                                   |  |                                                                        |
|-------------------------------|-------------------------------------------------------------------|--|------------------------------------------------------------------------|
| <b>Sign Here</b>              | <b>Signature of officer</b> <i>Randall J. Sweeney</i>             |  | <b>Date</b> <b>7/18/2013</b>                                           |
|                               | <b>Type or print name and title</b> <b>RANDALL J. SWEENEY</b>     |  |                                                                        |
| <b>Paid Preparer Use Only</b> | <b>Print/Type preparer's name</b> <b>HAROLD L. BRUNACINI, CPA</b> |  | <b>Date</b> <b>07/17/13</b>                                            |
|                               | <b>Firm's name</b> <b>JAMES W. VANSTROM &amp; COMPANY</b>         |  | <b>Check</b> <input checked="" type="checkbox"/> <b>if</b> <b>PTIN</b> |
|                               | <b>Firm's address</b> <b>PO BOX 532</b>                           |  | <b>self-employed</b> <b>P01281305</b>                                  |
|                               | <b>FALCONER NY 14733-0532</b>                                     |  | <b>Firm's EIN</b> <b>16-1451395</b>                                    |
|                               |                                                                   |  | <b>Phone no.</b> <b>(716) 661-3960</b>                                 |

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

BAA For Paperwork Reduction Act Notice, see the separate instructions.

TEEA0101 05/09/13

Form 990 (2012)

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SCANNED AUG 14 2013

**Part III** Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III ☐

1 Briefly describe the organization's mission:

SEE SCHEDULE O.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If 'Yes,' describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If 'Yes,' describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations 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 \$ 1,994,144. including grants of \$ 1,994,144.) (Revenue \$ 0.)

GRANTS AWARDED TO LOCAL CULTURAL, EDUCATIONAL, CHARITABLE, AND  
CIVIC ORGANIZATIONS AND TO LOCAL SCHOLARSHIP RECIPIENTS.

4b (Code: ) (Expenses \$ 186,519. including grants of \$ 0.) (Revenue \$ 0.)

EXPENSES INCURRED TO FUND COMMUNITY ECONOMIC DEVELOPMENT  
PROJECTS AND ADMINISTER THE FOUNDATION'S FUNDS.

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 2,180,663.

**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)? If 'Yes,' complete Schedule A                                                                                                                                                                         | X   |    |
| 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?                                                                                                                                                                                                         | X   |    |
| 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I                                                                                                                      |     | X  |
| 4 <b>Section 501(c)(3) organizations</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II                                                                                                        |     | X  |
| 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III                                                                               |     | X  |
| 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part 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? If 'Yes,' complete Schedule D, Part II                                                                                             |     | X  |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III                                                                                                                                                         |     | X  |
| 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV             |     | X  |
| 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V                                                                                                     | X   |    |
| 11 If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable                                                                                                                                                           |     |    |
| a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI                                                                                                                                                                        | X   |    |
| b 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? If 'Yes,' complete Schedule D, Part VII                                                                                                   |     | X  |
| c 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? If 'Yes,' complete Schedule D, Part VIII                                                                                                   |     | X  |
| d 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? If 'Yes,' complete Schedule D, Part IX                                                                                                                      |     | X  |
| e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X                                                                                                                                                                                     | X   |    |
| f 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 (ASC 740)? If 'Yes,' complete Schedule D, Part X                                                            | X   |    |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII                                                                                                                                                       | X   |    |
| b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional                                                                           |     | X  |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E                                                                                                                                                                                                        |     | 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, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV |     | 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? If 'Yes,' complete Schedule F, Parts II and IV                                                                                    |     | 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? If 'Yes,' complete Schedule F, Parts III and IV                                                                                        |     | 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? If 'Yes,' complete Schedule G, Part I (see instructions)                                                                                            |     | 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? If 'Yes,' complete Schedule G, Part II                                                                                                                           | X   |    |
| 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III                                                                                                                                                     |     | X  |
| 20a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H                                                                                                                                                                                                             |     | X  |
| b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?                                                                                                                                                                                              |     |    |

**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? If 'Yes,' complete Schedule I, Parts I and II                                                                                          | 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? If 'Yes,' complete Schedule I, Parts I and III                                                                                                           | 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? If 'Yes,' complete Schedule J                                                      |     | 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25                        |     | 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? If 'Yes,' complete Schedule L, Part 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? If 'Yes,' complete Schedule L, Part I                                        |     | X  |
| 26 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II                                                                   |     | X  |
| 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III |     | 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? If 'Yes,' complete Schedule L, Part IV                                                                                                                                                                                                    |     | X  |
| b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV                                                                                                                                                                                 |     | X  |
| c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV                                                                                     |     | X  |
| 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M                                                                                                                                                                                                  | X   |    |
| 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M                                                                                                                                  |     | X  |
| 31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I                                                                                                                                                                                        |     | X  |
| 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II                                                                                                                                                                      |     | 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? If 'Yes,' complete Schedule R, Part I                                                                                                                      |     | X  |
| 34 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1                                                                                                                                                                         |     | X  |
| 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?                                                                                                                                                                                                                  |     | X  |
| b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2                                                                                          |     | X  |
| 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2                                                                                                                                  |     | 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? If 'Yes,' complete Schedule R, Part VI                                                                             |     | X  |
| 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O                                                                                                                              | X   |    |

BAA

Form 990 (2012)

**Part V Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response to any question in this Part V ☐

|                                                                                                                                                                                                                                                                                | Yes          | No |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----|
| <b>1 a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable                                                                                                                                                                                        | <b>1 a</b> 8 |    |
| <b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable                                                                                                                                                                                       | <b>1 b</b> 0 |    |
| <b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?                                                                                                              | <b>1 c</b> X |    |
| <b>2 a</b> 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                                                                                       | <b>2 a</b> 8 |    |
| <b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns?<br><b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)                                   | <b>2 b</b> X |    |
| <b>3 a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?                                                                                                                                                                       | <b>3 a</b>   | X  |
| <b>b</b> If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O                                                                                                                                                                       | <b>3 b</b>   |    |
| <b>4 a</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)?                          | <b>4 a</b>   | X  |
| <b>b</b> If 'Yes,' enter the name of the foreign country:<br>See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts                                                                                                     |              |    |
| <b>5 a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?                                                                                                                                                               | <b>5 a</b>   | X  |
| <b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?                                                                                                                                                      | <b>5 b</b>   | X  |
| <b>c</b> If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?                                                                                                                                                                                                    | <b>5 c</b>   |    |
| <b>6 a</b> 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 as charitable contributions?                                                             | <b>6 a</b> X |    |
| <b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?                                                                                                                         | <b>6 b</b> X |    |
| <b>7 Organizations that may receive deductible contributions under section 170(c).</b>                                                                                                                                                                                         |              |    |
| <b>a</b> 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?                                                                                                                       | <b>7 a</b> X |    |
| <b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?                                                                                                                                                                       | <b>7 b</b> X |    |
| <b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?                                                                                                                                  | <b>7 c</b>   | X  |
| <b>d</b> If 'Yes,' indicate the number of Forms 8282 filed during the year                                                                                                                                                                                                     | <b>7 d</b>   |    |
| <b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?                                                                                                                                                       | <b>7 e</b>   | X  |
| <b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?                                                                                                                                                          | <b>7 f</b>   | X  |
| <b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?                                                                                                                                      | <b>7 g</b>   | X  |
| <b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?                                                                                                                                    | <b>7 h</b>   | X  |
| <b>8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | <b>8</b>     | X  |
| <b>9 Sponsoring organizations maintaining donor advised funds.</b>                                                                                                                                                                                                             |              |    |
| <b>a</b> Did the organization make any taxable distributions under section 4966?                                                                                                                                                                                               | <b>9 a</b>   | X  |
| <b>b</b> Did the organization make a distribution to a donor, donor advisor, or related person?                                                                                                                                                                                | <b>9 b</b>   | X  |
| <b>10 Section 501(c)(7) organizations.</b> Enter:                                                                                                                                                                                                                              |              |    |
| <b>a</b> Initiation fees and capital contributions included on Part VIII, line 12                                                                                                                                                                                              | <b>10 a</b>  |    |
| <b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities                                                                                                                                                                           | <b>10 b</b>  |    |
| <b>11 Section 501(c)(12) organizations.</b> Enter:                                                                                                                                                                                                                             |              |    |
| <b>a</b> Gross income from members or shareholders                                                                                                                                                                                                                             | <b>11 a</b>  |    |
| <b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)                                                                                                                                           | <b>11 b</b>  |    |
| <b>12 a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?                                                                                                                                                         | <b>12 a</b>  |    |
| <b>b</b> If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year                                                                                                                                                                                 | <b>12 b</b>  |    |
| <b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>                                                                                                                                                                                                     |              |    |
| <b>a</b> Is the organization licensed to issue qualified health plans in more than one state?<br><b>Note.</b> See the instructions for additional information the organization must report on Schedule O.                                                                      | <b>13 a</b>  |    |
| <b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans                                                                                                             | <b>13 b</b>  |    |
| <b>c</b> Enter the amount of reserves on hand                                                                                                                                                                                                                                  | <b>13 c</b>  |    |
| <b>14 a</b> Did the organization receive any payments for indoor tanning services during the tax year?                                                                                                                                                                         | <b>14 a</b>  | X  |
| <b>b</b> If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O                                                                                                                                                             | <b>14 b</b>  |    |

**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.

Check if Schedule O contains a response to any question in this Part VI

☒**Section A. Governing Body and Management**

|                                                                                                                                                                                                                                                                                                                               | Yes           | No |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----|
| <b>1 a</b> Enter the number of voting members of the governing body at the end of the tax year . . . . .<br>If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. | <b>1 a</b> 11 |    |
| <b>b</b> Enter the number of voting members included in line 1a, above, who are independent . . . . .                                                                                                                                                                                                                         | <b>1 b</b> 11 |    |
| <b>2</b> 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?                                                                                                                                                 | <b>2</b>      | X  |
| <b>3</b> 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?                                                                                                  | <b>3</b>      | X  |
| <b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?                                                                                                                                                                                                     | <b>4</b>      | X  |
| <b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?                                                                                                                                                                                                           | <b>5</b>      | X  |
| <b>6</b> Did the organization have members or stockholders?                                                                                                                                                                                                                                                                   | <b>6</b> X    |    |
| <b>7 a</b> Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?                                                                                                                                                                 | <b>7 a</b> X  |    |
| <b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?                                                                                                                                                      | <b>7 b</b>    | X  |
| <b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:                                                                                                                                                                                    |               |    |
| <b>a</b> The governing body?                                                                                                                                                                                                                                                                                                  | <b>8 a</b> X  |    |
| <b>b</b> Each committee with authority to act on behalf of the governing body?                                                                                                                                                                                                                                                | <b>8 b</b> X  |    |
| <b>9</b> Is there any officer, director or 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 . . . . .                                                                                             | <b>9</b>      | X  |

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

|                                                                                                                                                                                                                                                                                                        | Yes           | No |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----|
| <b>10 a</b> Did the organization have local chapters, branches, or affiliates?                                                                                                                                                                                                                         | <b>10 a</b>   | X  |
| <b>b</b> If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?                                                                    | <b>10 b</b>   |    |
| <b>11 a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?                                                                                                                                                                | <b>11 a</b> X |    |
| <b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990.                                                                                                                                                                                                 |               |    |
| <b>12 a</b> Did the organization have a written conflict of interest policy? If 'No,' go to line 13                                                                                                                                                                                                    | <b>12 a</b> X |    |
| <b>b</b> Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?                                                                                                                                                            | <b>12 b</b> X |    |
| <b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done                                                                                                                                             | <b>12 c</b> X |    |
| <b>13</b> Did the organization have a written whistleblower policy?                                                                                                                                                                                                                                    | <b>13</b> X   |    |
| <b>14</b> Did the organization have a written document retention and destruction policy?                                                                                                                                                                                                               | <b>14</b> X   |    |
| <b>15</b> 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?                                                                         |               |    |
| <b>a</b> The organization's CEO, Executive Director, or top management official                                                                                                                                                                                                                        | <b>15 a</b> X |    |
| <b>b</b> Other officers of key employees of the organization                                                                                                                                                                                                                                           | <b>15 b</b> X |    |
| If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)                                                                                                                                                                                                                   |               |    |
| <b>16 a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?                                                                                                                                      | <b>16 a</b>   | X  |
| <b>b</b> If 'Yes,' did the organization follow 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? | <b>16 b</b>   |    |

**Section C. Disclosure**

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

**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 ☐ Other (explain in Schedule O)

**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 during the tax year.

**20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization

► JACOB SCHRANTZ 418 SPRING STREET JAMESTOWN NY 14701 (716) 661-3390

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response to any question in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1 a** 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.

- 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, if any. 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 neither the organization nor any related organization compensated any current officer, director, or trustee.

| (A)<br>Name and Title                         | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|-----------------------------------------------|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|-----------------------|---------|--------------|------------------------------|--------|----------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
|                                               |                                                                                            | Individual trustee or director                                                                            | Institutional trustee | Officer | Key employee | Highest compensated employee | Former |                                                                      |                                                                           |                                                                                               |
| (1) JENNIFER L. SATALINO<br>PRESIDENT         | 3.00                                                                                       | X                                                                                                         |                       | X       |              |                              |        | 0.                                                                   | 0.                                                                        | 0.                                                                                            |
| (2) PAMELA D. NOLL<br>VICE-PRESIDENT          | 3.00                                                                                       | X                                                                                                         |                       | X       |              |                              |        | 0.                                                                   | 0.                                                                        | 0.                                                                                            |
| (3) CAROL S. HAY<br>SECRETARY                 | 3.00                                                                                       | X                                                                                                         |                       | X       |              |                              |        | 0.                                                                   | 0.                                                                        | 0.                                                                                            |
| (4) DENISE R. JONES<br>TREASURER              | 3.00                                                                                       | X                                                                                                         |                       | X       |              |                              |        | 0.                                                                   | 0.                                                                        | 0.                                                                                            |
| (5) MICHAEL C. BIRD<br>DIRECTOR               | 3.00                                                                                       | X                                                                                                         |                       |         |              |                              |        | 0.                                                                   | 0.                                                                        | 0.                                                                                            |
| (6) CHRISTY BRECHT<br>DIRECTOR                | 3.00                                                                                       | X                                                                                                         |                       |         |              |                              |        | 0.                                                                   | 0.                                                                        | 0.                                                                                            |
| (7) P. RICHARD FLEURANT<br>DIRECTOR           | 3.00                                                                                       | X                                                                                                         |                       |         |              |                              |        | 0.                                                                   | 0.                                                                        | 0.                                                                                            |
| (8) DR. RONALD W. KOHL<br>DIRECTOR            | 3.00                                                                                       | X                                                                                                         |                       |         |              |                              |        | 0.                                                                   | 0.                                                                        | 0.                                                                                            |
| (9) DONALD L. BUTLER<br>DIRECTOR              | 3.00                                                                                       | X                                                                                                         |                       |         |              |                              |        | 0.                                                                   | 0.                                                                        | 0.                                                                                            |
| (10) DANA LUNDBERG<br>DIRECTOR                | 3.00                                                                                       | X                                                                                                         |                       |         |              |                              |        | 0.                                                                   | 0.                                                                        | 0.                                                                                            |
| (11) STEPHEN J. WRIGHT<br>PAST-PRESIDENT      | 3.00                                                                                       | X                                                                                                         |                       | X       |              |                              |        | 0.                                                                   | 0.                                                                        | 0.                                                                                            |
| (12) RANDALL J. SWEENEY<br>EXECUTIVE DIRECTOR | 45.00                                                                                      | X                                                                                                         |                       | X       |              |                              |        | 113,942.                                                             | 0.                                                                        | 21,926.                                                                                       |
| (13) _____                                    | _____                                                                                      |                                                                                                           |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (14) _____                                    | _____                                                                                      |                                                                                                           |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |

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

| (A)<br>Name and title                                          | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|----------------------------------------------------------------|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|-----------------------|---------|--------------|------------------------------|--------|----------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
|                                                                |                                                                                            | Individual trustee or director                                                                            | Institutional trustee | Officer | Key employee | Highest compensated employee | Former |                                                                      |                                                                           |                                                                                               |
| (15) -----                                                     | -----                                                                                      |                                                                                                           |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (16) -----                                                     | -----                                                                                      |                                                                                                           |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (17) -----                                                     | -----                                                                                      |                                                                                                           |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (18) -----                                                     | -----                                                                                      |                                                                                                           |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (19) -----                                                     | -----                                                                                      |                                                                                                           |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (20) -----                                                     | -----                                                                                      |                                                                                                           |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (21) -----                                                     | -----                                                                                      |                                                                                                           |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (22) -----                                                     | -----                                                                                      |                                                                                                           |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (23) -----                                                     | -----                                                                                      |                                                                                                           |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (24) -----                                                     | -----                                                                                      |                                                                                                           |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (25) -----                                                     | -----                                                                                      |                                                                                                           |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| <b>1 b Sub-total</b>                                           |                                                                                            |                                                                                                           |                       |         |              |                              |        | 113,942.                                                             | 0.                                                                        | 21,926.                                                                                       |
| <b>c Total from continuation sheets to Part VII, Section A</b> |                                                                                            |                                                                                                           |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| <b>d Total (add lines 1b and 1c)</b>                           |                                                                                            |                                                                                                           |                       |         |              |                              |        | 113,942.                                                             | 0.                                                                        | 21,926.                                                                                       |

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

**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 |
|----------|-----|----|
| <b>3</b> |     | X  |
| <b>4</b> |     | X  |
| <b>5</b> |     | X  |

**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*

**5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If 'Yes,' complete Schedule J for such person*

**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. Report compensation for the calendar year ending with or within the organization's tax year.

| (A)<br>Name and business address | (B)<br>Description of services | (C)<br>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 **1**

