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Form **990-PF**

Department of the Treasury  
Internal Revenue Service

Return of Private Foundation

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

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OMB No 1545-0052

**2015**

Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015, and ending 12-31-2015

Name of foundation DAVID AND CANDACE WEIR FOUNDATION C/O CL KING & ASSOCIATES INC		<b>A Employer identification number</b>  13-3797919	
Number and street (or P O box number if mail is not delivered to street address) 9 ELK STREET		<b>B</b> Telephone number (see instructions)  (518) 431-3500	
City or town, state or province, country, and ZIP or foreign postal code ALBANY, NY 12207		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>	
<b>G</b> Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
<b>H</b> Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 29,950,146		<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
<b>J</b> Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</i>		Revenue and expenses per books <b>(a)</b>	Net investment income <b>(b)</b>	Adjusted net income <b>(c)</b>	Disbursements for charitable purposes <b>(d)</b> (cash basis only)
Revenue	<b>1</b> Contributions, gifts, grants, etc , received (attach schedule) . . . . .	1,914,800			
	<b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	<b>3</b> Interest on savings and temporary cash investments				
	<b>4</b> Dividends and interest from securities . . . . .	167,345	167,345		
	<b>5a</b> Gross rents . . . . .				
	<b>b</b> Net rental income or (loss) _____				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10	163,959			
	<b>b</b> Gross sales price for all assets on line 6a 2,434,149				
	<b>7</b> Capital gain net income (from Part IV, line 2) . . .		163,959		
	<b>8</b> Net short-term capital gain . . . . .				
	<b>9</b> Income modifications . . . . .				
	<b>10a</b> Gross sales less returns and allowances				
Operating and Administrative Expenses	<b>b</b> Less Cost of goods sold . . . . .				
	<b>c</b> Gross profit or (loss) (attach schedule) . . . . .				
	<b>11</b> Other income (attach schedule) . . . . .	1,585	0		
	<b>12 Total.</b> Add lines 1 through 11 . . . . .	2,247,689	331,304		
	<b>13</b> Compensation of officers, directors, trustees, etc	0	0		0
	<b>14</b> Other employee salaries and wages . . . . .				
	<b>15</b> Pension plans, employee benefits . . . . .				
	<b>16a</b> Legal fees (attach schedule). . . . .				
	<b>b</b> Accounting fees (attach schedule). . . . .	4,500	1,125		3,375
	<b>c</b> Other professional fees (attach schedule) . . . . .				
	<b>17</b> Interest . . . . .	8,288	8,288		0
	<b>18</b> Taxes (attach schedule) (see instructions) . . .	17,680	250		250
	<b>19</b> Depreciation (attach schedule) and depletion . .				
	<b>20</b> Occupancy . . . . .				
	<b>21</b> Travel, conferences, and meetings. . . . .				
	<b>22</b> Printing and publications . . . . .				
	<b>23</b> Other expenses (attach schedule). . . . .	21,367	14,621		6,457
	<b>24 Total operating and administrative expenses.</b>				
	Add lines 13 through 23 . . . . .	51,835	24,284		10,082
	<b>25</b> Contributions, gifts, grants paid . . . . .	1,198,850			1,198,850
	<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	1,250,685	24,284		1,208,932
	<b>27</b> Subtract line 26 from line 12				
	<b>a Excess of revenue over expenses and disbursements</b>	997,004			
	<b>b Net investment income</b> (if negative, enter -0-)		307,020		
	<b>c Adjusted net income</b> (if negative, enter -0-) . . .				

Part II		Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing . . . . .		7,821	1,216	1,216
	2	Savings and temporary cash investments . . . . .		26,779		
	3	Accounts receivable ▶ <u>22,102</u>				
		Less allowance for doubtful accounts ▶ _____		3,314	22,102	22,102
	4	Pledges receivable ▶ _____				
		Less allowance for doubtful accounts ▶ _____				
	5	Grants receivable . . . . .				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions). . . . .				
	7	Other notes and loans receivable (attach schedule) ▶ _____				
		Less allowance for doubtful accounts ▶ _____				
	8	Inventories for sale or use . . . . .				
	9	Prepaid expenses and deferred charges . . . . .				
	10a	Investments—U S and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule) . . . . .	13,722,318	14,885,252	14,601,470	
	c	Investments—corporate bonds (attach schedule) . . . . .				
	11	Investments—land, buildings, and equipment basis ▶ _____				
	Less accumulated depreciation (attach schedule) ▶ _____					
12	Investments—mortgage loans. . . . .					
13	Investments—other (attach schedule) . . . . .	9,785,081	9,633,747	15,325,358		
14	Land, buildings, and equipment basis ▶ _____					
	Less accumulated depreciation (attach schedule) ▶ _____					
15	Other assets (describe ▶ _____)					
16	Total assets(to be completed by all filers—see the instructions Also, see page 1, item I)	23,545,313	24,542,317	29,950,146		
Liabilities	17	Accounts payable and accrued expenses . . . . .				
	18	Grants payable . . . . .				
	19	Deferred revenue . . . . .				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable (attach schedule). . . . .				
	22	Other liabilities (describe ▶ _____)				
	23	Total liabilities(add lines 17 through 22) . . . . .	0	0		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted . . . . .				
	25	Temporarily restricted . . . . .				
	26	Permanently restricted . . . . .				
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.					
	27	Capital stock, trust principal, or current funds . . . . .	17,201,669	17,201,669		
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0		
	29	Retained earnings, accumulated income, endowment, or other funds	6,343,644	7,340,648		
	30	Total net assets or fund balances(see instructions) . . . . .	23,545,313	24,542,317		
31	Total liabilities and net assets/fund balances(see instructions) . . . . .	23,545,313	24,542,317			