**Part VIII Statement of Revenue**Check if Schedule O contains a response to any question in this Part VIII ☐

|                                                           |                                                                                                                | (A)<br>Total revenue | (B)<br>Related or<br>exempt<br>function<br>revenue | (C)<br>Unrelated<br>business<br>revenue | (D)<br>Revenue<br>excluded from tax<br>under sections<br>512, 513, or 514 |            |
|-----------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|----------------------|----------------------------------------------------|-----------------------------------------|---------------------------------------------------------------------------|------------|
| CONTRIBUTIONS, GIFTS, GRANTS<br>AND OTHER SIMILAR AMOUNTS | 1 a Federated campaigns                                                                                        | 1 a                  |                                                    |                                         |                                                                           |            |
|                                                           | b Membership dues                                                                                              | 1 b                  |                                                    |                                         |                                                                           |            |
|                                                           | c Fundraising events                                                                                           | 1 c 29,997.          |                                                    |                                         |                                                                           |            |
|                                                           | d Related organizations                                                                                        | 1 d                  |                                                    |                                         |                                                                           |            |
|                                                           | e Government grants (contributions)                                                                            | 1 e                  |                                                    |                                         |                                                                           |            |
|                                                           | f All other contributions, gifts, grants, and<br>similar amounts not included above                            | 1 f 1,300,548.       |                                                    |                                         |                                                                           |            |
|                                                           | g Noncash contributions included in lns 1a-1f \$                                                               | 92,541.              |                                                    |                                         |                                                                           |            |
|                                                           | h Total. Add lines 1a-1f                                                                                       | 1,330,545.           |                                                    |                                         |                                                                           |            |
| PROGRAM SERVICE REVENUE                                   | Business Code                                                                                                  |                      |                                                    |                                         |                                                                           |            |
|                                                           | 2 a                                                                                                            |                      |                                                    |                                         |                                                                           |            |
|                                                           | b                                                                                                              |                      |                                                    |                                         |                                                                           |            |
|                                                           | c                                                                                                              |                      |                                                    |                                         |                                                                           |            |
|                                                           | d                                                                                                              |                      |                                                    |                                         |                                                                           |            |
|                                                           | e                                                                                                              |                      |                                                    |                                         |                                                                           |            |
|                                                           | f All other program service revenue                                                                            | 0.                   | 0.                                                 | 0.                                      | 0.                                                                        |            |
|                                                           | g Total. Add lines 2a-2f                                                                                       | 0.                   |                                                    |                                         |                                                                           |            |
| OTHER REVENUE                                             | 3 Investment income (including dividends, interest and<br>other similar amounts)                               |                      | 1,397,142.                                         | 0.                                      | 0.                                                                        | 1,397,142. |
|                                                           | 4 Income from investment of tax-exempt bond proceeds                                                           |                      |                                                    |                                         |                                                                           |            |
|                                                           | 5 Royalties                                                                                                    |                      |                                                    |                                         |                                                                           |            |
|                                                           | (i) Real (ii) Personal                                                                                         |                      |                                                    |                                         |                                                                           |            |
|                                                           | 6 a Gross rents                                                                                                |                      |                                                    |                                         |                                                                           |            |
|                                                           | b Less rental expenses                                                                                         |                      |                                                    |                                         |                                                                           |            |
|                                                           | c Rental income or (loss)                                                                                      |                      |                                                    |                                         |                                                                           |            |
|                                                           | d Net rental income or (loss)                                                                                  |                      |                                                    |                                         |                                                                           |            |
|                                                           | (i) Securities (ii) Other                                                                                      |                      |                                                    |                                         |                                                                           |            |
|                                                           | 7 a Gross amount from sales of<br>assets other than inventory                                                  | 20,102,015.          |                                                    |                                         |                                                                           |            |
|                                                           | b Less cost or other basis<br>and sales expenses                                                               | 17,455,889.          |                                                    |                                         |                                                                           |            |
|                                                           | c Gain or (loss)                                                                                               | 2,646,126.           |                                                    |                                         |                                                                           |            |
|                                                           | d Net gain or (loss)                                                                                           | 2,646,126.           | 0.                                                 | 0.                                      | 2,646,126.                                                                |            |
|                                                           | 8 a Gross income from fundraising events<br>(not including \$ 29,997.<br>of contributions reported on line 1c) |                      |                                                    |                                         |                                                                           |            |
|                                                           | See Part IV, line 18                                                                                           | a 17,783.            |                                                    |                                         |                                                                           |            |
|                                                           | b Less direct expenses                                                                                         | b 28,906.            |                                                    |                                         |                                                                           |            |
|                                                           | c Net income or (loss) from fundraising events                                                                 | -11,123.             |                                                    | 0.                                      | -11,123.                                                                  |            |
|                                                           | 9 a Gross income from gaming activities<br>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<br>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 UNCLAIMED SCHOLARSHIP GRANTS                         | 900099                                                                                                         | 42,074.              | 0.                                                 | 0.                                      | 42,074.                                                                   |            |
| b OTHER INCOME                                            | 900099                                                                                                         | 605.                 | 0.                                                 | 0.                                      | 605.                                                                      |            |
| c                                                         |                                                                                                                |                      |                                                    |                                         |                                                                           |            |
| d All other revenue                                       |                                                                                                                | 0.                   | 0.                                                 | 0.                                      | 0.                                                                        |            |
| e Total. Add lines 11a-11d                                |                                                                                                                | 42,679.              |                                                    |                                         |                                                                           |            |
| 12 Total revenue. See instructions                        |                                                                                                                | 5,405,369.           | 0.                                                 | 0.                                      | 4,074,824.                                                                |            |

**Part IX Statement of Functional Expenses**

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

Check if Schedule O contains a response to any question in this Part IX ☐

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII                                                                                                                                                             | (A)<br>Total expenses | (B)<br>Program service expenses | (C)<br>Management and general expenses | (D)<br>Fundraising expenses |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------|----------------------------------------|-----------------------------|
| 1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21                                                                                                                                 | 1,305,025.            | 1,305,025.                      |                                        |                             |
| 2 Grants and other assistance to individuals in the United States. See Part IV, line 22                                                                                                                                                   | 689,119.              | 689,119.                        |                                        |                             |
| 3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16                                                                                                      | 0.                    | 0.                              |                                        |                             |
| 4 Benefits paid to or for members                                                                                                                                                                                                         | 0.                    | 0.                              |                                        |                             |
| 5 Compensation of current officers, directors, trustees, and key employees                                                                                                                                                                | 135,868.              | 33,966.                         | 27,174.                                | 74,728.                     |
| 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)                                                                                           | 0.                    | 0.                              | 0.                                     | 0.                          |
| 7 Other salaries and wages                                                                                                                                                                                                                | 292,043.              | 76,197.                         | 134,414.                               | 81,432.                     |
| 8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)                                                                                                                              | 26,107.               | 6,831.                          | 12,059.                                | 7,217.                      |
| 9 Other employee benefits                                                                                                                                                                                                                 | 38,109.               | 14,716.                         | 18,019.                                | 5,374.                      |
| 10 Payroll taxes                                                                                                                                                                                                                          | 30,015.               | 7,756.                          | 11,647.                                | 10,612.                     |
| 11 Fees for services (non-employees):                                                                                                                                                                                                     |                       |                                 |                                        |                             |
| a Management                                                                                                                                                                                                                              |                       |                                 |                                        |                             |
| b Legal                                                                                                                                                                                                                                   |                       |                                 |                                        |                             |
| c Accounting                                                                                                                                                                                                                              |                       |                                 |                                        |                             |
| d Lobbying                                                                                                                                                                                                                                |                       |                                 |                                        |                             |
| e Professional fundraising services. See Part IV, line 17                                                                                                                                                                                 |                       |                                 |                                        |                             |
| f Investment management fees                                                                                                                                                                                                              | 93,064.               | 24,936.                         | 36,038.                                | 32,090.                     |
| g Other. (If line 11g amt exceeds 10% of line 25, column (A) amt, list line 11g expenses on Sch O)                                                                                                                                        |                       |                                 |                                        |                             |
| 12 Advertising and promotion                                                                                                                                                                                                              |                       |                                 |                                        |                             |
| 13 Office expenses                                                                                                                                                                                                                        | 15,297.               | 4,637.                          | 5,639.                                 | 5,021.                      |
| 14 Information technology                                                                                                                                                                                                                 |                       |                                 |                                        |                             |
| 15 Royalties                                                                                                                                                                                                                              |                       |                                 |                                        |                             |
| 16 Occupancy                                                                                                                                                                                                                              | 26,741.               | 1,157.                          | 24,096.                                | 1,488.                      |
| 17 Travel                                                                                                                                                                                                                                 |                       |                                 |                                        |                             |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials                                                                                                                                         |                       |                                 |                                        |                             |
| 19 Conferences, conventions, and meetings                                                                                                                                                                                                 |                       |                                 |                                        |                             |
| 20 Interest                                                                                                                                                                                                                               | 4,451.                | 0.                              | 4,451.                                 | 0.                          |
| 21 Payments to affiliates                                                                                                                                                                                                                 |                       |                                 |                                        |                             |
| 22 Depreciation, depletion, and amortization                                                                                                                                                                                              | 17,500.               | 0.                              | 17,500.                                | 0.                          |
| 23 Insurance                                                                                                                                                                                                                              |                       |                                 |                                        |                             |
| 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)                                      |                       |                                 |                                        |                             |
| a PROMOTION & DEVELOPMENT                                                                                                                                                                                                                 | 67,271.               | 0.                              | 0.                                     | 67,271.                     |
| b PROFESSIONAL FEES                                                                                                                                                                                                                       | 50,121.               | 12,336.                         | 21,909.                                | 15,876.                     |
| c REPAIRS & MAINTENANCE                                                                                                                                                                                                                   | 8,909.                | 801.                            | 7,077.                                 | 1,031.                      |
| d MISCELLANEOUS                                                                                                                                                                                                                           | 30,493.               | 3,186.                          | 15,406.                                | 11,901.                     |
| e All other expenses                                                                                                                                                                                                                      |                       |                                 |                                        |                             |
| 25 Total functional expenses. Add lines 1 through 24e.                                                                                                                                                                                    | 2,830,133.            | 2,180,663.                      | 335,429.                               | 314,041.                    |
| 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) |                       |                                 |                                        |                             |

**Part X Balance Sheet**Check if Schedule O contains a response to any question in this Part X ☐

|                                                                     |                                                                                                                                                                                                                                                                                                                                | (A)<br>Beginning of year |             | (B)<br>End of year |
|---------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------|--------------------|
| ASSETS                                                              | 1 Cash – non-interest-bearing                                                                                                                                                                                                                                                                                                  | 100.                     | 1           | 100.               |
|                                                                     | 2 Savings and temporary cash investments                                                                                                                                                                                                                                                                                       | 2,271,733.               | 2           | 1,834,310.         |
|                                                                     | 3 Pledges and grants receivable, net                                                                                                                                                                                                                                                                                           |                          | 3           | 52,742.            |
|                                                                     | 4 Accounts receivable, net                                                                                                                                                                                                                                                                                                     | 0.                       | 4           | 148.               |
|                                                                     | 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L                                                                                                                                                          |                          | 5           |                    |
|                                                                     | 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L |                          | 6           |                    |
|                                                                     | 7 Notes and loans receivable, net                                                                                                                                                                                                                                                                                              | 49,698.                  | 7           | 47,378.            |
|                                                                     | 8 Inventories for sale or use                                                                                                                                                                                                                                                                                                  |                          | 8           |                    |
|                                                                     | 9 Prepaid expenses and deferred charges                                                                                                                                                                                                                                                                                        | 23,384.                  | 9           | 22,413.            |
|                                                                     | 10a Land, buildings, and equipment, cost or other basis Complete Part VI of Schedule D                                                                                                                                                                                                                                         | 10a 587,819.             |             |                    |
|                                                                     | b Less: accumulated depreciation                                                                                                                                                                                                                                                                                               | 10b 190,844.             |             |                    |
|                                                                     |                                                                                                                                                                                                                                                                                                                                | 392,631.                 | 10c         | 396,975.           |
|                                                                     | 11 Investments – publicly traded securities                                                                                                                                                                                                                                                                                    | 58,895,282.              | 11          | 65,724,113.        |
|                                                                     | 12 Investments – other securities See Part IV, line 11                                                                                                                                                                                                                                                                         |                          | 12          |                    |
|                                                                     | 13 Investments – program-related See Part IV, line 11                                                                                                                                                                                                                                                                          |                          | 13          |                    |
| 14 Intangible assets                                                |                                                                                                                                                                                                                                                                                                                                | 14                       |             |                    |
| 15 Other assets See Part IV, line 11                                |                                                                                                                                                                                                                                                                                                                                | 15                       |             |                    |
| 16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) | 61,632,828.                                                                                                                                                                                                                                                                                                                    | 16                       | 68,078,179. |                    |
| LIABILITIES                                                         | 17 Accounts payable and accrued expenses                                                                                                                                                                                                                                                                                       | 3,959.                   | 17          | 11,940.            |
|                                                                     | 18 Grants payable                                                                                                                                                                                                                                                                                                              | 884,432.                 | 18          | 727,251.           |
|                                                                     | 19 Deferred revenue                                                                                                                                                                                                                                                                                                            |                          | 19          |                    |
|                                                                     | 20 Tax-exempt bond liabilities                                                                                                                                                                                                                                                                                                 |                          | 20          |                    |
|                                                                     | 21 Escrow or custodial account liability. Complete Part IV of Schedule D                                                                                                                                                                                                                                                       |                          | 21          |                    |
|                                                                     | 22 Loans and other 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                                                                                                                                                                                                                                                              | 99,620.                  | 23          | 58,471.            |
|                                                                     | 24 Unsecured notes and loans payable to unrelated third parties                                                                                                                                                                                                                                                                |                          | 24          |                    |
|                                                                     | 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D                                                                                                                                                       | 3,986,516.               | 25          | 4,456,567.         |
|                                                                     | 26 <b>Total liabilities.</b> Add lines 17 through 25                                                                                                                                                                                                                                                                           | 4,974,527.               | 26          | 5,254,229.         |
| NET ASSETS OR FUND BALANCES                                         | <b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>                                                                                                                                                                     |                          |             |                    |
|                                                                     | 27 Unrestricted net assets                                                                                                                                                                                                                                                                                                     | 56,658,301.              | 27          | 62,823,950.        |
|                                                                     | 28 Temporarily restricted net assets                                                                                                                                                                                                                                                                                           |                          | 28          |                    |
|                                                                     | 29 Permanently restricted net assets                                                                                                                                                                                                                                                                                           |                          | 29          |                    |
|                                                                     | <b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>                                                                                                                                                                                              |                          |             |                    |
|                                                                     | 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                                                                                                                                                                                                                                                                                           | 56,658,301.              | 33          | 62,823,950.        |
|                                                                     | 34 <b>Total liabilities and net assets/fund balances</b>                                                                                                                                                                                                                                                                       | 61,632,828.              | 34          | 68,078,179.        |

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Form 990 (2012)

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response to any question in this Part XI ☐

|    |                                                                                                                |    |             |
|----|----------------------------------------------------------------------------------------------------------------|----|-------------|
| 1  | Total revenue (must equal Part VIII, column (A), line 12)                                                      | 1  | 5,405,369.  |
| 2  | Total expenses (must equal Part IX, column (A), line 25)                                                       | 2  | 2,830,133.  |
| 3  | Revenue less expenses Subtract line 2 from line 1                                                              | 3  | 2,575,236.  |
| 4  | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))                      | 4  | 56,658,301. |
| 5  | Net unrealized gains (losses) on investments                                                                   | 5  | 4,037,832.  |
| 6  | Donated services and use of facilities                                                                         | 6  | 0.          |
| 7  | Investment expenses                                                                                            | 7  | 0.          |
| 8  | Prior period adjustments                                                                                       | 8  | 0.          |
| 9  | Other changes in net assets or fund balances (explain in Schedule O)                                           | 9  | -447,419.   |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | 62,823,950. |

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response to any question in this Part XII ☐

- 1 Accounting method used to prepare the Form 990
- ☐
- Cash
- ☒
- Accrual
- ☐
- Other

If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O

- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:

- ☐
- Separate basis
- ☐
- Consolidated basis
- ☐
- Both consolidated and separate basis

- b Were the organization's financial statements audited by an independent accountant?

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both

- ☒
- Separate basis
- ☐
- Consolidated basis
- ☐
- Both consolidated and separate basis

- c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

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

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

|    | Yes | No |
|----|-----|----|
| 2a |     | X  |
| 2b | X   |    |
| 2c | X   |    |
| 3a |     | X  |
| 3b |     |    |

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Form 990 (2012)

**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

**2012**

Open to Public  
Inspection

Name of the organization

CHAUTAUQUA REGION COMMUNITY FOUNDATION, INC.

Employer identification number

16-1116837

**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 carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I      b ☐ Type II      c ☐ Type III – Functionally integrated      d ☐ Type III – Non-functionally integrated
- 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 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 |
|------------|-----|----|
| 11 g (i)   |     |    |
| 11 g (ii)  |     |    |
| 11 g (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 column (i) listed in your governing document? |    | (v) Did you notify the organization in column (i) of your support? |    | (vi) Is the organization in column (i) organized in the U.S.? |    | (vii) Amount of monetary support |
|------------------------------------|----------|---------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|----|--------------------------------------------------------------------|----|---------------------------------------------------------------|----|----------------------------------|
|                                    |          |                                                                                             | Yes                                                                       | No | Yes                                                                | No | Yes                                                           | No |                                  |
| (A)                                |          |                                                                                             |                                                                           |    |                                                                    |    |                                                               |    |                                  |
| (B)                                |          |                                                                                             |                                                                           |    |                                                                    |    |                                                               |    |                                  |
| (C)                                |          |                                                                                             |                                                                           |    |                                                                    |    |                                                               |    |                                  |
| (D)                                |          |                                                                                             |                                                                           |    |                                                                    |    |                                                               |    |                                  |
| (E)                                |          |                                                                                             |                                                                           |    |                                                                    |    |                                                               |    |                                  |
| Total                              |          |                                                                                             |                                                                           |    |                                                                    |    |                                                               |    |                                  |

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

Schedule A (Form 990 or 990-EZ) 2012

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

| Calendar year (or fiscal year beginning in) ▶                                                                                                                                                         | (a) 2008   | (b) 2009 | (c) 2010   | (d) 2011   | (e) 2012   | (f) Total   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----------|------------|------------|------------|-------------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants'.)                                                                                                  | 6,577,512. | 977,427. | 3,247,451. | 2,598,752. | 1,330,545. | 14,731,687. |
| 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 <b>Total.</b> Add lines 1 through 3                                                                                                                                                                 | 6,577,512. | 977,427. | 3,247,451. | 2,598,752. | 1,330,545. | 14,731,687. |
| 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) |            |          |            |            |            | 1,349,817.  |
| 6 <b>Public support.</b> Subtract line 5 from line 4                                                                                                                                                  |            |          |            |            |            | 13,381,870. |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in) ▶                                                                                                                                                                             | (a) 2008   | (b) 2009   | (c) 2010   | (d) 2011   | (e) 2012   | (f) Total   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|------------|------------|------------|------------|-------------|
| 7 Amounts from line 4                                                                                                                                                                                                     | 6,577,512. | 977,427.   | 3,247,451. | 2,598,752. | 1,330,545. | 14,731,687. |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources                                                                                          | 1,352,349. | 1,282,558. | 1,014,644. | 1,160,218. | 1,397,142. | 6,206,911.  |
| 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.)                                                                                                                       | 100,039.   | 80,478.    | 98,882.    | 63,151.    | 60,462.    | 403,012.    |
| 11 <b>Total support.</b> Add lines 7 through 10                                                                                                                                                                           |            |            |            |            |            | 21,341,610. |
| 12 Gross receipts from related activities, etc. (see instructions)                                                                                                                                                        |            |            |            |            | 12         |             |
| 13 <b>First five years.</b> 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 <b>stop here</b> ▶ <input type="checkbox"/> |            |            |            |            |            |             |