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return) . . . . .	1	23,545,313
2	Enter amount from Part I, line 27a . . . . .	2	997,004
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3 . . . . .	4	24,542,317
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	6	24,542,317

Part IV

Capital Gains and Losses for Tax on Investment Income

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )		How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr )	Date sold (d) (mo , day, yr )
1a	See Additional Data Table			
b				
c				
d				
e				

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) or (l) Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
a See Additional Data Table			
b			
c			
d			
e			

2	Capital gain net income or (net capital loss)	<div><div>If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7</div></div>	2	163,959
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) <div>If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 . . . . .</div>		3	

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )  
If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No  
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	1,687,647	29,902,652	0 056438
2013	1,776,702	29,063,350	0 061132
2012	1,000,667	20,238,462	0 049444
2011	888,561	18,564,021	0 047865
2010	437,008	15,863,285	0 027548

2	Total of line 1, column (d). . . . .	2	0 242427
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 048485
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5. . . . .	4	30,307,346
5	Multiply line 4 by line 3. . . . .	5	1,469,452
6	Enter 1% of net investment income (1% of Part I, line 27b). . . . .	6	3,070
7	Add lines 5 and 6. . . . .	7	1,472,522
8	Enter qualifying distributions from Part XII, line 4. . . . .	8	1,208,932

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

Part VI

Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a

Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1  
Date of ruling or determination letter \_\_\_\_\_  
(attach copy of letter if necessary—see instructions)

b

Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b . . . . .

c

All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)

2

Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)

2

0

3

Add lines 1 and 2. . . . .

3

6,140

4

Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)

4

0

5

**Tax based on investment income.** Subtract line 4 from line 3. If zero or less, enter -0- . . . . .

5

6,140

6

Credits/Payments

a

2015 estimated tax payments and 2014 overpayment credited to 2015

6a

27,920

b

Exempt foreign organizations—tax withheld at source. . . . .

6b

c

Tax paid with application for extension of time to file (Form 8868). . . . .

6c

d

Backup withholding erroneously withheld. . . . .

6d

7

Total credits and payments. Add lines 6a through 6d. . . . .

7

27,920

8

Enter any **penalty** for underpayment of estimated tax. Check here ☐ if Form 2220 is attached.

8

9

**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed**. . . . .

9

10

**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid**. . . . .

10

21,780

11

Enter the amount of line 10 to be **Credited to 2015 estimated tax** ☐ 6,160 **Refunded** ☐

11

15,620

Part VII-A

Statements Regarding Activities

1a

During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .

1a

No

b

Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . .  
*If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.*

1b

No

c

Did the foundation file **Form 1120-POL** for this year? . . . . .

1c

No

d

Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  
(1) On the foundation ☐ \$ \_\_\_\_\_ 0 (2) On foundation managers ☐ \$ \_\_\_\_\_ 0

e

Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☐ \$ \_\_\_\_\_ 0

2

Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . .  
*If "Yes," attach a detailed description of the activities.*

2

No

3

Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If "Yes," attach a conformed copy of the changes.* . . . . .

3

No

4a

Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .

4a

Yes

b

If "Yes," has it filed a tax return on **Form 990-T** for this year? . . . . .

4b

Yes

5

Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . .  
*If "Yes," attach the statement required by General Instruction T.*

5

No

6

Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:  
• By language in the governing instrument, or  
• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .

6

Yes

7

Did the foundation have at least \$5,000 in assets at any time during the year? *If "Yes," complete Part II, col. (c), and Part XV.* . . . . .

7

Yes

8a

Enter the states to which the foundation reports or with which it is registered (see instructions):  
☐ NY \_\_\_\_\_

b

If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? *If "No," attach explanation.* . . . . .

8b

Yes

9

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)?  
*If "Yes," complete Part XIV.* . . . . .

9

No

10

Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses.* . . . . .

10

No

Part VII-A

Statements Regarding Activities *(continued)*

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ NONE	13	Yes	
14	The books are in care of ▶ FOUNDATION Telephone no ▶ (518) 431-3500 Located at ▶ 9 ELK STREET ALBANY NY ZIP+4 ▶ 12207			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . ▶ 15			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶	16	Yes	No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?. . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?. . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days ). . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? . . . . . <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. . . . . ▶ <input type="checkbox"/>	1b		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?. . . . .	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?. . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions ). . . . .	2b		
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?. . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? ( <i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015.</i> ). . . . .	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a

During the year did the foundation pay or incur any amount to

(1)

Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

Yes 

No

(2)

Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

Yes 

No

(3)

Provide a grant to an individual for travel, study, or other similar purposes?

Yes 

No

(4)

Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions).

Yes 

No

(5)

Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

Yes 

No

b

If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b

Organizations relying on a current notice regarding disaster assistance check here.

c

If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

Yes 

No

If "Yes," attach the statement required by Regulations section 53.4945–5(d).

6a

Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Yes 

No

b

Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

No

If "Yes" to 6b, file Form 8870.