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

|                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|---------|
| 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))                                                                                                                                                                                                                                                                                                                                               | 14 | 62.70 % |
| 15 Public support percentage from 2011 Schedule A, Part II, line 14                                                                                                                                                                                                                                                                                                                                                                     | 15 | 66.24 % |
| 16a <b>33-1/3% support test – 2012.</b> If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>                                                                                                                                                            |    |         |
| b <b>33-1/3% support test – 2011.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>                                                                                                                                                                        |    |         |
| 17a <b>10%-facts-and-circumstances test – 2012.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>    |    |         |
| b <b>10%-facts-and-circumstances test – 2011.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/> |    |         |
| 18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>                                                                                                                                                                                                                                                                 |    |         |

**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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

| Calendar year (or fiscal yr beginning in) ▶                                                                                                                                | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (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 <b>Total.</b> 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 <b>Public support.</b> (Subtract line 7c from line 6.)                                                                                                                   |          |          |          |          |          |           |

**Section B. Total Support**

| Calendar year (or fiscal yr beginning in) ▶                                                                                                                                                                               | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (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 <b>Total support.</b> (Add lines 9, 10c, 11, and 12.)                                                                                                                                                                  |          |          |          |          |          |           |
| 14 <b>First five years.</b> 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 <b>stop here</b> ▶ <input type="checkbox"/> |          |          |          |          |          |           |

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

|                                                                                           |    |   |
|-------------------------------------------------------------------------------------------|----|---|
| 15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f)) | 15 | % |
| 16 Public support percentage from 2011 Schedule A, Part III, line 15                      | 16 | % |

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

|                                                                                                |    |   |
|------------------------------------------------------------------------------------------------|----|---|
| 17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f)) | 17 | % |
| 18 Investment income percentage from 2011 Schedule A, Part III, line 17                        | 18 | % |

19a **33-1/3% support tests – 2012.** 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 – 2011.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

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

**Part IV** **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information.  
(See instructions).

Other Income Part II, Line 10 -----

Description: RETURNED GRANTS -----

2008: 56991. -----

2009: 52313. -----

2010: 24639. -----

2011: 44919. -----

2012: 42074. -----

Description: OTHER INCOME -----

2008: 3613. -----

2009: 677. -----

2010: 62073. -----

2011: 1667. -----

2012: 605. -----

Description: NON-CONTRIB FR RECEIPTS -----

2008: 39435. -----

2009: 27488. -----

2010: 12170. -----

2011: 16565. -----

2012: 17783. -----

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

Name of the organization

**Supplemental Financial Statements**

► Complete if the organization answered 'Yes,' to Form 990,  
Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.  
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

**2012****Open to Public  
Inspection**

Employer identification number

CHAUTAUQUA REGION COMMUNITY FOUNDATION, INC.

16-1116837

**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              | 20.                     | 572.                         |
| 2 Aggregate contributions to (during year) | 20,094.                 | 1,310,451.                   |
| 3 Aggregate grants from (during year)      | 147,085.                | 1,847,059.                   |
| 4 Aggregate value at end of year           | 1,309,364.              | 66,768,815.                  |

- 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).
- |                                                                                              |                                                                              |
|----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| <input type="checkbox"/> Preservation of land for public use (e.g., recreation or education) | <input type="checkbox"/> Preservation of an historically important land area |
| <input type="checkbox"/> Protection of natural habitat                                       | <input type="checkbox"/> Preservation of a certified historic structure      |
| <input type="checkbox"/> 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 |
|----|---------------------------------|
| 2a |                                 |
| 2b |                                 |
| 2c |                                 |
| 2d |                                 |

- a Total number of conservation easements
- b Total acreage restricted by conservation easements
- c Number of conservation easements on a certified historic structure included in (a)
- d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register
- 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 XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

- 1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (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 (ASC 958) 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 XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

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

b If 'Yes,' explain the arrangement in Part XIII and complete the following table

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

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

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

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

|                                                  | (a) Current | (b) Prior year | (c) Two years | (d) Three years | (e) Four years |
|--------------------------------------------------|-------------|----------------|---------------|-----------------|----------------|
| 1 a Beginning of year balance                    | 59,450,135. | 60,700,464.    | 52,841,158.   | 44,376,605.     | 59,653,658.    |
| b Contributions                                  | 1,081,737.  | 2,389,466.     | 3,425,325.    | 768,367.        | 6,345,669.     |
| c Net investment earnings, gains, and losses     | 7,937,080.  | -1,001,971.    | 6,915,490.    | 10,408,700.     | -18,855,383.   |
| d Grants or scholarships                         | 1,834,911.  | 1,927,723.     | 1,835,170.    | 2,090,415.      | 1,964,496.     |
| e Other expenditures for facilities and programs | 668,029.    | 681,510.       | 608,941.      | 519,229.        | 660,570.       |
| f Administrative expenses                        | 32,290.     | 28,591.        | 37,398.       | 102,870.        | 142,273.       |
| g End of year balance                            | 65,933,722. | 59,450,135.    | 60,700,464.   | 52,841,158.     | 44,376,605.    |

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

- a Board designated or quasi-endowment ▶ 100.00 %  
 b Permanent endowment ▶ %  
 c Temporarily restricted endowment ▶ %

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

3 a 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)  |     | X  |
| 3a(ii) |     | X  |
| 3b     |     |    |

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

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

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

| Description of property                                                                                  | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|----------------------------------------------------------------------------------------------------------|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1 a Land                                                                                                 |                                      | 18,500.                         |                              | 18,500.        |
| b Buildings                                                                                              |                                      | 523,001.                        | 161,812.                     | 361,189.       |
| c Leasehold improvements                                                                                 |                                      |                                 |                              |                |
| d Equipment                                                                                              |                                      | 46,318.                         | 29,032.                      | 17,286.        |
| e Other                                                                                                  |                                      |                                 |                              |                |
| <b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c) ) |                                      |                                 |                              | 396,975.       |

BAA

Schedule D (Form 990) 2012

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

| (a) Description of security or category<br>(including name of security) | (b) Book value | (c) Method of valuation: Cost or<br>end-of-year market value |
|-------------------------------------------------------------------------|----------------|--------------------------------------------------------------|
| (1) Financial derivatives                                               |                |                                                              |
| (2) Closely-held equity interests                                       |                |                                                              |
| (3) Other                                                               |                |                                                              |
| (A) -----                                                               |                |                                                              |
| (B) -----                                                               |                |                                                              |
| (C) -----                                                               |                |                                                              |
| (D) -----                                                               |                |                                                              |
| (E) -----                                                               |                |                                                              |
| (F) -----                                                               |                |                                                              |
| (G) -----                                                               |                |                                                              |
| (H) -----                                                               |                |                                                              |
| (I) -----                                                               |                |                                                              |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)    |                |                                                              |

**Part VIII Investments – Program Related.** See Form 990, Part X, line 13.

| (a) Description of investment type                                   | (b) Book value | (c) Method of valuation: Cost or<br>end-of-year market value |
|----------------------------------------------------------------------|----------------|--------------------------------------------------------------|
| (1)                                                                  |                |                                                              |
| (2)                                                                  |                |                                                              |
| (3)                                                                  |                |                                                              |
| (4)                                                                  |                |                                                              |
| (5)                                                                  |                |                                                              |
| (6)                                                                  |                |                                                              |
| (7)                                                                  |                |                                                              |
| (8)                                                                  |                |                                                              |
| (9)                                                                  |                |                                                              |
| (10)                                                                 |                |                                                              |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) |                |                                                              |

**Part IX Other Assets.** See Form 990, Part X, line 15.

| (a) Description                                                       | (b) Book value |
|-----------------------------------------------------------------------|----------------|
| (1)                                                                   |                |
| (2)                                                                   |                |
| (3)                                                                   |                |
| (4)                                                                   |                |
| (5)                                                                   |                |
| (6)                                                                   |                |
| (7)                                                                   |                |
| (8)                                                                   |                |
| (9)                                                                   |                |
| (10)                                                                  |                |
| Total. (Column (b) must equal Form 990, Part X, column (B), line 15.) |                |

**Part X Other Liabilities.** See Form 990, Part X, line 25.

| (a) Description of liability                                         | (b) Book value |
|----------------------------------------------------------------------|----------------|
| (1) Federal income taxes                                             |                |
| (2) GIFT ANNUITIES PAYABLE                                           | 202,649.       |
| (3) FUNDS HELD FOR AGENCIES                                          | 4,253,918.     |
| (4)                                                                  |                |
| (5)                                                                  |                |
| (6)                                                                  |                |
| (7)                                                                  |                |
| (8)                                                                  |                |
| (9)                                                                  |                |
| (10)                                                                 |                |
| (11)                                                                 |                |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 25.) | 4,456,567.     |

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

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

|   |                                                                                 |    |            |
|---|---------------------------------------------------------------------------------|----|------------|
| 1 | Total revenue, gains, and other support per audited financial statements        | 1  | 8,737,653. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12:             |    |            |
| a | Net unrealized gains on investments                                             | 2a | 4,037,830. |
| b | Donated services and use of facilities                                          | 2b |            |
| c | Recoveries of prior year grants                                                 | 2c |            |
| d | Other (Describe in Part XIII.)                                                  | 2d |            |
| e | Add lines 2a through 2d                                                         | 2e | 4,037,830. |
| 3 | Subtract line 2e from line 1                                                    | 3  | 4,699,823. |
| 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 XIII.)                                                  | 4b | 705,546.   |
| c | Add lines 4a and 4b                                                             | 4c | 705,546.   |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | 5  | 5,405,369. |

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

|   |                                                                                  |    |            |
|---|----------------------------------------------------------------------------------|----|------------|
| 1 | Total expenses and losses per audited financial statements                       | 1  | 2,568,026. |
| 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 XIII.)                                                   | 2d |            |
| e | Add lines 2a through 2d                                                          | 2e |            |
| 3 | Subtract line 2e from line 1                                                     | 3  | 2,568,026. |
| 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 XIII.)                                                   | 4b | 262,107.   |
| c | Add lines 4a and 4b                                                              | 4c | 262,107.   |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | 5  | 2,830,133. |

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

Pt V Line 4 INTENDED USES FOR ENDOWMENT FUNDS:

THE FOUNDATION'S ENDOWMENT FUNDS ARE TO BE USED TO ENRICH

THE QUALITY OF LIFE IN THE CHAUTAUQUA REGION. INCOME

DERIVED FROM THESE CHARITABLE FUNDS IS TO BE USED TO SUPPORT

WORTHWHILE EDUCATIONAL, SOCIAL, CULTURAL, AND CIVIC PROJECTS

WHICH MEET THE CRITERIA ESTABLISHED BY ITS DONORS AND THE

BOARD OF DIRECTORS.

Pt X Line 2 LIABILITY UNDER FIN 48 FOOTNOTE:

BAA

Schedule D (Form 990) 2012

**Part XIII** Supplemental Information (continued)

IN ACCORDANCE WITH U.S. GENERALLY ACCEPTED ACCOUNTING

PRINCIPLES, THE FOUNDATION ADOPTED PROVISIONS RELATING

TO ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, EFFECTIVE

JANUARY 1, 2009. ADOPTION OF THESE PROVISIONS DID NOT

RESULT IN A CHANGE IN THE FOUNDATION'S PRIOR REPORTED

NET ASSETS.

ANY PENALTIES AND INTEREST ASSOCIATED WITH UNCERTAIN TAX

POSITIONS WOULD BE INCLUDED AS PART OF ANY INCOME TAX

Pt X Line 2 PROVISION. FOR 2012, THERE WERE NO PENALTIES AND INTEREST

RECOGNIZED RELATED TO UNCERTAIN TAX POSITIONS.

THE FOUNDATION FILES EXEMPT ORGANIZATION RETURNS WITH THE

U.S. FEDERAL AND NEW YORK JURISDICTIONS. THE FOUNDATION'S

RETURNS PRIOR TO 2009 ARE CLOSED.

Pt XI Line 4b RECONCILIATION OF REVENUE - OTHER:

AGENCY FUNDS - \$719,675

NET REVALUATION OF CHARITABLE GIFT ANNUITIES - \$14,777

SPECIAL EVENTS EXPENSES - (\$28,906)

TOTAL LINE 4b - \$705,546

Pt XII Line 4b RECONCILIATION OF EXPENSES - OTHER:

AGENCY FUND EXPENSES - \$262,107

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

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

2012

**Open to Public Inspection**

Name of the organization

CHAUTAUQUA REGION COMMUNITY FOUNDATION, INC.

Employer identification number

16-1116837

## 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.

| (i) Name and address of individual or entity (fundraiser) | (ii) Activity | (iii) Did fundraiser have custody or control of contributions? |    | (iv) Gross receipts from activity | (v) Amount paid to (or retained by) fundraiser listed in column (i) | (vi) Amount paid to (or retained by) organization |
|-----------------------------------------------------------|---------------|----------------------------------------------------------------|----|-----------------------------------|---------------------------------------------------------------------|---------------------------------------------------|
|                                                           |               | Yes                                                            | No |                                   |                                                                     |                                                   |
| 1                                                         |               |                                                                |    |                                   |                                                                     |                                                   |
| 2                                                         |               |                                                                |    |                                   |                                                                     |                                                   |
| 3                                                         |               |                                                                |    |                                   |                                                                     |                                                   |
| 4                                                         |               |                                                                |    |                                   |                                                                     |                                                   |
| 5                                                         |               |                                                                |    |                                   |                                                                     |                                                   |
| 6                                                         |               |                                                                |    |                                   |                                                                     |                                                   |
| 7                                                         |               |                                                                |    |                                   |                                                                     |                                                   |
| 8                                                         |               |                                                                |    |                                   |                                                                     |                                                   |
| 9                                                         |               |                                                                |    |                                   |                                                                     |                                                   |
| 10                                                        |               |                                                                |    |                                   |                                                                     |                                                   |
| <b>Total</b>                                              |               |                                                                |    |                                   |                                                                     |                                                   |

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

**Part II Fundraising Events.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

|                 |                                                               | (a) Event #1<br>GOLF TOURNAMENT<br>(event type) | (b) Event #2<br>JDH BANQUET<br>(event type) | (c) Other events<br>NONE<br>(total number) | (d) Total events<br>(add column (a)<br>through column (c)) |
|-----------------|---------------------------------------------------------------|-------------------------------------------------|---------------------------------------------|--------------------------------------------|------------------------------------------------------------|
|                 |                                                               |                                                 |                                             |                                            |                                                            |
| REVENUE         | 1 Gross receipts                                              | 38,175.                                         | 9,605.                                      |                                            | 47,780.                                                    |
|                 | 2 Less: Charitable contributions                              | 25,362.                                         | 4,635.                                      |                                            | 29,997.                                                    |
|                 | 3 Gross income (line 1 minus line 2)                          | 12,813.                                         | 4,970.                                      |                                            | 17,783.                                                    |
| DIRECT EXPENSES | 4 Cash prizes                                                 |                                                 |                                             |                                            |                                                            |
|                 | 5 Noncash prizes                                              | 8,488.                                          |                                             |                                            | 8,488.                                                     |
|                 | 6 Rent/facility costs                                         |                                                 |                                             |                                            |                                                            |
|                 | 7 Food and beverages                                          | 3,166.                                          | 6,484.                                      |                                            | 9,650.                                                     |
|                 | 8 Entertainment                                               |                                                 |                                             |                                            |                                                            |
|                 | 9 Other direct expenses                                       | 8,737.                                          | 2,031.                                      |                                            | 10,768.                                                    |
|                 | 10 Direct expense summary Add lines 4 through 9 in column (d) |                                                 |                                             |                                            | 28,906.                                                    |
|                 | 11 Net income summary Combine line 3, column (d), and line 10 |                                                 |                                             |                                            | -11,123.                                                   |

**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<br>bingo/progressive<br>bingo | (c) Other gaming  | (d) Total gaming<br>(add column (a)<br>through column (c)) |
|-----------------|--------------------------------------------------------------------|-------------------|-----------------------------------------------------|-------------------|------------------------------------------------------------|
|                 |                                                                    |                   |                                                     |                   |                                                            |
| REVENUE         | 1 Gross revenue                                                    |                   |                                                     |                   |                                                            |
|                 | 2 Cash prizes                                                      |                   |                                                     |                   |                                                            |
| DIRECT EXPENSES | 3 Non-cash prizes                                                  |                   |                                                     |                   |                                                            |
|                 | 4 Rent/facility costs                                              |                   |                                                     |                   |                                                            |
|                 | 5 Other direct expenses                                            |                   |                                                     |                   |                                                            |
|                 | 6 Volunteer labor                                                  | Yes _____ %<br>No | Yes _____ %<br>No                                   | Yes _____ %<br>No |                                                            |
|                 | 7 Direct expense summary Add lines 2 through 5 in column (d)       |                   |                                                     |                   |                                                            |
|                 | 8 Net gaming income summary Combine lines 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? ☐ Yes ☐ No

b If 'No,' explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If 'Yes,' explain: \_\_\_\_\_



**SCHEDULE I**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990.

OMB No 1545-0047

**2012**

Open to Public  
Inspection

Name of the organization

**CHAUTAUQUA REGION COMMUNITY FOUNDATION, INC.**

Employer identification number

16-1116837

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

- 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?
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

☒ Yes ☐ No

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

| 1 (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|------------------------------------------------------|---------|-------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| (1) SEE ATTACH LIST<br>NON-DONOR-ADVISED             |         |                               | 929,039.                 |                                   |                                                       |                                        | SEE ATTACH                         |
| (2) SEE ATTACHED LIST<br>DONOR ADVISED               |         |                               | 147,085.                 |                                   |                                                       |                                        | SEE ATTACH                         |
| (3) -----                                            |         |                               |                          |                                   |                                                       |                                        |                                    |
| (4) -----                                            |         |                               |                          |                                   |                                                       |                                        |                                    |
| (5) -----                                            |         |                               |                          |                                   |                                                       |                                        |                                    |
| (6) -----                                            |         |                               |                          |                                   |                                                       |                                        |                                    |
| (7) -----                                            |         |                               |                          |                                   |                                                       |                                        |                                    |
| (8) -----                                            |         |                               |                          |                                   |                                                       |                                        |                                    |