7a

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

Yes 

No

b

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1

List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
CANDICE K WEIR	TRUSTEE	0	0	0
414 LOUDONVILLE ROAD	5 00			
LOUDONVILLE, NY 12211				
MEREDITH PRIME	TRUSTEE	0	0	0
280 WILMINGTON ROAD	5 00			
LAKE PLACID, NY 12946				
AMEILA F WEIR	TRUSTEE	0	0	0
244 W 23RD STREET	5 00			
NEW YORK, NY 10011				

2

Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
NONE				

Total

number of other employees paid over \$50,000.

0

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## Part VIII

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

<b>Total</b> number of others receiving over \$50,000 for professional services. . . . .	0
--	---

## Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b>	
<b>2</b>	
All other program-related investments See instructions	
<b>3</b>	

[illegible]



Part X

Minimum Investment Return

(All domestic foundations must complete this part. Foreign foundations,see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities. . . . .	1a	29,179,753
b	Average of monthly cash balances. . . . .	1b	561,481
c	Fair market value of all other assets (see instructions). . . . .	1c	1,027,645
d	Total (add lines 1a, b, and c). . . . .	1d	30,768,879
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	0
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	0
3	Subtract line 2 from line 1d. . . . .	3	30,768,879
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	4	461,533
5	Net value of noncharitable-use assets.Subtract line 4 from line 3 Enter here and on Part V, line 4	5	30,307,346
6	Minimum investment return.Enter 5% of line 5. . . . .	6	1,515,367

Part XI

Distributable Amount

(see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☒ and do not complete this part.)

1	Minimum investment return from Part X, line 6. . . . .	1	1,515,367
2a	Tax on investment income for 2015 from Part VI, line 5. . . . .	2a	6,140
b	Income tax for 2015 (This does not include the tax from Part VI ). . . . .	2b	
c	Add lines 2a and 2b. . . . .	2c	6,140
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	1,509,227
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	0
5	Add lines 3 and 4. . . . .	5	1,509,227
6	Deduction from distributable amount (see instructions). . . . .	6	0
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	7	1,509,227

Part XII

Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	1a	1,208,932
b	Program-related investments—total from Part IX-B. . . . .	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required). . . . .	3a	
b	Cash distribution test (attach the required schedule). . . . .	3b	
4	Qualifying distributions.Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	1,208,932
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions). . . . .	5	0
6	Adjusted qualifying distributions.Subtract line 5 from line 4. . . . .	6	1,208,932

**Note:**The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				1,509,227
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2015				
a From 2010.				
b From 2011.				
c From 2012.				
d From 2013.				52,076
e From 2014.				248,401
f Total of lines 3a through e.	300,477			
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ 1,208,932				
a Applied to 2014, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2015 distributable amount.				1,208,932
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)	300,295			300,295
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	182			
b Prior years' undistributed income Subtract line 4b from line 2b.		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions.		0		
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions.			0	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015.				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a.	182			
10 Analysis of line 9				
a Excess from 2011.				
b Excess from 2012.				
c Excess from 2013.				
d Excess from 2014.				182
e Excess from 2015.				

## Part XIV

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling. . . . ▶

**b** Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

		Tax year	Prior 3 years			(e) Total
		(a) 2015	(b) 2014	(c) 2013	(d) 2012	
<b>2a</b>	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b>	85% of line 2a . . . . .					
<b>c</b>	Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b>	Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b>	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b>	Complete 3a, b, or c for the alternative test relied upon					
<b>a</b>	"Assets" alternative test—enter					
	(1) Value of all assets . . . . .					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b>	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b>	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					

**Part XV** **Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)**

## 1 Information Regarding Foundation Managers:

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

CANDICE K WEIR

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

**a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

CANDACE K WEIR  
9 ELK STREET  
ALBANY, NY 12207  
(518) 431-3500

**b** The form in which applications should be submitted and information and materials they should include

LETTER WITH SUPPORTING ATTACHMENTS TO FULLY DISCLOSE CHARITABLE PURPOSE OF APPLICANT

**c** Any submission deadlines

NONE

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

NONE

Part XV

Supplementary Information(continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total . . . . .			3a	1,198,850
b Approved for future payment				
Total . . . . .			3b	0

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b>	Program service revenue					
<b>a</b>	_____					
<b>b</b>	_____					
<b>c</b>	_____					
<b>d</b>	_____					
<b>e</b>	_____					
<b>f</b>	_____					
<b>g</b>	Fees and contracts from government agencies					
<b>2</b>	Membership dues and assessments. . . .					
<b>3</b>	Interest on savings and temporary cash investments . . . . .					
<b>4</b>	Dividends and interest from securities. . .			14	167,345	
<b>5</b>	Net rental income or (loss) from real estate					
<b>a</b>	Debt-financed property. . . . .					
<b>b</b>	Not debt-financed property. . . . .					
<b>6</b>	Net rental income or (loss) from personal property . . . . .					
<b>7</b>	Other investment income. . . . .					
<b>8</b>	Gain or (loss) from sales of assets other than inventory . . . . .			18	163,959	
<b>9</b>	Net income or (loss) from special events					
<b>10</b>	Gross profit or (loss) from sales of inventory . . .					
<b>11</b>	Other revenue <b>a</b> REFUND OF EXCISE TAX ON INVESTMENT INCOME _____			01	1,585	
<b>b</b>	_____					
<b>c</b>	_____					
<b>d</b>	_____					
<b>e</b>	_____					
<b>12</b>	Subtotal Add columns (b), (d), and (e). .		0		332,889	0
<b>13</b>	<b>Total.</b> Add line 12, columns (b), (d), and (e). . . . .			<b>13</b>		<b>332,889</b>

(See worksheet in line 13 instructions to verify calculations )

[illegible]

Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

(1) Cash. . . . .