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

313

3 Enter total number of other organizations listed in the line 1 table

0

**BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.**

TEEA3901 11/30/12

**Schedule I (Form 990) (2012)**

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|---------------------------------|--------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|
| 1 SCHOLARSHIPS FOR COLLEGE      | 634                      | 689,119.                 |                                   |                                                       |                                        |
| 2                               |                          |                          |                                   |                                                       |                                        |
| 3                               |                          |                          |                                   |                                                       |                                        |
| 4                               |                          |                          |                                   |                                                       |                                        |
| 5                               |                          |                          |                                   |                                                       |                                        |
| 6                               |                          |                          |                                   |                                                       |                                        |
| 7                               |                          |                          |                                   |                                                       |                                        |

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Part I Line 2 PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS:

THE FOUNDATION REQUIRES ALL RECIPIENTS OF COMPETITIVE GRANTS TO SUBMIT

FINAL WRITTEN REPORTS ON THE GRANT-SUPPORTED PROJECT OR PROGRAM. THE

FINAL REPORT SHOULD INCLUDE A FINANCIAL REPORT, COPIES OF DOCUMENTS

PUBLICIZING THE GRANT, WHETHER OR NOT THE OBJECTIVE WAS ACCOMPLISHED,

COLLABORATIVE EFFORTS WITH ANY OTHER ORGANIZATIONS AND, IF APPLICABLE,

SPECIFIC PLANS TO CONTINUE THE PROJECT OR PROGRAM. GRANTS EXCEEDING

\$2,000 IN THIS COMPETITIVE PROCESS ARE MONITORED FOR COMPLETENESS FOR

THE ABOVE DOCUMENTATION. GRANTEES ARE NOTIFIED IF THEIR FINAL REPORT IS

NOT COMPLETE, AND ARE EXCLUDED FROM FUTURE COMPETITIVE GRANTS UNTIL ALL

**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

**2012**

**Open To Public  
Inspection**

Name of the organization

**CHAUTAUQUA REGION COMMUNITY FOUNDATION, INC.**

Employer identification number

**16-1116837**

**Part I Types of Property**

|                                                                 | (a)<br>Check if<br>applicable | (b)<br>Number of<br>contributions or<br>items contributed | (c)<br>Noncash contribution<br>amounts reported<br>on Form 990,<br>Part VIII, line 1g | (d)<br>Method of determining<br>noncash contribution amounts |
|-----------------------------------------------------------------|-------------------------------|-----------------------------------------------------------|---------------------------------------------------------------------------------------|--------------------------------------------------------------|
| 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                                  | X                             | 8                                                         | 84,741.                                                                               | AVG FMV WHEN DONATED                                         |
| 10 Securities – Closely held stock                              |                               |                                                           |                                                                                       |                                                              |
| 11 Securities – Partnership, LLC, or trust interests            |                               |                                                           |                                                                                       |                                                              |
| 12 Securities – Miscellaneous                                   |                               |                                                           |                                                                                       |                                                              |
| 13 Qualified conservation contribution –<br>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 ► (IN-KIND GIFTS)                                      | X                             | 12                                                        | 7,800.                                                                                | EST. RETAIL COST                                             |
| 26 Other ► ( )                                                  |                               |                                                           |                                                                                       |                                                              |
| 27 Other ► ( )                                                  |                               |                                                           |                                                                                       |                                                              |
| 28 Other ► ( )                                                  |                               |                                                           |                                                                                       |                                                              |

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

29

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 an amount 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  |
| 33  |     |    |

**BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.**

**Schedule M (Form 990) 2012**

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

SCHEDULE M - SUPPLEMENTAL INFORMATION:

NUMBER OF CONTRIBUTIONS REPORTED REPRESENTS THE NUMBER  
OF SEPARATE, INDIVIDUAL CONTRIBUTIONS.

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

**Supplemental Information to Form 990 or 990-EZ**

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

► Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

**2012**

**Open to Public  
Inspection**

CHAUTAUQUA REGION COMMUNITY FOUNDATION, INC.

Employer identification number

16-1116837

Pt VI, Line 6 CLASSES OF MEMBERS OR STOCKHOLDERS:

THE FOUNDATION HAS MEMBERS. MEMBERS SHALL CONSIST OF NOT  
LESS THAN THIRTY, NOR MORE THAN FIFTY PERSONS. ANY PERSON WHO  
HAS AN INTEREST IN THE PURPOSES OF THE FOUNDATION AND HAS  
DEMONSTRATED A KNOWLEDGE OR UNDERSTANDING OF THE EDUCATIONAL,  
CULTURAL, CIVIC, OR CHARITABLE NEEDS OF THE COMMUNITY OF  
THE CHAUTAUQUA COUNTY, NY REGION, MAY BECOME A MEMBER.  
POTENTIAL MEMBERS ARE NOMINATED BY THE BOARD OF DIRECTORS  
AND ELECTED BY A MAJORITY OF VOTES CAST AT THE ANNUAL  
MEETING OF THE ENTIRE MEMBERSHIP. ADDITIONALLY, ANY PERSON  
MAY BECOME A MEMBER OF THE FOUNDATION UPON ELECTION BY A  
MAJORITY VOTE OF THE ENTIRE BOARD OF DIRECTORS AT ANY MEETING.  
IN SELECTING MEMBERS, IT SHALL BE THE PURPOSE OF THE FOUNDATION  
TO ENSURE THE MEMBERSHIP IS GENERALLY REPRESENTATIVE OF THE  
VARIOUS INTERESTS OF THE AREA IT SERVES. EVERY EFFORT IS  
MADE TO HAVE THE ELECTED MEMBERSHIP REPRESENT THE COMMUNITY  
IT SERVES. THE TERMS OF AN ELECTED MEMBER WILL BE THREE  
YEARS IN LENGTH. NO MEMBER SHALL BE ELECTED FOR MORE THAN THREE  
CONSECUTIVE FULL TERMS OR NINE YEARS. IF A MEMBER RESIGNS AT  
ANY TIME DURING HIS/HER TERM, THEIR SUCCESSOR CAN FINISH  
THE REMAINING TERM AND IN ADDITION SERVE UP TO THE THREE  
CONSECUTIVE FULL TERMS.

Pt VI, Line 7a ELECTION OF MEMBERS AND THEIR RIGHTS:

MEMBERS OF THE FOUNDATION MAY ELECT ONE OR MORE MEMBERS  
OF THE GOVERNING BOARD OF DIRECTORS AT THE ANNUAL MEETING

Name of the organization

CHAUTAUQUA REGION COMMUNITY FOUNDATION, INC.

Employer identification number

16-1116837

----- OF THE FOUNDATION. -----

----- Pt VI, Line 11b ORGANIZATION'S PROCESS TO REVIEW FORM 990: -----

----- CURRENT BOARD MEMBERS WERE PROVIDED A COPY OF THE TAX -----

----- RETURN PRIOR TO ITS FILING AND DURING A REGULAR MEETING -----

----- OF THE BOARD OF DIRECTORS, IN WHICH A QUORUM WAS PRESENT, -----

----- THE FISCAL OFFICER OF THE FOUNDATION ADDRESSED ANY QUESTIONS. -----

----- Pt VI, Line 12c ENFORCEMENT OF CONFLICTS POLICY: -----

----- THE FOUNDATION REGULARLY AND CONSISTENTLY MONITORS AND -----

----- ENFORCES COMPLIANCE WITH THE WRITTEN CONFLICT OF INTEREST -----

----- POLICY. THE PROCESS REQUIRES ANNUAL UPDATES OF THE CONFLICT -----

----- OF INTEREST STATEMENT BY THE BOARD, MEMBERS AND STAFF. -----

----- Pt VI, Line 15a LINE 15a: COMPENSATION PROCESS FOR TOP OFFICIAL: -----

----- THE COMPENSATION OF THE EXECUTIVE DIRECTOR AND ALL STAFF -----

----- IS REVIEWED BY THE PERSONNEL COMMITTEE AND BOARD OF DIRECTORS. -----

----- THE COUNCIL ON FOUNDATIONS PUBLISHES A SURVEY OF COMPENSATION -----

----- LEVELS FOR COMMUNITY FOUNDATIONS, WHICH DETAILS THE -----

----- COMPENSATION FOR EXECUTIVE DIRECTORS AND STAFF POSITIONS. -----

----- THIS SURVEY AND OTHER LOCAL COMPENSATION SURVEYS ARE USED -----

----- BY THE COMMITTEE AND BOARD WHEN DETERMINING COMPENSATION. -----

----- Pt VI, Line 19 GOVERNING DOCUMENTS DISCLOSURE EXPLANATION: -----

----- THE FOUNDATION'S FORM 990 AND FINANCIAL STATEMENTS ARE -----

----- AVAILABLE FOR PUBLIC INSPECTION ON THE FOUNDATION'S WEBSITE, -----

----- [www.crcfonline.org](http://www.crcfonline.org), OR UPON REQUEST AT THE FOUNDATION'S -----

Name of the organization

Employer identification number

CHAUTAUQUA REGION COMMUNITY FOUNDATION, INC.

16-1116837

OFFICE. THE FOUNDATION'S FORM 1023, GOVERNING DOCUMENTS, AND

CONFLICT OF INTEREST POLICY ARE ALSO AVAILABLE UPON REQUEST

AT THE FOUNDATION'S OFFICE.

Pt VI, Line 15b COMPENSATION PROCESS FOR OFFICERS:

SEE RESPONSE TO LINE 15a

PART III, LINE 1 ORGANIZATION'S MISSION:

CHAUTAUQUA REGION COMMUNITY FOUNDATION IS A NONPROFIT,

COMMUNITY CORPORATION CREATED BY AND FOR THE PEOPLE OF

CHAUTAUQUA COUNTY. WE ARE HERE TO HELP OUR DONORS MAKE A

POSITIVE IMPACT ON THEIR COMMUNITY BY ESTABLISHING A

"BRIDGE" BETWEEN THE DONOR AND CHARITABLE ACTIVITIES.

PART XI, LINE 5 SEE SUPPORTING SCHEDULE.

Schedule I (Form 990) - Part IV - Supplemental Information (continued)

**Schedule I (Form 990) - Part IV - Supplemental Information (Continuation Sheet)**

REPORTS ARE PROVIDED.

SCHOLARSHIP AWARD MONITORING - STUDENTS SELECTED TO RECEIVE SCHOLARSHIP AWARDS WILL ONLY BE PROVIDED THE AWARD UPON SUBMITTING AN OFFICIAL VERIFICATION OF COLLEGE ENROLLMENT FOR THE SECOND SEMESTER OF THE SCHOOL YEAR FROM THE COLLEGE'S REGISTRAR'S OFFICE. A STUDENT WHO HAS SUCCESSFULLY COLLECTED THEIR SCHOLARSHIP AWARD IS REQUIRED TO VERIFY TO THE FOUNDATION THAT THE AWARD WAS USED FOR COLLEGE EXPENSES ONLY.

**Supporting Statement of:**

Form 990 p 11/Line 23, column (A)

| Description                            | Amount         |
|----------------------------------------|----------------|
| NAME OF LENDER: NORTHWEST SAVINGS BANK |                |
| MATURITY DATE: 04/27/2014              |                |
| INTEREST RATE: 5.51%                   |                |
| BALANCE DUE                            | 99,620.        |
| Total                                  | <u>99,620.</u> |

**Supporting Statement of:**

Form 990 p 11/Line 23, column (B)

| Description                            | Amount         |
|----------------------------------------|----------------|
| NAME OF LENDER: NORTHWEST SAVINGS BANK |                |
| MATURITY DATE: 05/01/2014              |                |
| INTEREST RATE: 3.75%                   |                |
| BALANCE DUE                            | 58,471.        |
| Total                                  | <u>58,471.</u> |

**Supporting Statement of:**

Form 990 p 12/Part XI, Line 9

| Description                                  | Amount           |
|----------------------------------------------|------------------|
| AGENCY FUND ADDITIONS                        | -719,675.        |
| AGENCY FUND EXPENSES                         | 262,104.         |
| AGENCY FUND TRANSFERS                        | -3,978.          |
| NET REVALUATION OF CHARITABLE GIFT ANNUITIES | -14,777.         |
| SPECIAL EVENT EXPENSES - PART VIII, LINE 8b  | 28,906.          |
| ROUNDING                                     | 1.               |
| Total                                        | <u>-447,419.</u> |

IRS 990 Yr. 2012, Grants of \$5000 +  
 Grantee 990 - Part 2 Organizations  
 Grantees receiving \$5000 or more  
 Tax Year 2012  
 Region: All Regions

| Name, address, and zip                                                                                           | EIN        | IRC Code   | Cash Grant | Non-Cash Grant | Valuation Method | Descr Non-cash Assistance | Purpose of Grant or Assistance                     |
|------------------------------------------------------------------------------------------------------------------|------------|------------|------------|----------------|------------------|---------------------------|----------------------------------------------------|
| American Red Cross, Southwestern NY Chapter<br>325 East Fourth Street<br>P.O. Box 99<br>Jamestown, NY 14702-0099 | 16-0904250 | 501(C)3    | 10,000     |                |                  |                           | Disaster Services                                  |
| American Red Cross, Southwestern NY Chapter<br>325 East Fourth Street<br>P O Box 99<br>Jamestown, NY 14702-0099  | 16-0904250 | 501(C)3    | 2,000      |                |                  |                           | Superstorm Sandy Relief                            |
| American Red Cross, Southwestern NY Chapter<br>325 East Fourth Street<br>P O Box 99<br>Jamestown, NY 14702-0099  | 16-0904250 | 501(C)3    | 250        |                |                  |                           | American Red Cross -<br>Chautauqua County Support  |
| Arts Council for Chautauqua County, Inc.<br>116 East Third Street<br>Jamestown, NY 14701                         | 23-7220205 | 501(C)3    | 1,000      |                |                  |                           | Rolling Hills Radio 2012-2013                      |
| Arts Council for Chautauqua County, Inc.<br>116 East Third Street<br>Jamestown, NY 14701                         | 23-7220205 | 501(C)3    | 1,000      |                |                  |                           | Chautauqua Concert Band 2013                       |
| Arts Council for Chautauqua County, Inc.<br>116 East Third Street<br>Jamestown, NY 14701                         | 23-7220205 | 501(C)3    | 4,000      |                |                  |                           | Reg Lenna and Arts Council<br>Merger               |
| Arts Council for Chautauqua County, Inc.<br>116 East Third Street<br>Jamestown, NY 14701                         | 23-7220205 | 501(C)3    | 750        |                |                  |                           | WRFA - Emergency Alert System<br>Purchase          |
| Arts Council for Chautauqua County, Inc.<br>116 East Third Street<br>Jamestown, NY 14701                         | 23-7220205 | 501(C)3    | 600        |                |                  |                           | Third Thursday                                     |
| Chautauqua County Office for the Aging<br>Hall Clothier Building<br>7 North Erie Street<br>Mayville, NY 14757    | 16-6002556 | Government | 400        |                |                  |                           | Annual Senior Summer Picnic<br>2012                |
| Chautauqua County Office for the Aging<br>Hall Clothier Building<br>7 North Erie Street<br>Mayville, NY 14757    | 16-6002556 | Government | 50,000     |                |                  |                           | Emergency Assistance for<br>Veterans               |
| Chautauqua County Office for the Aging<br>Hall Clothier Building<br>7 North Erie Street<br>Mayville, NY 14757    | 16-6002556 | Government | 45,000     |                |                  |                           | Emergency (home repair)<br>Assistance for Veterans |

## IRS 990 Yr 2012: Grants of \$5000 +

Grantee 990 - Part 2 Organizations  
Grantees receiving \$5000 or more.  
Tax year 2012

Region: All Regions

| Name, address, and zip                                                                       | EIN        | IRC Code | Cash Grant | Non-Cash Grant | Valuation Method | Descr Non-cash Assistance | Purpose of Grant or Assistance                                           |
|----------------------------------------------------------------------------------------------|------------|----------|------------|----------------|------------------|---------------------------|--------------------------------------------------------------------------|
| Chautauqua County Special Olympics<br>Attn. Karen Oberg<br>PO Box 995<br>Frewsburg, NY 14738 |            | 501(C)3  |            | 4,000          |                  |                           | Special Olympics Event Expenses                                          |
| Chautauqua County Special Olympics<br>Attn. Karen Oberg<br>PO Box 995<br>Frewsburg, NY 14738 |            | 501(C)3  | 1,986      |                |                  |                           | Special Olympics Invoice                                                 |
| Chautauqua Lake Association<br>429 E Terrace Avenue<br>Lakewood, NY 14750                    | 16-0772742 | 501(C)3  | 1,464      |                |                  |                           | Chautauqua Lake Association                                              |
| Chautauqua Lake Association<br>429 E Terrace Avenue<br>Lakewood, NY 14750                    | 16-0772742 | 501(C)3  | 5,057      |                |                  |                           | General Operations which includes Harvesting & Adopt a Shoreline Program |
| Chautauqua Lake Association<br>429 E Terrace Avenue<br>Lakewood, NY 14750                    | 16-0772742 | 501(C)3  | 10,000     |                |                  |                           | Lake Maintenance Assistance 2012 - Matching Grant                        |
| Chautauqua Lake Association<br>429 E Terrace Avenue<br>Lakewood, NY 14750                    | 16-0772742 | 501(C)3  | 20,000     |                |                  |                           | Lake Maintenance Assistance 2012                                         |
| Chautauqua Lake Partnership<br>87 Longview Avenue<br>Jamestown, NY 14701                     | 02-0583646 | 501(C)3  | 10,000     |                |                  |                           | Submerged Aquatic Vegetation Management Plan                             |
| Chautauqua Lakers<br>c/o Darla Davison<br>832 Route 394<br>Kennedy, NY 14747-9703            | 23-7061382 |          | 142        |                |                  |                           | Special Olympics Golf                                                    |
| Chautauqua Lakers<br>c/o Darla Davison<br>832 Route 394<br>Kennedy, NY 14747-9703            | 23-7061382 |          | 2,000      |                |                  |                           | Special Olympics - Van Acquisition                                       |
| Chautauqua Lakers<br>c/o Darla Davison<br>832 Route 394<br>Kennedy, NY 14747-9703            | 23-7061382 |          | 1,000      |                |                  |                           | Special Olympics - Van Acquisition                                       |
| Chautauqua Lakers<br>c/o Darla Davison<br>832 Route 394<br>Kennedy, NY 14747-9703            | 23-7061382 |          | 500        |                |                  |                           | Special Olympics - Van Acquisition                                       |
| Chautauqua Lakers<br>c/o Darla Davison<br>832 Route 394<br>Kennedy, NY 14747-9703            | 23-7061382 |          | 2,000      |                |                  |                           | Special Olympics Van Acquisition                                         |