(2) Other assets. . . . .

**b Other transactions**

**(1) Sales of assets to a noncharitable exempt organization.** . . . . .

**(2) Purchases of assets from a noncharitable exempt organization.** . . . . .

**(3) Rental of facilities, equipment, or other assets.** . . . . .

**(4) Reimbursement arrangements.** . . . . .

**(5) Loans or loan guarantees.** . . . . .

**(6) Performance of services or membership or fundraising solicitations.** . . . . .

**c** Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . .

**d** If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . ☐ Yes ☒ No

**b** If "Yes," complete the following schedule

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 taxpayer) is based on all information of which preparer has any knowledge.

**Paid  
Preparer  
Use  
Only**

Will the IRS discuss this return with the preparer shown below  
(see instr )? ☒ Yes ☐ No

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	Date acquired (c) (mo , day, yr )	(d) Date sold (mo , day, yr )
6,334 SHS VIASYSTEMS GROUP INC	P	2009-04-17	2015-06-01
2,792 SHS VIASYSTEMS GROUP INC	P	2009-04-20	2015-06-01
17,234 SHS VIASYSTEMS GROUP INC	P	2009-04-20	2015-06-01
4,791 SHS VIASYSTEMS GROUP INC	P	2009-04-21	2015-06-01
3,194 SHS VIASYSTEMS GROUP INC	P	2009-04-22	2015-06-01
6,728 SHS VIASYSTEMS GROUP INC	P	2009-04-23	2015-06-01
2,851 SHS VIASYSTEMS GROUP INC	P	2009-04-24	2015-06-01
831 SHS VIASYSTEMS GROUP INC	P	2009-04-28	2015-06-01
978 SHS VIASYSTEMS GROUP INC	P	2010-02-24	2015-06-01
4,268 SHS VIASYSTEMS GROUP INC	P	2010-02-25	2015-06-01

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
115,946		25,006	90,940
51,100		11,550	39,550
315,470		75,460	240,010
87,709		20,124	67,585
58,462		14,415	44,047
123,156		34,088	89,068
52,192		16,894	35,298
15,204		5,122	10,082
17,903		21,137	-3,234
78,122		92,263	-14,141

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			90,940
			39,550
			240,010
			67,585
			44,047
			89,068
			35,298
			10,082
			-3,234
			-14,141

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
20,000 SHS FINISAR CORP	P	2013-12-12	2015-01-05
4,520 SHS DAWSON GEOPHYSICAL	P	2014-05-01	2015-10-29
6,786 SHS DAWSON GEOPHYSICAL	P	2014-05-02	2015-10-29
2,027 SHS DAWSON GEOPHYSICAL	P	2014-05-05	2015-10-29
4,633 SHS DAWSON GEOPHYSICAL	P	2014-06-20	2015-10-29
4,400 SHS DAWSON GEOPHYSICAL	P	2014-06-23	2015-10-29
1,700 SHS DAWSON GEOPHYSICAL	P	2014-06-24	2015-10-29
2,133 SHS DAWSON GEOPHYSICAL	P	2014-06-25	2015-10-29
467 SHS DAWSON GEOPHYSICAL	P	2014-06-26	2015-10-29
10,000 SHS STEINER LEISURE LIMITED	P	2013-12-23	2015-12-10

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
387,667		430,350	-42,683
13,425		67,673	-54,248
20,155		101,999	-81,844
6,020		29,953	-23,933
13,760		63,675	-49,915
13,068		60,247	-47,179
5,049		23,399	-18,350
6,335		29,308	-22,973
1,387		6,486	-5,099
650,000		464,913	185,087

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-42,683
			-54,248
			-81,844
			-23,933
			-49,915
			-47,179
			-18,350
			-22,973
			-5,099
			185,087



Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
15,003 SHS FINISAR CORP	P	2014-01-23	2015-01-02
4,997 SHS FINISAR CORP	P	2014-01-23	2015-01-05
1 SHS DAWSON GEOPHYSICAL	P	2014-05-02	2015-02-12
PCM PARTNERS, L P II	P	2015-01-01	2015-12-31
PCM PARTNERS, L P II	P	2014-12-01	2015-12-31
NONDIVIDEND DISTRIBUTION IN EXCESS OF STOCK BASIS IN JABIL CIRCUIT, INC	P	1996-08-23	2015-12-01
NONDIVIDEND DISTRIBUTION IN EXCESS OF STOCK BASIS IN JABIL CIRCUIT, INC	P	2000-03-30	2015-12-01
NONDIVIDEND DISTRIBUTION IN EXCESS OF STOCK BASIS IN JABIL CIRCUIT, INC	P	1997-07-22	2015-12-01

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
290,816		354,332	-63,516
96,859		118,016	-21,157
3		10	-7
		144,006	-144,006
		59,764	-59,764
577			577
4,608			4,608
9,156			9,156

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-63,516
			-21,157
			-7
			-144,006
			-59,764
			577
			4,608
			9,156

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THE RENAISSANCE PROJECT 5234 NORTH CLAIBORNE AVE NEW ORLEANS, LA 70117	NONE	N/P	GENERAL	1,000
THE MUSEUM OF MODERN ART 11 WEST 53RD STREET NEW YORK, NY 10019	NONE	N/P	GENERAL	5,000
SARATOGA PERFORMING ARTS CENTER 108 AVENUE OF THE PINES SARATOGA SPRINGS, NY 12866	NONE	N/P	GENERAL	500
BREAST CANCER RESEARCH FOUNDAION 60 EAST 56TH STREET 8TH FLOOR NEW YORK, NY 10022	NONE	N/P	GENERAL	2,500
SCULPTURE CENTER 44-19 PURVES STREET LONG ISLAND CITY, NY 11101	NONE	N/P	GENERAL	1,000
PALAMOUNTAIN SCHOLARSHIP FUND OFFICE OF ADVANCEMENT SKIDMORE COLLEGE 815 N BROADWAY SARATOGA SPRINGS, NY 12866	NONE	N/P	GENERAL	1,000
CAPITAL ROOTS 594 RIVER STREET TROY, NY 12180	NONE	N/P	GENERAL	600
HISTORIC ALBANY FOUNDATION 89 LEXINGTON AVE ALBANY, NY 12206	NONE	N/P	GENERAL	500
BOMB MAGAZINE 80 HANSON PLACE-703 BROOKLYN, NY 11217	NONE	N/P	GENERAL	5,000
INTERNATIONAL SCULPTURE CENTER 14 FAIRGROUNDS ROAD SUITE B HAMILTON, NJ 08619	NONE	N/P	GENERAL	1,500
BREAST CANCER RESEARCH FOUNDAION 60 EAST 56TH STREET 8TH FLOOR NEW YORK, NY 10022	NONE	N/P	GENERAL	50,000
CAPITAL CITY RESCUE MISSION 259 SOUTH PEARL STREET ALBANY, NY 12201	NONE	N/P	GENERAL	1,500
CATHOLIC CHARITIES OF THE DIOCESE OF ALBA 40 NORTH MAIN AVE ALBANY, NY 12203	NONE	N/P	GENERAL	1,000
THE COLLEGE OF SAINT ROSE 432 WESTERN AVE ALBANY, NY 12203	NONE	N/P	GENERAL	1,000
ALBANY INSTITUTE OF HISTORY & ART 125 WASHINGTON AVE ALBANY, NY 12210	NONE	N/P	GENERAL	500
<b>Total . . . . .</b>			<b>3a</b>	1,198,850

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
THE RENAISSANCE PROJECT 5234 NORTH CLAIBORNE AVE NEW ORLEANS, LA 70117	NONE	N/P	GENERAL	1,000
ADIRONDACK COUNCIL PO BOX D-2 ELIZABETHTOWN, NY 12932	NONE	N/P	GENERAL	2,500
THE BURKE MARSHALL FOUNDATION PO BOX 426 NEW HAVEN, CT 06502	NONE	N/P	GENERAL	1,000
FR LLOYD REBEYRO 4 PROCTOR COURT ALBANY, NY 12211	NONE	N/P	GENERAL	1,000
CAPITAL REGION SPONSOR-A-SCHOLAR 3 PINE WEST PLAZA SUITE 305 ALBANY, NY 12205	NONE	N/P	GENERAL	2,000
SECOND STAGE THEATRE 305 WEST 43RD STREET NEW YORK, NY 10036	NONE	N/P	GENERAL	1,500
COMMUNITY FOUNDATION-CAPITAL REGION SIX TOWER PLACE ALBANY, NY 12203	NONE	N/P	GENERAL	1,000
COLONIE POLICE BENEVOLENT ASSOCIATION IN PO BOX 457 NEWTONVILLE, NY 12128	NONE	N/P	GENERAL	250
FJC THE RUSSELL FERBER FOUNDATION C/O JORDAN FERBER 40 FIFTH AVE-APT 2A NEW YORK, NY 10011	NONE	N/P	GENERAL	300
BALLARD PARK FOUNDATION PO BOX 96 WESTPORT, NY 12993	NONE	N/P	GENERAL	500
NATIONAL PARK FOUNDATION 1110 VERMONT AVE NW SUITE 200 WASHINGTON, DC 20005	NONE	N/P	GENERAL	1,000
KICKSTARTER CAMPAIGN 58 KENT STREET BROOKLYN, NY 11222	NONE	N/P	GENERAL	3,000
CORPORATION OF YADDO 312 UNION AVE SARATOGA SPRINGS, NY 12866	NONE	N/P	GENERAL	2,500
ST PETER'S EPISCOPAL CHURCH 107 STATE STREET ALBANY, NY 12207	NONE	N/P	GENERAL	1,000
LIVING RESOURCES FOUNDATION 300 WASHINGTON AVE EXT ALBANY, NY 12203	NONE	N/P	GENERAL	1,000
<b>Total . . . . .</b>				1,198,850