IRS 990 Yr 2012, Grants of \$5000 +

Grantee 990 - Part 2 Organizations  
 Grantees receiving \$5000 or more.  
 Tax Year 2012  
 Region: All Regions

| Name, address, and zip                                                             | EIN        | IRC Code | Cash Grant | Non-Cash Grant | Valuation Method | Descr Non-cash Assistance | Purpose of Grant or Assistance                                                                  |
|------------------------------------------------------------------------------------|------------|----------|------------|----------------|------------------|---------------------------|-------------------------------------------------------------------------------------------------|
| Chautauqua Region Community Foundation<br>418 Spring Street<br>Jamestown, NY 14701 | 16-1116837 | 501(C)3  | 2,000      |                |                  |                           | French Creek Yorker Museum -<br>2012 Projects                                                   |
| Chautauqua Region Community Foundation<br>418 Spring Street<br>Jamestown, NY 14701 | 16-1116837 | 501(C)3  | 250        |                |                  |                           | JCC CEO Scholarship                                                                             |
| Chautauqua Region Community Foundation<br>418 Spring Street<br>Jamestown, NY 14701 | 16-1116837 | 501(C)3  | 17,121     |                |                  |                           | Chautauqua Region Community<br>Foundation - Operating                                           |
| Chautauqua Region Community Foundation<br>418 Spring Street<br>Jamestown, NY 14701 | 16-1116837 | 501(C)3  | 764        |                |                  |                           | Chautauqua Region Community<br>Foundation - Scholarship                                         |
| Chautauqua Region Community Foundation<br>418 Spring Street<br>Jamestown, NY 14701 | 16-1116837 | 501(C)3  | 1,000      |                |                  |                           | Veteran's Park Relocation                                                                       |
| Chautauqua Region Community Foundation<br>418 Spring Street<br>Jamestown, NY 14701 | 16-1116837 | 501(C)3  | 17,121     |                |                  |                           | Offset Foundation<br>administrative expenses                                                    |
| Chautauqua Region Community Foundation<br>418 Spring Street<br>Jamestown, NY 14701 | 16-1116837 | 501(C)3  | 495        |                |                  |                           | Offset Foundation scholarship<br>expenses                                                       |
| Chautauqua Region Community Foundation<br>418 Spring Street<br>Jamestown, NY 14701 | 16-1116837 | 501(C)3  | 764        |                |                  |                           | Offset Foundation scholarship<br>expenses                                                       |
| Chautauqua Region Community Foundation<br>418 Spring Street<br>Jamestown, NY 14701 | 16-1116837 | 501(C)3  | 764        |                |                  |                           | Chautauqua Region Community<br>Foundation - Scholarship<br>expenses                             |
| Chautauqua Region Community Foundation<br>418 Spring Street<br>Jamestown, NY 14701 | 16-1116837 | 501(C)3  | 17,121     |                |                  |                           | Chautauqua Region Community<br>Foundation - Operating                                           |
| Chautauqua Region Community Foundation<br>418 Spring Street<br>Jamestown, NY 14701 | 16-1116837 | 501(C)3  | 17,121     |                |                  |                           | Chautauqua Region Community<br>Foundation - Operating                                           |
| Chautauqua Region Community Foundation<br>418 Spring Street<br>Jamestown, NY 14701 | 16-1116837 | 501(C)3  | 764        |                |                  |                           | Chautauqua Region Community<br>Foundation - Scholarship<br>expenses                             |
| Chautauqua Region Community Foundation<br>418 Spring Street<br>Jamestown, NY 14701 | 16-1116837 | 501(C)3  | 500        |                |                  |                           | Leland B Ward Lucille Ball<br>Little Theatre Fund -Axel<br>Carlson Award Recipient's<br>Charity |

## IRS 990 Yr 2012: Grants of \$5000 +

Grantee 990 - Part 2 Organizations  
Grantees receiving \$5000 or more  
Tax Year 2012  
Region: All Regions

| Name, address, and zip                                                                  | EIN        | IRC Code | Cash Grant | Non-Cash Grant | Valuation Method | Descr Non-cash Assistance | Purpose of Grant or Assistance                           |
|-----------------------------------------------------------------------------------------|------------|----------|------------|----------------|------------------|---------------------------|----------------------------------------------------------|
| Chautauqua Sports Museum & Hall of Fame, Inc<br>PO Box 1192<br>Jamestown, NY 14702-1192 | 191919     | 501(C)3  | 1,100      |                |                  |                           | Renovation Expenses Invoice #0144                        |
| Chautauqua Sports Museum & Hall of Fame, Inc<br>PO Box 1192<br>Jamestown, NY 14702-1192 | 191919     | 501(C)3  | 124        |                |                  |                           | 25 DVD Re-order Invoice #7253                            |
| Chautauqua Sports Museum & Hall of Fame, Inc<br>PO Box 1192<br>Jamestown, NY 14702-1192 | 191919     | 501(C)3  | 25         |                |                  |                           | AllSound Media - Media Related Expenses Invoice # 7234   |
| Chautauqua Sports Museum & Hall of Fame, Inc<br>PO Box 1192<br>Jamestown, NY 14702-1192 | 191919     | 501(C)3  | 153        |                |                  |                           | PC Projects - Media Related Expenses Invoices 1029, 1034 |
| Chautauqua Sports Museum & Hall of Fame, Inc<br>PO Box 1192<br>Jamestown, NY 14702-1192 | 191919     | 501(C)3  | 40         |                |                  |                           | Media Related Expenses Invoice # 1059                    |
| Chautauqua Sports Museum & Hall of Fame, Inc<br>PO Box 1192<br>Jamestown, NY 14702-1192 | 191919     | 501(C)3  | 1,000      |                |                  |                           | Museum Renovation Expenses                               |
| Chautauqua Sports Museum & Hall of Fame, Inc<br>PO Box 1192<br>Jamestown, NY 14702-1192 | 191919     | 501(C)3  | 390        |                |                  |                           | PC Projects - Media Related Expenses Invoice #1017       |
| Chautauqua Sports Museum & Hall of Fame, Inc<br>PO Box 1192<br>Jamestown, NY 14702-1192 | 191919     | 501(C)3  | 173        |                |                  |                           | PC Projects - Media Related Expenses Invoices 1046       |
| Chautauqua Sports Museum & Hall of Fame, Inc<br>PO Box 1192<br>Jamestown, NY 14702-1192 | 191919     | 501(C)3  | 2,825      |                |                  |                           | Closing Out Account                                      |
| Chautauqua Sports Museum & Hall of Fame, Inc<br>PO Box 1192<br>Jamestown, NY 14702-1192 | 191919     | 501(C)3  | 2,750      |                |                  |                           | earth spark - Website Related Expenses Invoice # 2012-5  |
| Chautauqua Striders, Inc.<br>101 East Fourth Street<br>Jamestown, NY 14701              | 16-1156685 | 501(C)3  | 5,778      |                |                  |                           | CS Mentoring                                             |

IRS 990 Yr 2012; Grants of \$5000 +

Grantees 990 - Part 2 Organizations  
 Grantees receiving \$5000 or more  
 Tax Year 2012  
 Region All Regions

| Name, address, and zip                                                                                 | EIN        | IRC Code   | Cash Grant | Non-Cash Grant | Valuation Method | Descr Non-cash Assistance | Purpose of Grant or Assistance                                   |
|--------------------------------------------------------------------------------------------------------|------------|------------|------------|----------------|------------------|---------------------------|------------------------------------------------------------------|
| Chautauqua Striders, Inc.<br>101 East Fourth Street<br>Jamestown, NY 14701                             | 16-1156685 | 501(C)3    |            | 500            |                  |                           | Student Supplies                                                 |
| Chautauqua Striders, Inc.<br>101 East Fourth Street<br>Jamestown, NY 14701                             | 16-1156685 | 501(C)3    | 1,053      |                |                  |                           | Kids Have All the Write Stuff                                    |
| Chautauqua Striders, Inc.<br>101 East Fourth Street<br>Jamestown, NY 14701                             | 16-1156685 | 501(C)3    | 5,000      |                |                  |                           | Hispanic Family & Youth Outreach                                 |
| Chautauqua Striders, Inc.<br>101 East Fourth Street<br>Jamestown, NY 14701                             | 16-1156685 | 501(C)3    | 7,695      |                |                  |                           | Chautauqua Striders Track maintenance                            |
| Chautauqua Striders, Inc.<br>101 East Fourth Street<br>Jamestown, NY 14701                             | 16-1156685 | 501(C)3    | 312        |                |                  |                           | Chautauqua Striders - Tutoring                                   |
| City of Jamestown<br>Mayor's Office<br>Municipal Building<br>Jamestown, NY 14701                       | 16-6002545 | Government | 88         |                |                  |                           | Habiterra - Site Plan Copies Invoice #24125                      |
| City of Jamestown<br>Mayor's Office<br>Municipal Building<br>Jamestown, NY 14701                       | 16-6002545 | Government | 258        |                |                  |                           | M W Graphics - Business Cards and Graphics - Invoice #22169      |
| City of Jamestown<br>Mayor's Office<br>Municipal Building<br>Jamestown, NY 14701                       | 16-6002545 | Government | 2,818      |                |                  |                           | Purchase of Flagpole for Veteran's Park - Inv. #1049469          |
| City of Jamestown<br>Mayor's Office<br>Municipal Building<br>Jamestown, NY 14701                       | 16-6002545 | Government | 2,943      |                |                  |                           | Logan Park Electrical Service Installation - Inv # SD156 & SD197 |
| City of Jamestown<br>Mayor's Office<br>Municipal Building<br>Jamestown, NY 14701                       | 16-6002545 | Government | 5,000      |                |                  |                           | Corporate Deck at Russell E. Diethrick Jr. Park                  |
| City of Jamestown<br>Mayor's Office<br>Municipal Building<br>Jamestown, NY 14701                       | 16-6002545 | Government | 1,500      |                |                  |                           | Veterans Memorial Relocation                                     |
| City of Jamestown Parks, Recreation and Conservation Dept.<br>145 Steele Street<br>Jamestown, NY 14701 | 16-6002545 | Government | 600        |                |                  |                           | 2012 Halloween Fun Fest                                          |

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## Chautauqua Region Community Foundation, Inc.

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Grantee 990 - Part 2 Organizations  
 Grantees receiving \$5000 or more  
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| Name, address, and zip                                                                                                            | EIN        | IRC Code   | Cash Grant | Non-Cash Grant | Valuation Method | Descr Non-cash Assistance | Purpose of Grant or Assistance        |
|-----------------------------------------------------------------------------------------------------------------------------------|------------|------------|------------|----------------|------------------|---------------------------|---------------------------------------|
| City of Jamestown Parks, Recreation and Conservation Dept<br>145 Steele Street<br>Jamestown, NY 14701                             | 16-6002545 | Government |            | 800            |                  |                           | 2012 Bandshell Concert Series         |
| City of Jamestown Parks, Recreation and Conservation Dept<br>145 Steele Street<br>Jamestown, NY 14701                             | 16-6002545 | Government | 5,000      |                |                  |                           | 2012 Summer Playground Program        |
| City of Jamestown Parks, Recreation and Conservation Dept.<br>145 Steele Street<br>Jamestown, NY 14701                            | 16-6002545 | Government | 7,000      |                |                  |                           | 2012 Tree Planting Program            |
| City of Jamestown Strategic Planning & Partnership Commission<br>Municipal Building<br>200 E. Third Street<br>Jamestown, NY 14701 | 16-6002545 | Government | 14,000     |                |                  |                           | Physician Recruitment 2012            |
| City of Jamestown Strategic Planning & Partnership Commission<br>Municipal Building<br>200 E. Third Street<br>Jamestown, NY 14701 | 16-6002545 | Government | 6,000      |                |                  |                           | Physician Recruitment                 |
| Cornell Cooperative Extension Chautauqua County<br>3542 Turner Road<br>Jamestown, NY 14701-9608                                   | 16-6072874 | 501(C)3    | 5,000      |                |                  |                           | Chautauqua County Farm To School      |
| Cornell Cooperative Extension Chautauqua County<br>3542 Turner Road<br>Jamestown, NY 14701-9608                                   | 16-6072874 | 501(C)3    | 6,000      |                |                  |                           | 2012 4-H Club and Project Programming |
| Cornell Cooperative Extension Chautauqua County<br>3542 Turner Road<br>Jamestown, NY 14701-9608                                   | 16-6072874 | 501(C)3    | 1,142      |                |                  |                           | Agricultural Awards                   |
| Downtown Jamestown Development Corp.<br>119-121 West Third Street<br>Jamestown, NY 14701                                          | 16-1001517 | 501(C)3    | 5,000      |                |                  |                           | Downtown Events/Activities 2012       |
| Downtown Jamestown Development Corp.<br>119-121 West Third Street<br>Jamestown, NY 14701                                          | 16-1001517 | 501(C)3    | 1,000      |                |                  |                           | Hands on Jamestown 2012               |
| Downtown Jamestown Development Corp.<br>119-121 West Third Street<br>Jamestown, NY 14701                                          | 16-1001517 | 501(C)3    | 1,500      |                |                  |                           | 9th Annual Thunder in the Streets     |

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|--------------------------------------------------------------------------------------------------------------|------------|----------|------------|----------------|------------------|---------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| Downtown Jamestown Development Corp.<br>119-121 West Third Street<br>Jamestown, NY 14701                     | 16-1001517 | 501(C)3  |            | 950            |                  |                           | Downtown Jamestown Farmers Mkt<br>- Winter                                                                                                   |
| Drama Enrichment Program<br>116 E Third Street<br>Jamestown, NY 14710                                        | 22-2552876 | 501(C)3  | 1,000      |                |                  |                           | Backdrops for Christmas Magic<br>2012                                                                                                        |
| Drama Enrichment Program<br>116 E Third Street<br>Jamestown, NY 14710                                        | 22-2552876 | 501(C)3  | 539        |                |                  |                           | Office Filling Cabinets                                                                                                                      |
| Drama Enrichment Program<br>116 E Third Street<br>Jamestown, NY 14710                                        | 22-2552876 | 501(C)3  | 4,000      |                |                  |                           | Drama Enrichment Program 2012                                                                                                                |
| EHS, Inc DBA of Evergreen Health<br>Services<br>111 West Second Street<br>Third Floor<br>Jamestown, NY 14701 | 16-202971  | 501(C)3  | 5,000      |                |                  |                           | HIV Community Education                                                                                                                      |
| Falconer Public Library<br>101 W Main St.<br>Falconer, NY 14733                                              | 16-6002464 | 501(C)3  | 15,000     |                |                  |                           | Falconer Public Library                                                                                                                      |
| Falconer Public Library<br>101 W Main St.<br>Falconer, NY 14733                                              | 16-6002464 | 501(C)3  | 3,929      |                |                  |                           | Falconer Public Library                                                                                                                      |
| Fenton History Center<br>67 Washington St<br>Jamestown, NY 14701                                             | 16-6093016 | 501(C)3  | 750        |                |                  |                           | Teaching Local History at Lake<br>View Cemetery                                                                                              |
| Fenton History Center<br>67 Washington St.<br>Jamestown, NY 14701                                            | 16-6093016 | 501(C)3  | 1,075      |                |                  |                           | Fenton Historical Society for<br>the purchase of new/used<br>books, publications and<br>artifacts or historical items<br>for its collection. |
| Fenton History Center<br>67 Washington St.<br>Jamestown, NY 14701                                            | 16-6093016 | 501(C)3  | 494        |                |                  |                           | Fenton Historical Society                                                                                                                    |
| Fenton History Center<br>67 Washington St.<br>Jamestown, NY 14701                                            | 16-6093016 | 501(C)3  | 1,198      |                |                  |                           | Fenton History Center                                                                                                                        |
| Fenton History Center<br>67 Washington St.<br>Jamestown, NY 14701                                            | 16-6093016 | 501(C)3  | 494        |                |                  |                           | Fenton Historical Society                                                                                                                    |

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|--------------------------------------------------------------------------------------------|------------|----------|------------|----------------|------------------|---------------------------|----------------------------------------------------|
| Fenton History Center<br>67 Washington St.<br>Jamestown, NY 14701                          | 16-6093016 | 501(C)3  | 7,655      |                |                  |                           | Fenton History Center                              |
| Fenton History Center<br>67 Washington St.<br>Jamestown, NY 14701                          | 16-6093016 | 501(C)3  | 485        |                |                  |                           | Research Center Materials Project                  |
| Fenton History Center<br>67 Washington St.<br>Jamestown, NY 14701                          | 16-6093016 | 501(C)3  | 3,000      |                |                  |                           | Fenton History Center Special Collections Shelving |
| Fenton History Center<br>67 Washington St.<br>Jamestown, NY 14701                          | 16-6093016 | 501(C)3  | 494        |                |                  |                           | Fenton Historical Society                          |
| Fenton History Center<br>67 Washington St.<br>Jamestown, NY 14701                          | 16-6093016 | 501(C)3  | 4,500      |                |                  |                           | Fenton Mansion Restoration Project Part 2          |
| Fenton History Center<br>67 Washington St.<br>Jamestown, NY 14701                          | 16-6093016 | 501(C)3  | 494        |                |                  |                           | Fenton Historical Society                          |
| First Lutheran Church<br>120 Chandler Street<br>Jamestown, NY 14701                        | 16-0775577 | 501(C)3  | 4,122      |                |                  |                           | First Lutheran Church                              |
| First Lutheran Church<br>120 Chandler Street<br>Jamestown, NY 14701                        | 16-0775577 | 501(C)3  | 4,000      |                |                  |                           | First Lutheran Church Service Awards 2012          |
| Fund for the Arts in Chautauqua County, Inc.<br>715 Falconer Street<br>Jamestown, NY 14701 | 16-1256972 | 501(C)3  | 5,250      |                |                  |                           | Operational Support 2011-2012                      |
| Holy Apostles Parish<br>508 Cherry Street<br>Jamestown, NY 14701-5024                      |            |          | 9,791      |                |                  |                           | Holy Apostles Parish                               |
| Hospice Chautauqua County, Inc.<br>20 W. Fairmount Avenue<br>Lakewood, NY 14750            | 22-2432409 | 501(C)3  | 5,902      |                |                  |                           | Hospice Chautauqua County                          |
| Hospice Chautauqua County, Inc.<br>20 W. Fairmount Avenue<br>Lakewood, NY 14750            | 22-2432409 | 501(C)3  | 266        |                |                  |                           | Hospice of Chautauqua County                       |
| Hospice Chautauqua County, Inc.<br>20 W. Fairmount Avenue<br>Lakewood, NY 14750            | 22-2432409 | 501(C)3  | 500        |                |                  |                           | Hospice Chautauqua County                          |