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
WHALLONSBURG CIVIC ASSOCIATION WHALLONSBURG GRANGE PO BOX 54 ESSEX,NY 12936	NONE	N/P	GENERAL	300
ARCHIVES OF AMERICAN ART SMITHSONIAN INSTITUTION PO BOX 37012 MRC 937-SUITE 2200 WASHINGTON,DC 20013	NONE	N/P	GENERAL	3,000
CORPORATION OF YADDO 312 UNION AVE SARATOGA SPRINGS,NY 12866	NONE	N/P	GENERAL	10,000
THE NEXT STEP 2 HOLLAND AVE ALBANY,NY 12209	NONE	N/P	GENERAL	1,200
SHAKER MUSEUMMOUNT LEBANON PO BOX 630 NEW LEBANON,NY 12125	NONE	N/P	GENERAL	1,000
ALBANY INSTITUTE OF HISTORY & ART ATTN TAMMIS GROFT 125 WASHINGTON AVE ALBANY,NY 12210	NONE	N/P	GENERAL	10,000
CAPITAL ROOTS 594 RIVER STREET TROY,NY 12180	NONE	N/P	GENERAL	600
FAMILIES IN NEED OF ASSISTANCE INC 69 BROOKLINE AVE ALBANY,NY 12203	NONE	N/P	GENERAL	2,500
CROSS CATHOLIC OUTREACH PO BOX 273908 BOCA RATON,FL 33427	NONE	N/P	GENERAL	1,000
SCULPTURE CENTER 44-19 PURVES STREET LONG ISLAND CITY,NY 11101	NONE	N/P	GENERAL	1,500
BREAST CANCER RESEARCH FOUNDATION 60 EAST 56TH STREET 8TH FLOOR NEW YORK,NY 10022	NONE	N/P	GENERAL	2,500
ALBANY INSTITUTE OF HISTORY & ART ATTN TAMMIS GROFT 125 WASHINGTON AVE ALBANY,NY 12210	NONE	N/P	GENERAL	5,000
MUSEUM OF MODERN ART 11 WEST 53RD STREET NEW YORK,NY 10019	NONE	N/P	GENERAL	30,000
MUSEUM OF MODERN ART 11 WEST 53RD STREET NEW YORK,NY 10019	NONE	N/P	GENERAL	25,000
SECOND STAGE THEATRE 305 W 43RD STREET NEW YORK,NY 10036	NONE	N/P	GENERAL	25,000
<b>Total . . . . .</b>				1,198,850


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
CORPORATION OF YADDO 312 UNION AVE SARATOGA SPRINGS,NY 12866	NONE	N/P	GENERAL	10,000
METROPOLITAN MUSEUM OF ART 1000 FIFTH AVE NEW YORK,NY 10028	NONE	N/P	GENERAL	60,000
MUSEUM OF MODERN ART 11 WEST 53RD STREET NEW YORK,NY 10019	NONE	N/P	GENERAL	60,000
ADIRONDACK CHAPTER OF THE NATURE CONSERVA PO BOX 65 KEENE VALLEY,NY 12943	NONE	N/P	GENERAL	60,000
NATURE CONSERVANCY - BLOCK ISLAND PO BOX 1287 BLOCK ISLAND,RI 02807	NONE	N/P	GENERAL	20,000
NATIONAL TRUST FOR HISTORIC PRESERVATION 1785 MASSACHUSETTS AVE NW WASHINGTON,DC 20036	NONE	N/P	GENERAL	50,000
ADIRONDACK COUNCIL PO BOX D-2 ELIZABETHTOWN,NY 12932	NONE	N/P	GENERAL	1,000
ADIRONDACK MUSEUM PO BOX 99 BLUE MOUNTAIN LAKE,NY 12812	NONE	N/P	GENERAL	300
ALBANY-TULA ALLIANCE 5 MORNINGSIDE DRIVE DELMAR,NY 12054	NONE	N/P	GENERAL	1,000
ALBANY ACADEMY FOR GIRLS 135 ACADEMY ROAD ALBANY,NY 12208	NONE	N/P	GENERAL	2,000
ALBANY COUNTY HISTORICAL ASSOCIATION 9 TEN BROECK PLACE ALBANY,NY 12210	NONE	N/P	GENERAL	1,000
ALBANY INSTITUTE OF HISTORY & ART ATTN TAMMIS GROFT 125 WASHINGTON AVE ALBANY,NY 12210	NONE	N/P	GENERAL	5,000
ALBANY PUBLIC LIBRARY 161 WASHINGTON AVE ALBANY,NY 12210	NONE	N/P	GENERAL	1,000
ALBANY SYMPHONY ORCHESTRA 19 CLINTON AVE ALBANY,NY 12207	NONE	N/P	GENERAL	1,000
AMERICAN CANCER SOCIETY 260 OSBORNE ROAD LOUDONVILLE,NY 12211	NONE	N/P	GENERAL	1,000
<b>Total . . . . .</b>			<b>3a</b>	1,198,850

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
AMERICAN FARMLAND TRUST 1200 18TH STREET NW - SUITE 800 WASHINGTON,DC 20036	NONE	N/P	GENERAL	1,000
AMERICAN RED CROSS ALBANY CHAPTER-33 EVERETT ROAD ALBANY,NY 12205	NONE	N/P	GENERAL	1,000
SMITHSONIAN INSTITUTION ARCHIVES OF AMERICAN ART PO BOX 37012 MRC 937-SUITE 2200 WASHINGTON,DC 20013	NONE	N/P	GENERAL	1,000
BALLARD PARK FOUNDATION PO BOX 96 WESTPORT,NY 12993	NONE	N/P	GENERAL	1,000
BLOCK ISLAND HISTORICAL SOCIETY PO BOX 79 BLOCK ISLAND,RI 02807	NONE	N/P	GENERAL	1,000
BLOCK ISLAND MEDICAL CENTER 6 PAYNE ROAD BLOCK ISLAND,RI 02807	NONE	N/P	GENERAL	1,000
BREAST CANCER RESEARCH FOUNDAION 60 EAST 56TH STREET 8TH FLOOR NEWYORK,NY 10022	NONE	N/P	GENERAL	5,000
BROWN LEDGE FOUNDATION 25 WILSON STREET BURLINGTON,VT 05401	NONE	N/P	GENERAL	1,000
CAPITAL CITY RESCUE MISSION 259 SOUTH PEARL STREET ALBANY,NY 12201	NONE	N/P	GENERAL	2,000
CAPITAL DISTRICT COMMUNITY GARDENS 40 RIVER STREET TROY,NY 12180	NONE	N/P	GENERAL	1,000
CAPITAL REPERTORY THEATRE 111 NORTH PEARL STREET ALBANY,NY 12207	NONE	N/P	GENERAL	2,000
CHAMPLAIN AREA TRAILS PO BOX 193 WESTPORT,NY 12993	NONE	N/P	GENERAL	1,000
CHURCH OF GOD OF PROPHECY 774 MADISON AVE ALBANY,NY 12208	NONE	N/P	GENERAL	2,000
COLONIE POLICE BENEVOLENT ASSOCIATION IN PO BOX 457 NEWTONVILLE,NY 12128	NONE	N/P	GENERAL	1,000
DOUBLE H HOLE IN THE WOODS 97 HIDDEN VALLEY ROAD LAKE LUZERNE,NY 12846	NONE	N/P	GENERAL	3,000
<b>Total . . . . .</b>				1,198,850

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THE DRAWING CENTER 35 WOOSTER STREET NEW YORK, NY 10013	NONE	N/P	GENERAL	1,000
EAKINS PRESS FOUNDATION 20 WEST 44TH STREET 405 NEW YORK, NY 10036	NONE	N/P	GENERAL	500
ECHO PO BOX 250 ESSEX, NY 12936	NONE	N/P	GENERAL	1,000
ELIZABETHTOWN COMMUNITY HOSPITAL PO BOX 277 ELIZABETHTOWN, NY 12932	NONE	N/P	GENERAL	2,000
FAMILIES IN NEED OF ASSISTANCE INC 69 BROOKLINE AVE ALBANY, NY 12203	NONE	N/P	GENERAL	2,000
FRESH AIR FUND 633 THIRD AVE - 14TH FLOOR NEW YORK, NY 10017	NONE	N/P	GENERAL	1,000
ALBANY RURAL CEMETARY CEMETARY AVENUE ALBANY, NY 12204	NONE	N/P	GENERAL	5,000
GARDEN CONSERVANCY PO BOX 219 COLD SPRING, NY 10516	NONE	N/P	GENERAL	2,500
GIRLS INC OF THE GREATER CAPITAL REGION 962 ALBANY STREET SCHENECTADY, NY 12307	NONE	N/P	GENERAL	3,000
GREATER LOUDONVILLE ASSOCIATION PO BOX 11144 LOUDONVILLE, NY 12211	NONE	N/P	GENERAL	1,000
HIGH PEAKS HOSPICE & PALLIATIVE CARE INC 79 GLENWOOD AVE QUEENSBURY, NY 12804	NONE	N/P	GENERAL	5,000
HISTORIC ALBANY FOUNDATION 89 LEXINGTON AVE ALBANY, NY 12206	NONE	N/P	GENERAL	5,000
HISTORIC CHERRY HILL 523 1/2 SOUTH PEARL STREET ALBANY, NY 12202	NONE	N/P	GENERAL	3,000
INTERFAITH PARTNERSHIP FOR THE HOMELESS 176 SHERIDAN AVE ALBANY, NY 12210	NONE	N/P	GENERAL	3,000
LAKE CHAMPLAIN COMMITTEE 106 MAIN STREET - SUITE 200 BURLINGTON, VT 05401	NONE	N/P	GENERAL	1,000
<b>Total . . . . .</b>  <b>3a</b>				1,198,850