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|-------------------------------------------------------------------------------------------|------------|----------|------------|----------------|------------------|---------------------------|-------------------------------------------------------------------------------------------------|
| Hugo Lindgren Apartments<br>737 Falconer Street<br>Jamestown, NY 14701                    | 16-1548940 | 501(C)3  | 11,459     |                |                  |                           | Lutheran Social Services for the repair, maintenance and upkeep of the Hugo Lindgren Apartments |
| Infinity Visual & Performing Arts Program<br>115 East Third Street<br>Jamestown, NY 14701 | 30-0268598 | 501(C)3  | 1,000      |                |                  |                           | STEAM Curriculum Development                                                                    |
| Infinity Visual & Performing Arts Program<br>115 East Third Street<br>Jamestown, NY 14701 | 30-0268598 | 501(C)3  | 4,000      |                |                  |                           | 2012 Scholarships for Disadvantaged Students                                                    |
| James Prendergast Library Association<br>509 Cherry Street<br>Jamestown, NY 14701         | 16-0840340 | 501(C)3  | 1,129      |                |                  |                           | James Prendergast Library                                                                       |
| James Prendergast Library Association<br>509 Cherry Street<br>Jamestown, NY 14701         | 16-0840340 | 501(C)3  | 1,129      |                |                  |                           | James Prendergast Library                                                                       |
| James Prendergast Library Association<br>509 Cherry Street<br>Jamestown, NY 14701         | 16-0840340 | 501(C)3  | 1,110      |                |                  |                           | 2012 Outlook Software                                                                           |
| James Prendergast Library Association<br>509 Cherry Street<br>Jamestown, NY 14701         | 16-0840340 | 501(C)3  | 850        |                |                  |                           | 2012 Vacuum Cleaner                                                                             |
| James Prendergast Library Association<br>509 Cherry Street<br>Jamestown, NY 14701         | 16-0840340 | 501(C)3  | 750        |                |                  |                           | Spring 2012 Book Club Titles                                                                    |
| James Prendergast Library Association<br>509 Cherry Street<br>Jamestown, NY 14701         | 16-0840340 | 501(C)3  | 1,208      |                |                  |                           | James Prendergast Library                                                                       |
| James Prendergast Library Association<br>509 Cherry Street<br>Jamestown, NY 14701         | 16-0840340 | 501(C)3  | 1,129      |                |                  |                           | James Prendergast Library Association of Jamestown, NY                                          |
| James Prendergast Library Association<br>509 Cherry Street<br>Jamestown, NY 14701         | 16-0840340 | 501(C)3  | 391        |                |                  |                           | James Prendergast Library                                                                       |
| James Prendergast Library Association<br>509 Cherry Street<br>Jamestown, NY 14701         | 16-0840340 | 501(C)3  | 442        |                |                  |                           | James Prendergast Library Association                                                           |
| James Prendergast Library Association<br>509 Cherry Street<br>Jamestown, NY 14701         | 16-0840340 | 501(C)3  | 1,445      |                |                  |                           | James Prendergast Library                                                                       |

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|-----------------------------------------------------------------------------------------------|------------|------------|------------|----------------|------------------|---------------------------|----------------------------------------------------------|
| James Prendergast Library Association<br>509 Cherry Street<br>Jamestown, NY 14701             | 16-0840340 | 501(C)3    | 1,129      |                |                  |                           | James Prendergast Library                                |
| Jamestown Audubon Society, Inc.<br>1600 Riverside Road<br>Jamestown, NY 14701                 | 16-6031149 | 501(C)3    | 148        |                |                  |                           | Jamestown Audubon Society                                |
| Jamestown Audubon Society, Inc.<br>1600 Riverside Road<br>Jamestown, NY 14701                 | 16-6031149 | 501(C)3    | 2,326      |                |                  |                           | Jamestown Audubon Society                                |
| Jamestown Audubon Society, Inc.<br>1600 Riverside Road<br>Jamestown, NY 14701                 | 16-6031149 | 501(C)3    | 250        |                |                  |                           | Jamestown Audubon Society -<br>Chautauqua County Support |
| Jamestown Audubon Society, Inc.<br>1600 Riverside Road<br>Jamestown, NY 14701                 | 16-6031149 | 501(C)3    | 961        |                |                  |                           | To assist the Jamestown<br>Audubon Society.              |
| Jamestown Audubon Society, Inc.<br>1600 Riverside Road<br>Jamestown, NY 14701                 | 16-6031149 | 501(C)3    | 900        |                |                  |                           | Point of Sale Software                                   |
| Jamestown Audubon Society, Inc.<br>1600 Riverside Road<br>Jamestown, NY 14701                 | 16-6031149 | 501(C)3    | 1,862      |                |                  |                           | Audubon Society                                          |
| Jamestown Audubon Society, Inc.<br>1600 Riverside Road<br>Jamestown, NY 14701                 | 16-6031149 | 501(C)3    | 3,000      |                |                  |                           | Pollination Project                                      |
| Jamestown Audubon Society, Inc.<br>1600 Riverside Road<br>Jamestown, NY 14701                 | 16-6031149 | 501(C)3    | 5,000      |                |                  |                           | Riding Lawnmower                                         |
| Jamestown Audubon Society, Inc.<br>1600 Riverside Road<br>Jamestown, NY 14701                 | 16-6031149 | 501(C)3    | 580        |                |                  |                           | Water System Pressure Tank<br>Upgrade                    |
| Jamestown Community College<br>525 Falconer Street<br>P.O. Box 20<br>Jamestown, NY 14702-0020 | 16-6002650 | Public Sch | 7,000      |                |                  |                           | Fall 2012 CEO Scholarships                               |
| Jamestown Community College<br>525 Falconer Street<br>P.O. Box 20<br>Jamestown, NY 14702-0020 | 16-6002650 | Public Sch | 500        |                |                  |                           | Spring 2012 IAABO Scholarships<br>- Deunk, Raymond       |
| Jamestown Community College<br>525 Falconer Street<br>P.O. Box 20                             | 16-6002650 | Public Sch | 5,000      |                |                  |                           | JCC Summer Stem Camp 2012                                |

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|-------------------------------------------------------------------------------------------------------|------------|------------|------------|----------------|------------------|---------------------------|---------------------------------------------------------------------------|
| Jamestown Community College<br>525 Falconer Street<br>P.O. Box 20<br>Jamestown, NY 14702-0020         | 16-6002650 | Public Sch | 2,000      |                |                  |                           | Family Funktion and the Sitar<br>Jams - an Indian Cultural<br>Performance |
| Jamestown Community College<br>525 Falconer Street<br>P.O. Box 20<br>Jamestown, NY 14702-0020         | 16-6002650 | Public Sch | 6,500      |                |                  |                           | Fall 2012 CEO Scholarships                                                |
| Jamestown Community College<br>525 Falconer Street<br>P.O. Box 20<br>Jamestown, NY 14702-0020         | 16-6002650 | Public Sch | 1,500      |                |                  |                           | CEO Scholarships - Fall 2012                                              |
| Jamestown Community College<br>525 Falconer Street<br>P.O. Box 20<br>Jamestown, NY 14702-0020         | 16-6002650 | Public Sch | 1,396      |                |                  |                           | Jamestown Community College                                               |
| Jamestown Community College<br>525 Falconer Street<br>P.O. Box 20<br>Jamestown, NY 14702-0020         | 16-6002650 | Public Sch | 135        |                |                  |                           | Jamestown Community College                                               |
| Jamestown Community Learning Council<br>c/o Lincoln School<br>301 Front Street<br>Jamestown, NY 14701 | 16-1454342 | 501(C)3    | 6,500      |                |                  |                           | Parents as Teachers                                                       |
| Jamestown Public Schools<br>197 Martin Road<br>Jamestown, NY 14701                                    | 16-6001842 | Public Sch | 1,800      |                |                  |                           | Fletcher Playground Brick<br>Walkway                                      |
| Jamestown Public Schools<br>197 Martin Road<br>Jamestown, NY 14701                                    | 16-6001842 | Public Sch | 5,000      |                |                  |                           | Fletcher Elementary Playground<br>- Invoice #4925                         |
| Jamestown Public Schools<br>197 Martin Road<br>Jamestown, NY 14701                                    | 16-6001842 | Public Sch | 100        |                |                  |                           | Jamestown High School Class of<br>1909 Essay Contest                      |
| Jamestown Public Schools<br>197 Martin Road<br>Jamestown, NY 14701                                    | 16-6001842 | Public Sch | 5,000      |                |                  |                           | Milton J. Fletcher Playground                                             |
| Jamestown Renaissance Corporation<br>119-121 W. Third Street<br>Jamestown, NY 14701                   | 30-0413862 | 501(C)3    | 10,000     |                |                  |                           | Grow Jamestown Neighborhood<br>Beautification 2012                        |

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|------------------------------------------------------------------------------------------------------|------------|----------|------------|----------------|------------------|---------------------------|--------------------------------------------------------------------------------|
| Jamestown Renaissance Corporation<br>119-121 W. Third Street<br>Jamestown, NY 14701                  | 30-0413862 | 501(C)3  | 15,000     |                |                  |                           | Renaissance Block Challenge - 2012                                             |
| Lucille M. Wright Air Museum<br>Fessenden, Laumer & DeAngelo<br>PO Box 590<br>Jamestown, NY 14702    | 16-1292300 | 501(C)3  | 3,500      |                |                  |                           | Student Exploratory Aircraft<br>Mechanic Airframe Assembly and<br>Rigging 2012 |
| Lucille M. Wright Air Museum<br>Fessenden, Laumer & DeAngelo<br>PO Box 590<br>Jamestown, NY 14702    | 16-1292300 | 501(C)3  | 1,420      |                |                  |                           | Air Museum Sign Funding                                                        |
| Lucille M. Wright Air Museum<br>Fessenden, Laumer & DeAngelo<br>PO Box 590<br>Jamestown, NY 14702    | 16-1292300 | 501(C)3  | 3,050      |                |                  |                           | Lucile M. Wright Air Museum                                                    |
| Lucille M. Wright Air Museum<br>Fessenden, Laumer & DeAngelo<br>PO Box 590<br>Jamestown, NY 14702    | 16-1292300 | 501(C)3  | 9,150      |                |                  |                           | Lucile M. Wright Air Museum                                                    |
| Lucille Ball Little Theatre of<br>Jamestown, Inc.<br>18-24 East Second Street<br>Jamestown, NY 14701 | 16-0527772 | 501(C)3  | 86         |                |                  |                           | Junior Guilders of Lucille<br>Ball Little Theatre                              |
| Lucille Ball Little Theatre of<br>Jamestown, Inc.<br>18-24 East Second Street<br>Jamestown, NY 14701 | 16-0527772 | 501(C)3  | 994        |                |                  |                           | To be used for Little Theatre<br>musicals                                      |
| Lucille Ball Little Theatre of<br>Jamestown, Inc.<br>18-24 East Second Street<br>Jamestown, NY 14701 | 16-0527772 | 501(C)3  | 200        |                |                  |                           | Junior Guilders - Axel W.<br>Carlson Award Recipient's<br>Charity              |
| Lucille Ball Little Theatre of<br>Jamestown, Inc.<br>18-24 East Second Street<br>Jamestown, NY 14701 | 16-0527772 | 501(C)3  | 393        |                |                  |                           | Assist with the Theatre's<br>operating costs                                   |
| Lucille Ball Little Theatre of<br>Jamestown, Inc.<br>18-24 East Second Street<br>Jamestown, NY 14701 | 16-0527772 | 501(C)3  | 206        |                |                  |                           | The Lucille Ball Little<br>Theatre of Jamestown, Inc.                          |
| Lucille Ball Little Theatre of<br>Jamestown, Inc.<br>18-24 East Second Street<br>Jamestown, NY 14701 | 16-0527772 | 501(C)3  | 5,000      |                |                  |                           | Little Theatre Roof Repairs                                                    |

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|-----------------------------------------------------------------------------------|------------|------------|------------|----------------|------------------|---------------------------|------------------------------------------------------------|
| Lucille Ball-Desi Arnaz Center, Inc.<br>300 N. Main Street<br>Jamestown, NY 14701 | 41-2030241 | 501(C)3    | 3,500      |                |                  |                           | Facility Improvement -<br>Temperature Control              |
| Lucille Ball-Desi Arnaz Center, Inc.<br>300 N. Main Street<br>Jamestown, NY 14701 | 41-2030241 | 501(C)3    | 10,000     |                |                  |                           | Audio and Exhibit Enhancements                             |
| Lutheran Social Services<br>715 Falconer St.<br>Jamestown, NY 14701               | 16-1548940 | 501(C)3    | 600        |                |                  |                           | Suzuki at Lutheran                                         |
| Lutheran Social Services<br>715 Falconer St.<br>Jamestown, NY 14701               | 16-1548940 | 501(C)3    | 1,500      |                |                  |                           | Multisensory Room Equipment<br>for Residents with Dementia |
| Lutheran Social Services<br>715 Falconer St.<br>Jamestown, NY 14701               | 16-1548940 | 501(C)3    | 950        |                |                  |                           | Material for the "Cover Girls"                             |
| Lutheran Social Services<br>715 Falconer St.<br>Jamestown, NY 14701               | 16-1548940 | 501(C)3    | 6,000      |                |                  |                           | Pilot Intergenerational Suzuki<br>Program                  |
| Lutheran Social Services<br>715 Falconer St.<br>Jamestown, NY 14701               | 16-1548940 | 501(C)3    | 5,102      |                |                  |                           | Lutheran Social Services                                   |
| Lutheran Social Services<br>715 Falconer St.<br>Jamestown, NY 14701               | 16-1548940 | 501(C)3    | 975        |                |                  |                           | Suzuki Scholarships                                        |
| Manufacturing Technology Institute<br>512 Falconer Street<br>Jamestown, NY 14701  | 16-6002650 | Public Sch | 5,000      |                |                  |                           | Dream It Do It Spring 2012                                 |
| Reg Lenna Civic Center, Inc.<br>116 East Third St.<br>Jamestown, NY 14701         | 22-2552876 | 501(C)3    | 6,734      |                |                  |                           | Reg Lenna Maintenance                                      |
| Reg Lenna Civic Center, Inc.<br>116 East Third St.<br>Jamestown, NY 14701         | 22-2552876 | 501(C)3    | 8,082      |                |                  |                           | Various Invoices                                           |
| Reg Lenna Civic Center, Inc.<br>116 East Third St.<br>Jamestown, NY 14701         | 22-2552876 | 501(C)3    | 13,833     |                |                  |                           | Reg Lenna Civic Center                                     |
| Reg Lenna Civic Center, Inc.<br>116 East Third St.<br>Jamestown, NY 14701         | 22-2552876 | 501(C)3    | 13,833     |                |                  |                           | Reg Lenna Civic Center                                     |

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|---------------------------------------------------------------------------|------------|----------|------------|----------------|------------------|---------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Reg Lenna Civic Center, Inc.<br>116 East Third St.<br>Jamestown, NY 14701 | 22-2552876 | 501(C)3  | 10,820     |                |                  |                           | Reg Lenna Civic Center<br>Maintenance of Equipment,<br>Furnishings & Fixtures                                                                                          |
| Reg Lenna Civic Center, Inc.<br>116 East Third St.<br>Jamestown, NY 14701 | 22-2552876 | 501(C)3  | -339       |                |                  |                           | Chautauqua Concert Band 2010                                                                                                                                           |
| Reg Lenna Civic Center, Inc.<br>116 East Third St.<br>Jamestown, NY 14701 | 22-2552876 | 501(C)3  | 18,503     |                |                  |                           | Theater Air Conditioning<br>System/Phone System and<br>various coats                                                                                                   |
| Reg Lenna Civic Center, Inc.<br>116 East Third St.<br>Jamestown, NY 14701 | 22-2552876 | 501(C)3  | 13,833     |                |                  |                           | Reg Lenna Civic Center                                                                                                                                                 |
| Reg Lenna Civic Center, Inc.<br>116 East Third St.<br>Jamestown, NY 14701 | 22-2552876 | 501(C)3  | 378        |                |                  |                           | Reg Lenna Civic Center                                                                                                                                                 |
| Reg Lenna Civic Center, Inc.<br>116 East Third St.<br>Jamestown, NY 14701 | 22-2552876 | 501(C)3  | 13,833     |                |                  |                           | Reg Lenna Civic Center                                                                                                                                                 |
| Roger Tory Peterson Institute<br>311 Curtis Street<br>Jamestown, NY 14701 | 16-1574467 | 501(C)3  | 148        |                |                  |                           | Roger Tory Peterson Institute                                                                                                                                          |
| Roger Tory Peterson Institute<br>311 Curtis Street<br>Jamestown, NY 14701 | 16-1574467 | 501(C)3  | 6,966      |                |                  |                           | Roger Tory Peterson Institute                                                                                                                                          |
| Roger Tory Peterson Institute<br>311 Curtis Street<br>Jamestown, NY 14701 | 16-1574467 | 501(C)3  | 961        |                |                  |                           | To assist the Roger Tory<br>Peterson Institute.                                                                                                                        |
| Roger Tory Peterson Institute<br>311 Curtis Street<br>Jamestown, NY 14701 | 16-1574467 | 501(C)3  | 7,655      |                |                  |                           | The Roger Tory Peterson<br>Institute                                                                                                                                   |
| Roger Tory Peterson Institute<br>311 Curtis Street<br>Jamestown, NY 14701 | 16-1574467 | 501(C)3  | 677        |                |                  |                           | Roger Tory Peterson Institute                                                                                                                                          |
| Roger Tory Peterson Institute<br>311 Curtis Street<br>Jamestown, NY 14701 | 16-1574467 | 501(C)3  | 7,500      |                |                  |                           | Special Project - Curriculum<br>Development Science Education<br>2012-2013                                                                                             |
| Roger Tory Peterson Institute<br>311 Curtis Street<br>Jamestown, NY 14701 | 16-1574467 | 501(C)3  | 217        |                |                  |                           | To support the education<br>programs at the Roger Tory<br>Peterson Institute, with a<br>priority to any collaborative<br>educational programs with SUNY<br>at Fredonia |

IRS 990 Yr 2012; Grants of \$5000 +

Grantee 990 - Part 2 Organizations  
Grantees receiving \$5000 or more.  
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Region: All Regions

| Name, address, and zip                                                        | EIN        | IRC Code   | Cash Grant | Non-Cash Grant | Valuation Method | Descr Non-cash Assistance | Purpose of Grant or Assistance                |
|-------------------------------------------------------------------------------|------------|------------|------------|----------------|------------------|---------------------------|-----------------------------------------------|
| Roger Tory Peterson Institute<br>311 Curtis Street<br>Jamestown, NY 14701     | 16-1574467 | 501(C)3    | 5,947      |                |                  |                           | Roger Tory Peterson Institute                 |
| Roger Tory Peterson Institute<br>311 Curtis Street<br>Jamestown, NY 14701     | 16-1574467 | 501(C)3    | 500        |                |                  |                           | Banff Film Festival Fundraiser                |
| Roger Tory Peterson Institute<br>311 Curtis Street<br>Jamestown, NY 14701     | 16-1574467 | 501(C)3    | 1,000      |                |                  |                           | Computer Controlled Security Maintenance      |
| Roger Tory Peterson Institute<br>311 Curtis Street<br>Jamestown, NY 14701     | 16-1574467 | 501(C)3    | 1,000      |                |                  |                           | Replace 2 Computers                           |
| Rotary Club of Jamestown<br>P.O. Box 454<br>Jamestown, NY 14702-0454          | 11-3658198 | 501(C)3    | 6,413      |                |                  |                           | Jamestown Rotary Handicapped Camp             |
| Rotary Club of Jamestown<br>P.O. Box 454<br>Jamestown, NY 14702-0454          | 11-3658198 | 501(C)3    | 5,113      |                |                  |                           | Charitable purposes of the Rotary Club        |
| Sherman Historical Society<br>PO Box 132<br>Sherman, NY 14781                 | 45-2181107 | 501(C)3    | 2,000      |                |                  |                           | French Creek Yorker Museum                    |
| Sherman Historical Society<br>PO Box 132<br>Sherman, NY 14781                 | 45-2181107 | 501(C)3    | 7,000      |                |                  |                           | Restoration of the French Creek Yorker Museum |
| Sherman Historical Society<br>PO Box 132<br>Sherman, NY 14781                 | 45-2181107 | 501(C)3    | 10,000     |                |                  |                           | Materials for 4 roofs, gutters and windows    |
| Southwestern Central High School<br>600 Hunt Rd., W.E.<br>Jamestown, NY 14701 | 16-6001856 | Public Sch | 70         |                |                  |                           | Quick Solutions - Bulk Mail Services          |
| Southwestern Central High School<br>600 Hunt Rd., W.E.<br>Jamestown, NY 14701 | 16-6001856 | Public Sch | 145        |                |                  |                           | Invoice #216227 Hetrick Landscaping           |
| Southwestern Central High School<br>600 Hunt Rd., W.E.<br>Jamestown, NY 14701 | 16-6001856 | Public Sch | 15,000     |                |                  |                           | Technology Request                            |
| Southwestern Central High School<br>600 Hunt Rd., W.E.<br>Jamestown, NY 14701 | 16-6001856 | Public Sch | 60         |                |                  |                           | Hinman Memorials Invoice #15695               |

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IRS 990 Yr. 2012: Grants of \$5000 +

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|------------------------------------------------------------------------------------|------------|------------|------------|----------------|------------------|---------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| Southwestern Central School District<br>600 Hunt Road, W.E.<br>Jamestown, NY 14701 | 16-6001856 | Public Sch | 250        |                |                  |                           | TIG - Michelle Cresanti<br>Alternative Learning                                                                                                      |
| Southwestern Central School District<br>600 Hunt Road, W.E.<br>Jamestown, NY 14701 | 16-6001856 | Public Sch | 250        |                |                  |                           | TIG - PBIS Team                                                                                                                                      |
| Southwestern Central School District<br>600 Hunt Road, W.E.<br>Jamestown, NY 14701 | 16-6001856 | Public Sch | 250        |                |                  |                           | TIG - Molly Moore Project<br>Wisdom                                                                                                                  |
| Southwestern Central School District<br>600 Hunt Road, W.E.<br>Jamestown, NY 14701 | 16-6001856 | Public Sch | 2,850      |                |                  |                           | Warren Fence Company Invoice<br>#212020                                                                                                              |
| Southwestern Central School District<br>600 Hunt Road, W.E.<br>Jamestown, NY 14701 | 16-6001856 | Public Sch | 1,845      |                |                  |                           | Lakeside Sod Supply Co. Inc<br>Invoice #10029                                                                                                        |
| Southwestern Central School District<br>600 Hunt Road, W.E.<br>Jamestown, NY 14701 | 16-6001856 | Public Sch | 75         |                |                  |                           | American Schools Foundation<br>Alliance Membership                                                                                                   |
| Southwestern Central School District<br>600 Hunt Road, W.E.<br>Jamestown, NY 14701 | 16-6001856 | Public Sch | 128        |                |                  |                           | Quick Solutions - Invoice<br>93828 & 93474                                                                                                           |
| Southwestern Central School District<br>600 Hunt Road, W E<br>Jamestown, NY 14701  | 16-6001856 | Public Sch | 250        |                |                  |                           | TIG - Sarah Chambers Project<br>Free                                                                                                                 |
| Southwestern Central School District<br>600 Hunt Road, W E<br>Jamestown, NY 14701  | 16-6001856 | Public Sch | 609        |                |                  |                           | Invoice for Dug Out and Repair<br>of Fences                                                                                                          |
| Southwestern Central School District<br>600 Hunt Road, W E.<br>Jamestown, NY 14701 | 16-6001856 | Public Sch | 1,045      |                |                  |                           | Invoice# 404999 for<br>Southwestern Dugout                                                                                                           |
| Southwestern Central School District<br>600 Hunt Road, W.E.<br>Jamestown, NY 14701 | 16-6001856 | Public Sch | 1,000      |                |                  |                           | Parents as Teachers                                                                                                                                  |
| St. Luke's Episcopal Church<br>410 North Main Street<br>Jamestown, NY 14701        | 16-0786233 | 501(C)3    | 7,655      |                |                  |                           | St. Luke's Episcopal Church as<br>a Memorial to Donor's parents,<br>James and Louise Weeks, and to<br>Donor's uncle and aunt, Emmet<br>and Anna Ross |
| St. Luke's Episcopal Church<br>410 North Main Street<br>Jamestown, NY 14701        | 16-0786233 | 501(C)3    | 42         |                |                  |                           | Altar Flowers in memory of<br>James L. and Louise A Weeks,                                                                                           |

IRS 990 Yr. 2012, Grants of \$5000 +

Grantee 990 - Part 2 Organizations  
 Grantees receiving \$5000 or more  
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| Name, address, and zip                                                                   | EIN        | IRC Code | Cash Grant | Non-Cash Grant | Valuation Method | Descr Non-cash Assistance | Purpose of Grant or Assistance                                               |
|------------------------------------------------------------------------------------------|------------|----------|------------|----------------|------------------|---------------------------|------------------------------------------------------------------------------|
| St. Luke's Episcopal Church<br>410 North Main Street<br>Jamestown, NY 14701              | 16-0786233 | 501(C)3  |            | 42             |                  |                           | Altar Flowers in Memory of<br>James L. and Louise A. Weeks                   |
| St. Luke's Episcopal Church<br>410 North Main Street<br>Jamestown, NY 14701              | 16-0786233 | 501(C)3  | 1,000      |                |                  |                           | Replacement of Video Taping<br>Equipment for Weekly<br>Multi-Media Broadcast |
| St. Susan Center, Inc.<br>P.O. Box 1276<br>Jamestown, NY 14702-1276                      | 22-2635294 | 501(C)3  | 339        |                |                  |                           | St Susan Center                                                              |
| St. Susan Center, Inc.<br>P.O. Box 1276<br>Jamestown, NY 14702-1276                      | 22-2635294 | 501(C)3  | 4,000      |                |                  |                           | 2012 Operating Expenses                                                      |
| St. Susan Center, Inc.<br>P.O. Box 1276<br>Jamestown, NY 14702-1276                      | 22-2635294 | 501(C)3  | 219        |                |                  |                           | St Susan Center                                                              |
| St. Susan Center, Inc.<br>P.O. Box 1276<br>Jamestown, NY 14702-1276                      | 22-2635294 | 501(C)3  | 1,000      |                |                  |                           | St. Susan Center                                                             |
| St. Susan Center, Inc.<br>P.O. Box 1276<br>Jamestown, NY 14702-1276                      | 22-2635294 | 501(C)3  | 188        |                |                  |                           | To support the ongoing mission<br>of the St. Susan Center.                   |
| St. Susan Center, Inc.<br>P.O. Box 1276<br>Jamestown, NY 14702-1276                      | 22-2635294 | 501(C)3  | 6,172      |                |                  |                           | St. Susan's Center                                                           |
| Sts. Peter & Paul Roman Catholic Church<br>508 Cherry Street<br>Jamestown, NY 14701      | 16-1563594 | 501(C)3  | 6,108      |                |                  |                           | Sts. Peter and Paul Roman and<br>Catholic Church                             |
| Sts. Peter & Paul Roman Catholic Church<br>508 Cherry Street<br>Jamestown, NY 14701      | 16-1563594 | 501(C)3  | 6,108      |                |                  |                           | SS Peter & Paul Roman Catholic<br>Church                                     |
| Sts. Peter & Paul Roman Catholic Church<br>508 Cherry Street<br>Jamestown, NY 14701      | 16-1563594 | 501(C)3  | 6,108      |                |                  |                           | Sts. Peter & Paul Roman<br>Catholic Church                                   |
| Sts. Peter & Paul Roman Catholic Church<br>508 Cherry Street<br>Jamestown, NY 14701      | 16-1563594 | 501(C)3  | 6,108      |                |                  |                           | Sts. Peter & Paul Roman<br>Catholic Church                                   |
| The Chautauqua County Humane Society,<br>Inc.<br>2825 Strunk Road<br>Jamestown, NY 14701 | 16-6000221 | 501(C)3  | 264        |                |                  |                           | Animal Care Expenses and<br>Reduced Pet Adoption Fees                        |

IRS 990 Yr. 2012, Grants U. \$5000 +

Grantee 990 - Part 2 Organizations  
Grantees receiving \$5000 or more.  
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| Name, address, and zip                                                                   | EIN        | IRC Code | Cash Grant | Non-Cash Grant | Valuation Method | Descr Non-cash Assistance | Purpose of Grant or Assistance                 |
|------------------------------------------------------------------------------------------|------------|----------|------------|----------------|------------------|---------------------------|------------------------------------------------|
| The Chautauqua County Humane Society,<br>Inc.<br>2825 Strunk Road<br>Jamestown, NY 14701 | 16-6000221 | 501(C)3  | 692        |                |                  |                           | Chautauqua County Humane<br>Society            |
| The Chautauqua County Humane Society,<br>Inc.<br>2825 Strunk Road<br>Jamestown, NY 14701 | 16-6000221 | 501(C)3  | 4,000      |                |                  |                           | Reduced Adoption Fee Program<br>2012           |
| The Chautauqua County Humane Society,<br>Inc.<br>2825 Strunk Road<br>Jamestown, NY 14701 | 16-6000221 | 501(C)3  | 692        |                |                  |                           | Chautauqua County Humane<br>Society            |
| The Chautauqua County Humane Society,<br>Inc.<br>2825 Strunk Road<br>Jamestown, NY 14701 | 16-6000221 | 501(C)3  | 100        |                |                  |                           | Axel W. Carlson Award<br>Recipient's Charity   |
| The Chautauqua County Humane Society,<br>Inc.<br>2825 Strunk Road<br>Jamestown, NY 14701 | 16-6000221 | 501(C)3  | 107        |                |                  |                           | Chautauqua County Humane<br>Society            |
| The Chautauqua County Humane Society,<br>Inc.<br>2825 Strunk Road<br>Jamestown, NY 14701 | 16-6000221 | 501(C)3  | 230        |                |                  |                           | Chautauqua County Humane<br>Society Operations |
| The Chautauqua County Humane Society,<br>Inc.<br>2825 Strunk Road<br>Jamestown, NY 14701 | 16-6000221 | 501(C)3  | 601        |                |                  |                           | Chautauqua County Humane<br>Society            |
| The Chautauqua County Humane Society,<br>Inc.<br>2825 Strunk Road<br>Jamestown, NY 14701 | 16-6000221 | 501(C)3  | 742        |                |                  |                           | Chautauqua County Humane<br>Society            |
| The Chautauqua County Humane Society,<br>Inc.<br>2825 Strunk Road<br>Jamestown, NY 14701 | 16-6000221 | 501(C)3  | 1,203      |                |                  |                           | Chautauqua County Humane<br>Society            |
| The Chautauqua County Humane Society,<br>Inc.<br>2825 Strunk Road<br>Jamestown, NY 14701 | 16-6000221 | 501(C)3  | 692        |                |                  |                           | Chautauqua County Humane<br>Society            |
| The Chautauqua County Humane Society,<br>Inc.<br>2825 Strunk Road<br>Jamestown, NY 14701 | 16-6000221 | 501(C)3  | 692        |                |                  |                           | Chautauqua County Humane<br>Society            |

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 Grantee 990 - Part 2 Organizations  
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|------------------------------------------------------------------------------------------|------------|----------|------------|----------------|------------------|---------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| The Chautauqua County Humane Society,<br>Inc.<br>2825 Strunk Road<br>Jamestown, NY 14701 | 16-6000221 | 501(C)3  | 1,000      |                |                  |                           | Spay/Neuter Cat Program                                                                                                                                                                                                                             |
| The Chautauqua County Humane Society,<br>Inc.<br>2825 Strunk Road<br>Jamestown, NY 14701 | 16-6000221 | 501(C)3  | 742        |                |                  |                           | Chautauqua County Humane Society, Inc. to offset costs related to housing, caring, training and adoption of shelter animals identified as suitable for therapeutic companions for physically challenged individuals or for people with disabilities |
| The Chautauqua County Humane Society,<br>Inc.<br>2825 Strunk Road<br>Jamestown, NY 14701 | 16-6000221 | 501(C)3  | 4,090      |                |                  |                           | Chautauqua County Humane Society                                                                                                                                                                                                                    |
| The Relief Zone, Inc.<br>PO Box 334<br>Frewsburg, NY 14738                               | 71-1005226 | 501(C)3  | 178        |                |                  |                           | The Relief Zone                                                                                                                                                                                                                                     |
| The Relief Zone, Inc.<br>PO Box 334<br>Frewsburg, NY 14738                               | 71-1005226 | 501(C)3  | 1,528      |                |                  |                           | STOP Program Project-furniture purchase                                                                                                                                                                                                             |
| The Relief Zone, Inc.<br>PO Box 334<br>Frewsburg, NY 14738                               | 71-1005226 | 501(C)3  | 704        |                |                  |                           | Saturday Teen Outreach Program 2012                                                                                                                                                                                                                 |
| The Relief Zone, Inc.<br>PO Box 334<br>Frewsburg, NY 14738                               | 71-1005226 | 501(C)3  | 7,500      |                |                  |                           | 2012 for Operational Support                                                                                                                                                                                                                        |
| The Relief Zone, Inc.<br>PO Box 334<br>Frewsburg, NY 14738                               | 71-1005226 | 501(C)3  | 679        |                |                  |                           | Newsletter 2012                                                                                                                                                                                                                                     |
| The Resource Center<br>200 Dunham Avenue<br>Jamestown, NY 14701                          | 16-0968914 | 501(C)3  | 4,000      |                |                  |                           | Caring for Your Hearing Health                                                                                                                                                                                                                      |
| The Resource Center<br>200 Dunham Avenue<br>Jamestown, NY 14701                          | 16-0968914 | 501(C)3  | 1,941      |                |                  |                           | Chautauqua County Resource Center Fund                                                                                                                                                                                                              |
| The Robert H. Jackson Center,<br>Inc.<br>305 East Fourth Street<br>Jamestown, NY 14701   | 16-1605121 | 501(C)3  | 10,151     |                |                  |                           | Robert H. Jackson Center                                                                                                                                                                                                                            |

IRS 990 Yr. 2012; Grants of \$5000 +

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|-------------------------------------------------------------------------------------|------------|----------|------------|----------------|------------------|---------------------------|--------------------------------------------------------------------------------|
| The Robert H. Jackson Center, Inc.<br>305 East Fourth Street<br>Jamestown, NY 14701 | 16-1605121 | 501(C)3  |            | 1,000          |                  |                           | "Post-Journal Covers<br>Nuremberg" Booklet                                     |
| The Robert H. Jackson Center, Inc.<br>305 East Fourth Street<br>Jamestown, NY 14701 | 16-1605121 | 501(C)3  | 72         |                |                  |                           | For Salute to the Greatest<br>Generation through programming                   |
| The Robert H. Jackson Center, Inc.<br>305 East Fourth Street<br>Jamestown, NY 14701 | 16-1605121 | 501(C)3  | 442        |                |                  |                           | Robert H. Jackson Center                                                       |
| The Robert H. Jackson Center, Inc.<br>305 East Fourth Street<br>Jamestown, NY 14701 | 16-1605121 | 501(C)3  | 245        |                |                  |                           | Robert H. Jackson Center                                                       |
| The Robert H. Jackson Center, Inc.<br>305 East Fourth Street<br>Jamestown, NY 14701 | 16-1605121 | 501(C)3  | 1,222      |                |                  |                           | Organization & Community<br>Technologies                                       |
| The Robert H. Jackson Center, Inc.<br>305 East Fourth Street<br>Jamestown, NY 14701 | 16-1605121 | 501(C)3  | 169        |                |                  |                           | Lecture series designed for<br>youth                                           |
| The Robert H. Jackson Center, Inc.<br>305 East Fourth Street<br>Jamestown, NY 14701 | 16-1605121 | 501(C)3  | 143        |                |                  |                           | Expenses relative to a Lyle S.<br>Peterson Lectureship Program                 |
| The Robert H. Jackson Center, Inc.<br>305 East Fourth Street<br>Jamestown, NY 14701 | 16-1605121 | 501(C)3  | 151        |                |                  |                           | Programming to advance the<br>positive legacies that came<br>from World War II |
| The Robert H. Jackson Center, Inc.<br>305 East Fourth Street<br>Jamestown, NY 14701 | 16-1605121 | 501(C)3  | 83         |                |                  |                           | Robert H. Jackson Center                                                       |
| The Robert H. Jackson Center, Inc.<br>305 East Fourth Street<br>Jamestown, NY 14701 | 16-1605121 | 501(C)3  | 567        |                |                  |                           | Robert H. Jackson Center                                                       |
| The Robert H. Jackson Center, Inc.<br>305 East Fourth Street<br>Jamestown, NY 14701 | 16-1605121 | 501(C)3  | 173        |                |                  |                           | Free Masonry Speaker expenses                                                  |
| The Robert H. Jackson Center, Inc.<br>305 East Fourth Street<br>Jamestown, NY 14701 | 16-1605121 | 501(C)3  | 89         |                |                  |                           | Financial support for a<br>speaker at a Robert H. Jackson<br>Center event      |
| The Robert H. Jackson Center, Inc.<br>305 East Fourth Street<br>Jamestown, NY 14701 | 16-1605121 | 501(C)3  | 386        |                |                  |                           | Robert H. Jackson Center /<br>Internship                                       |

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|----------------------------------------------------------------------------------------|------------|----------|------------|----------------|------------------|---------------------------|---------------------------------------------------------------------------------------------------------------------------|
| The Robert H. Jackson Center, Inc.<br>305 East Fourth Street<br>Jamestown, NY 14701    | 16-1605121 | 501(C)3  | 3,000      |                |                  |                           | 2012 Teacher Initiative Program                                                                                           |
| The Robert H. Jackson Center, Inc.<br>305 East Fourth Street<br>Jamestown, NY 14701    | 16-1605121 | 501(C)3  | 803        |                |                  |                           | To provide assistance to the Robert H. Jackson Center for cost relative to an ongoing lecture series on international law |
| The Robert H. Jackson Center, Inc.<br>305 East Fourth Street<br>Jamestown, NY 14701    | 16-1605121 | 501(C)3  | 4,000      |                |                  |                           | 2012-13 Teacher Initiative Program                                                                                        |
| The Robert H. Jackson Center, Inc.<br>305 East Fourth Street<br>Jamestown, NY 14701    | 16-1605121 | 501(C)3  | 254        |                |                  |                           | Costs relative to annual Samuel F. Bonavita Lecture Series                                                                |
| The Robert H. Jackson Center, Inc.<br>305 East Fourth Street<br>Jamestown, NY 14701    | 16-1605121 | 501(C)3  | 2,000      |                |                  |                           | 2012 Wealth Engine Development Prospect Software                                                                          |
| The Robert H. Jackson Center, Inc.<br>305 East Fourth Street<br>Jamestown, NY 14701    | 16-1605121 | 501(C)3  | 1,487      |                |                  |                           | For expenses related to programming events at or created by the Jackson Center                                            |
| The Robert H. Jackson Center, Inc.<br>305 East Fourth Street<br>Jamestown, NY 14701    | 16-1605121 | 501(C)3  | 1,000      |                |                  |                           | Sierra Leonean Author Ishmael Beah                                                                                        |
| The Robert H. Jackson Center, Inc.<br>305 East Fourth Street<br>Jamestown, NY 14701    | 16-1605121 | 501(C)3  | 1,025      |                |                  |                           | Robert H. Jackson Center for costs related to the Elizabeth S. Lenna Fellowship                                           |
| The Robert H. Jackson Center, Inc.<br>305 East Fourth Street<br>Jamestown, NY 14701    | 16-1605121 | 501(C)3  | 7,655      |                |                  |                           | Robert H. Jackson Center                                                                                                  |
| The Salvation Army<br>83 South Main Street<br>P.O. Box 368<br>Jamestown, NY 14702-0368 | 16-0743180 | 501(C)3  | -44        |                |                  |                           | Comprehensive Financial Assistance Program SC                                                                             |
| The Salvation Army<br>83 South Main Street<br>P.O. Box 368<br>Jamestown, NY 14702-0368 | 16-0743180 | 501(C)3  | 1,000      |                |                  |                           | Comprehensive Financial Assistance Program DJ                                                                             |
| The Salvation Army<br>83 South Main Street<br>P.O. Box 368<br>Jamestown, NY 14702-0368 | 16-0743180 | 501(C)3  | 995        |                |                  |                           | Comprehensive Financial Assistance Program TJ                                                                             |

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|----------------------------------------------------------------------------------------|------------|----------|------------|----------------|------------------|---------------------------|-----------------------------------------------------------------------------------------------------|
| The Salvation Army<br>83 South Main Street<br>P.O. Box 368<br>Jamestown, NY 14702-0368 | 16-0743180 | 501(C)3  | 4,000      |                |                  |                           | Food Pantry Supplementation                                                                         |
| The Salvation Army<br>83 South Main Street<br>P.O. Box 368<br>Jamestown, NY 14702-0368 | 16-0743180 | 501(C)3  | 1,000      |                |                  |                           | 2012 Summer Enrichment Project                                                                      |
| The Salvation Army<br>83 South Main Street<br>P.O. Box 368<br>Jamestown, NY 14702-0368 | 16-0743180 | 501(C)3  | 400        |                |                  |                           | Comprehensive Financial Assistance Program WC                                                       |
| The Salvation Army<br>83 South Main Street<br>P.O. Box 368<br>Jamestown, NY 14702-0368 | 16-0743180 | 501(C)3  | 250        |                |                  |                           | Lincoln School Staff - Charitable Activities                                                        |
| The Salvation Army<br>440 West Nyack Road<br>West Nyack, NY 10994                      | 13-5562351 | 501(C)3  | 1,110      |                |                  |                           | Agnes Home--if Agnes Home no longer exists, it is to be given to another home for battered spouses. |
| The Salvation Army<br>83 South Main Street<br>P.O. Box 368<br>Jamestown, NY 14702-0368 | 16-0743180 | 501(C)3  | 5,000      |                |                  |                           | Comprehensive Financial Assistance Program                                                          |
| The Salvation Army<br>83 South Main Street<br>P.O. Box 368<br>Jamestown, NY 14702-0368 | 16-0743180 | 501(C)3  | 185        |                |                  |                           | RP                                                                                                  |
| The Salvation Army<br>440 West Nyack Road<br>West Nyack, NY 10994                      | 13-5562351 | 501(C)3  | 2,537      |                |                  |                           | The Salvation Army                                                                                  |
| The Salvation Army<br>83 South Main Street<br>P.O. Box 368<br>Jamestown, NY 14702-0368 | 16-0743180 | 501(C)3  | 500        |                |                  |                           | Salvation Army - Chautauqua County Support                                                          |
| The Salvation Army<br>440 West Nyack Road<br>West Nyack, NY 10994                      | 13-5562351 | 501(C)3  | 11,459     |                |                  |                           | Salvation Army                                                                                      |
| The Salvation Army<br>83 South Main Street<br>P.O. Box 368<br>Jamestown, NY 14702-0368 | 16-0743180 | 501(C)3  | 985        |                |                  |                           | Comprehensive Financial Assistance Program SM                                                       |

IRS 990 Yr. 2012, Grants of \$5000 +

Grantee 990 - Part 2 Organizations  
 Grantees receiving \$5000 or more.  
 Tax Year 2012  
 Region. All Regions

| Name, address, and zip                                                                            | EIN        | IRC Code   | Cash Grant | Non-Cash Grant | Valuation Method | Descr Non-cash Assistance | Purpose of Grant or Assistance                                                                        |
|---------------------------------------------------------------------------------------------------|------------|------------|------------|----------------|------------------|---------------------------|-------------------------------------------------------------------------------------------------------|
| The Salvation Army<br>440 West Nyack Road<br>West Nyack, NY 10994                                 | 13-5562351 | 501(C)3    | 1,454      |                |                  |                           | Salvation Army                                                                                        |
| The Salvation Army<br>440 West Nyack Road<br>West Nyack, NY 10994                                 | 13-5562351 | 501(C)3    | 3,806      |                |                  |                           | Agnes Home Women's Emergency Shelter                                                                  |
| Town of Ellery<br>P.O. Box 429<br>Bemus Point, NY 14712-0429                                      | 16-6002238 | 501(C)3    | 5,000      |                |                  |                           | Ellery Park Expansion                                                                                 |
| Town of Ellery<br>P.O. Box 429<br>Bemus Point, NY 14712-0429                                      | 16-6002238 | 501(C)3    | 50         |                |                  |                           | Southwestern Cycle Chautauqua Bike Tour - Park Permit                                                 |
| Union Gospel Mission, Inc.<br>7 - 11 West First St<br>Jamestown, NY 14701                         | 16-6032490 | 501(C)3    | 25,000     |                |                  |                           | Union Gospel Mission                                                                                  |
| Union Gospel Mission, Inc.<br>7 - 11 West First St.<br>Jamestown, NY 14701                        | 16-6032490 | 501(C)3    | 6,916      |                |                  |                           | Rescue Mission for the care and comfort of homeless and indigent persons of Jamestown.                |
| Union Gospel Mission, Inc.<br>7 - 11 West First St.<br>Jamestown, NY 14701                        | 16-6032490 | 501(C)3    | 1,402      |                |                  |                           | Union Gospel Mission                                                                                  |
| United Way of Southern Chautauqua County<br>413 N. Main Street<br>Jamestown, NY 14701             | 16-077274  | 501(C)3    | 1,475      |                |                  |                           | For the specific purposes of data collection, research, leadership development and strategic planning |
| United Way of Southern Chautauqua County<br>413 N. Main Street<br>Jamestown, NY 14701             | 16-077274  | 501(C)3    | 4,567      |                |                  |                           | United Way of Southern Chautauqua County                                                              |
| United Way of Southern Chautauqua County<br>413 N. Main Street<br>Jamestown, NY 14701             | 16-077274  | 501(C)3    | 22,513     |                |                  |                           | United Way of Southern Chautauqua County                                                              |
| Village of Falconer<br>Community Building<br>101 W. Main Street<br>Falconer, NY 14733             | 16-6002464 | Government | 27,200     |                |                  |                           | Falconer Park Bridge Invoice # 1159                                                                   |
| Winifred Crawford Dibert Boys & Girls Club of Jamestown<br>62 Allen Street<br>Jamestown, NY 14701 | 16-0743055 | 501(C)3    | 131        |                |                  |                           | Winifred Crawford Dibert Boys & Girls Club of Jamestown - Youth Related Activities                    |
| Winifred Crawford Dibert Boys & Girls Club of Jamestown<br>62 Allen Street                        | 16-0743055 | 501(C)3    | 2,659      |                |                  |                           | Jamestown Boys & Girls Club                                                                           |

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## Chautauqua Region Community Foundation, Inc.

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IRS 990 Yr 2012, Grants of \$5000 +

Grantee 990 - Part 2 Organizations  
Grantees receiving \$5000 or more.  
Tax Year 2012

Region All Regions

| Name, address, and zip                                                                               | EIN        | IRC Code | Cash Grant | Non-Cash Grant | Valuation Method | Descr Non-cash Assistance | Purpose of Grant or Assistance                   |
|------------------------------------------------------------------------------------------------------|------------|----------|------------|----------------|------------------|---------------------------|--------------------------------------------------|
| Winifred Crawford Dibert Boys & Girls<br>Club of Jamestown<br>62 Allen Street<br>Jamestown, NY 14701 | 16-0743055 | 501(C)3  | 420        |                |                  |                           | Camperships For<br>Underprivileged Youth         |
| Winifred Crawford Dibert Boys & Girls<br>Club of Jamestown<br>62 Allen Street<br>Jamestown, NY 14701 | 16-0743055 | 501(C)3  | 5,000      |                |                  |                           | Positive Programming<br>Participation Assistance |
| Winifred Crawford Dibert Boys & Girls<br>Club of Jamestown<br>62 Allen Street<br>Jamestown, NY 14701 | 16-0743055 | 501(C)3  | 2,659      |                |                  |                           | Jamestown Boys & Girls Club                      |
| Winifred Crawford Dibert Boys & Girls<br>Club of Jamestown<br>62 Allen Street<br>Jamestown, NY 14701 | 16-0743055 | 501(C)3  | 280        |                |                  |                           | Camperships For<br>Underprivileged Youth         |
| Winifred Crawford Dibert Boys & Girls<br>Club of Jamestown<br>62 Allen Street<br>Jamestown, NY 14701 | 16-0743055 | 501(C)3  | 500        |                |                  |                           | Halloween Party Supplies                         |
| Winifred Crawford Dibert Boys & Girls<br>Club of Jamestown<br>62 Allen Street<br>Jamestown, NY 14701 | 16-0743055 | 501(C)3  | 2,659      |                |                  |                           | Jamestown Boys & Girl's Club                     |
| Winifred Crawford Dibert Boys & Girls<br>Club of Jamestown<br>62 Allen Street<br>Jamestown, NY 14701 | 16-0743055 | 501(C)3  | 48         |                |                  |                           | Winifred Crawford Dibert Boys<br>and Girls Club  |
| Winifred Crawford Dibert Boys & Girls<br>Club of Jamestown<br>62 Allen Street<br>Jamestown, NY 14701 | 16-0743055 | 501(C)3  | 2,659      |                |                  |                           | Jamestown Boys & Girls Club                      |
| Winifred Crawford Dibert Boys & Girls<br>Club of Jamestown<br>62 Allen Street<br>Jamestown, NY 14701 | 16-0743055 | 501(C)3  | 2,018      |                |                  |                           | Jamestown Boys & Girls Club                      |
| Winifred Crawford Dibert Boys & Girls<br>Club of Jamestown<br>62 Allen Street<br>Jamestown, NY 14701 | 16-0743055 | 501(C)3  | 580        |                |                  |                           | Basketball Uniforms/Basketball                   |

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| Name, address, and zip                                            | EIN        | IRC Code | Cash Grant | Non-Cash Grant | Valuation Method | Descr Non-cash Assistance | Purpose of Grant or Assistance                                                                    |
|-------------------------------------------------------------------|------------|----------|------------|----------------|------------------|---------------------------|---------------------------------------------------------------------------------------------------|
| YMCA<br>101 East Fourth St.<br>Jamestown, NY 14701                | 16-0743238 | 501(C)3  | 2,021      |                |                  |                           | YMCA                                                                                              |
| YMCA<br>101 East Fourth St.<br>Jamestown, NY 14701                | 16-0743238 | 501(C)3  | 1,000      |                |                  |                           | Eastside YMCA Science Project                                                                     |
| YMCA<br>101 East Fourth St.<br>Jamestown, NY 14701                | 16-0743238 | 501(C)3  | 905        |                |                  |                           | YMCA youth programs                                                                               |
| YMCA<br>101 East Fourth St.<br>Jamestown, NY 14701                | 16-0743238 | 501(C)3  | 600        |                |                  |                           | Moving for Better Balance<br>Chairs                                                               |
| YMCA<br>101 East Fourth St.<br>Jamestown, NY 14701                | 16-0743238 | 501(C)3  | 250        |                |                  |                           | Partner for Youth Campaign                                                                        |
| YMCA<br>101 East Fourth St.<br>Jamestown, NY 14701                | 16-0743238 | 501(C)3  | 5,000      |                |                  |                           | Special Project - YMCA<br>Domestic Hot Water system                                               |
| YMCA<br>101 East Fourth St.<br>Jamestown, NY 14701                | 16-0743238 | 501(C)3  | 183        |                |                  |                           | Camp scholarships to needy<br>youth who exhibit leadership<br>potential to attend Camp<br>Onyahsa |
| YMCA<br>101 East Fourth St.<br>Jamestown, NY 14701                | 16-0743238 | 501(C)3  | 1,395      |                |                  |                           | Lake Water Park Base                                                                              |
| YMCA<br>101 East Fourth St.<br>Jamestown, NY 14701                | 16-0743238 | 501(C)3  | 1,000      |                |                  |                           | Office Efficiency Technology                                                                      |
| YMCA<br>101 East Fourth St.<br>Jamestown, NY 14701                | 16-0743238 | 501(C)3  | 6,500      |                |                  |                           | Eastside YMCA Youth Center<br>Summer Day Camp 2012                                                |
| YMCA of Jamestown<br>401 North Main Street<br>Jamestown, NY 14701 | 16-0743244 | 501(C)3  | 1,000      |                |                  |                           | YMCA Summer Day Camp 2012                                                                         |
| YMCA of Jamestown<br>401 North Main Street<br>Jamestown, NY 14701 | 16-0743244 | 501(C)3  | 7,500      |                |                  |                           | 2012-13 TEAM Program Change<br>for Success                                                        |
| YMCA of Jamestown<br>401 North Main Street<br>Jamestown, NY 14701 | 16-0743244 | 501(C)3  | 1,200      |                |                  |                           | Help for Kids - Braces                                                                            |

## IRS 990 Yr. 2012; Grants of \$5000 +

Grantee 990 - Part 2 Organizations  
 Grantees receiving \$5000 or more.  
 Tax Year 2012

Region: All Regions

| Name, address, and zip                                            | EIN        | IRC Code | Cash Grant | Non-Cash Grant | Valuation Method | Descr Non-cash Assistance | Purpose of Grant or Assistance         |
|-------------------------------------------------------------------|------------|----------|------------|----------------|------------------|---------------------------|----------------------------------------|
| YWCA of Jamestown<br>401 North Main Street<br>Jamestown, NY 14701 | 16-0743244 | 501(C)3  |            | 487            |                  |                           | Emergency Diaper Project               |
| YWCA of Jamestown<br>401 North Main Street<br>Jamestown, NY 14701 | 16-0743244 | 501(C)3  | 1,200      |                |                  |                           | Caudill Braces                         |
| YWCA of Jamestown<br>401 North Main Street<br>Jamestown, NY 14701 | 16-0743244 | 501(C)3  | 1,200      |                |                  |                           | Help for Kids - Braces                 |
| YWCA of Jamestown<br>401 North Main Street<br>Jamestown, NY 14701 | 16-0743244 | 501(C)3  | 354        |                |                  |                           | Help for Kids Fund - Glasses           |
| YWCA of Jamestown<br>401 North Main Street<br>Jamestown, NY 14701 | 16-0743244 | 501(C)3  | 165        |                |                  |                           | Help for Kids - Glasses                |
| YWCA of Jamestown<br>401 North Main Street<br>Jamestown, NY 14701 | 16-0743244 | 501(C)3  | 409        |                |                  |                           | YWCA                                   |
| YWCA of Jamestown<br>401 North Main Street<br>Jamestown, NY 14701 | 16-0743244 | 501(C)3  | 254        |                |                  |                           | Help for Kids - Glasses                |
| YWCA of Jamestown<br>401 North Main Street<br>Jamestown, NY 14701 | 16-0743244 | 501(C)3  | 154        |                |                  |                           | Help for Kids - Glasses                |
| YWCA of Jamestown<br>401 North Main Street<br>Jamestown, NY 14701 | 16-0743244 | 501(C)3  | 1,000      |                |                  |                           | Help for Kids - Non-Medical Assistance |
| YWCA of Jamestown<br>401 North Main Street<br>Jamestown, NY 14701 | 16-0743244 | 501(C)3  | 2,018      |                |                  |                           | YWCA                                   |
| YWCA of Jamestown<br>401 North Main Street<br>Jamestown, NY 14701 | 16-0743244 | 501(C)3  | 300        |                |                  |                           | Help for Kids - Winter Wear            |
| Totals                                                            |            |          | 1,076,124  | 000            |                  |                           |                                        |

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Grantee 990 - Part 3 Individuals

Tax Year 2012

Region: All Regions

| Type of Grant | # of Recipients | Amount of Cash |            | Amount of non-cash Assistance | Method of Valuation | Descr Non-cash Assistance |
|---------------|-----------------|----------------|------------|-------------------------------|---------------------|---------------------------|
|               |                 | Grants         |            |                               |                     |                           |
| Education     | 11              | \$             | 5,030.00   | \$ -                          |                     |                           |
| General       | 1               |                | 500.00     | -                             |                     |                           |
| Religion      | 1               |                | 750.00     | -                             |                     |                           |
| Scholarship   | 621             |                | 682,839.00 | -                             |                     |                           |
| Totals        |                 | \$             | 689,119.00 | \$ -                          |                     |                           |