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
THE LAUNDROMAT PROJECT INC 127 WEST 127TH STREET SUITE 324 NEW YORK,NY 10027	NONE	N/P	GENERAL	1,000
LITERACY VOLUNTEERS OF AMERICA-ALBANY IN 1450 WESTERN AVE - SUITE 101 ALBANY,NY 12205	NONE	N/P	GENERAL	2,000
MAKE-A-WISH FOUNDATION 711 EAST NORTHERN AVE PHOENIX,AZ 85020	NONE	N/P	GENERAL	1,000
MEALS ON WHEELS 20 RENNSELAER STREET ALBANY,NY 12202	NONE	N/P	GENERAL	1,000
THE MOUNT SINAI MEDICAL CENTER ONE GUSTAVE L LEVY PLACE PO BOX 1049 NEW YORK,NY 10029	NONE	N/P	GENERAL	1,000
NATIONAL MUSEUM OF WOMEN IN THE ARTS 1250 NY AVENUE NW WASHINGTON,DC 20005	NONE	N/P	GENERAL	1,000
NATIONAL PUBLIC RADIO 1111 NORTH CAPITOL STREET NE WASHINGTON,DC 20002	NONE	N/P	GENERAL	10,000
NEW-YORK HISTORICAL SOCIETY 170 CENTRAL PARK WEST NEW YORK,NY 10024	NONE	N/P	GENERAL	10,000
NYS TROOPER FOUNDATION 3 AIRPORT PARK BLVD LATHAM,NY 12110	NONE	N/P	GENERAL	2,000
THE OLANA PARTNERSHIP PO BOX 199 HUDSON,NY 12534	NONE	N/P	GENERAL	1,000
PRESERVATION LEAGUE OF NEW YORK STATE 44 CENTRAL AVE ALBANY,NY 12206	NONE	N/P	GENERAL	10,000
RENSSELAER COUNTY HISTORICAL SOCIETY 57 SECOND STREET TROY,NY 12180	NONE	N/P	GENERAL	1,000
RUNYAN - WINCHELL CANCER FUND ONE EXCHANGE PLAZA 55 BROADWAY-SUIT 302 NEW YORK,NY 10006	NONE	N/P	GENERAL	1,000
SARATOGA AUTOMOBILE MUSEUM 110 AVENUE OF THE PINES SARATOGA SPRINGS,NY 12866	NONE	N/P	GENERAL	500
SHAKER FIRE DEPARTMENT 550 ALBANY SHAKER ROAD LOUDONVILLE,NY 12211	NONE	N/P	GENERAL	1,000
<b>Total . . . . .</b>				1,198,850



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
SHAKER HERITAGE SOCIETY 25 MEETING HOUSE ROAD ALBANY, NY 12211	NONE	N/P	GENERAL	1,000
ST ANDREWS ROMAN CATHOLIC CHURCH PO BOX 279 BLOCK ISLAND, RI 02807	NONE	N/P	GENERAL	3,000
ST ELIZABETH'S CHURCH PO BOX 368 ELIZABETHTOWN, NY 12932	NONE	N/P	GENERAL	2,000
ST MARY'S 10 LODGE STREET ALBANY, NY 12207	NONE	N/P	GENERAL	5,000
ST PETER'S HOSPITAL FOUNDATION 319 SOUTH MANNING BLVD - SUITE 309 ALBANY, NY 12208	NONE	N/P	GENERAL	1,000
ST PIUS 23 CRUMITE ROAD LOUDONVILLE, NY 12211	NONE	N/P	GENERAL	3,000
THE NEXT STEP 2 HOLLAND AVE ALBANY, NY 12209	NONE	N/P	GENERAL	5,000
TIMES UNION HOPE FUND PO BOX 15000 ALBANY, NY 12212	NONE	N/P	GENERAL	1,000
VASSAR COLLEGE ALUMNAE AFFAIRS - PO BOX 725 POUGHKEEPSIE, NY 12604	NONE	N/P	GENERAL	10,000
VERMONT PUBLIC TELEVISION 20 ETHAN ALLEN AVE COLCHESTER, VT 05446	NONE	N/P	GENERAL	1,000
WADHAMS FREE LIBRARY 763 NYS ROUTE 22 WADHAMS, NY 12993	NONE	N/P	GENERAL	1,000
WAMC NORHTEAST PUBLIC RADIO 318 CENTRAL AVE ALBANY, NY 12206	NONE	N/P	GENERAL	5,000
WMHT 4 GLOBAL VIEW TROY, NY 12180	NONE	N/P	GENERAL	5,000
WESTPORT DEPOT THEATRE PO BOX 414 WESTPORT, NY 12993	NONE	N/P	GENERAL	1,000
WESTPORT RESCUE PO BOX 375 WESTPORT, NY 12993	NONE	N/P	GENERAL	500
<b>Total . . . . .</b>			<b>3a</b>	1,198,850

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WESTPORT TOWN LIBRARY PO BOX 436 WESTPORT,NY 12993	NONE	N/P	GENERAL	3,000
WILDWOOD FOUNDATION 2995C CURRY ROAD EXTENSION SCHENECTADY,NY 12303	NONE	N/P	GENERAL	1,000
THE WOMEN'S FUND OF THE CAPITAL REGION SIX TOWER PLACE ALBANY,NY 12203	NONE	N/P	GENERAL	1,000
LAKES TO LOCKS PASSAGE INC C/O WESTPORT HERITAGE HOUSE PO BOX 394 WESTPORT,NY 12993	NONE	N/P	GENERAL	300
THE STUDIO MUSEUM IN HARLEM 144 WEST 125TH STREET NEW YORK,NY 10027	NONE	N/P	GENERAL	1,000
THE NATIONAL WORLD WAR II MUSEUM NATIONAL PROCESSING CENTER PO BOX 97336 WASHINGTON,DC 20090	NONE	N/P	GENERAL	5,000
BOMB 80 HANSON PLACE-703 BROOKLYN,NY 11217	NONE	N/P	GENERAL	1,000
THE BOGLIASCO FOUNDATION 1 EAST 53RD STREET 10TH FLOOR NEW YORK,NY 10022	NONE	N/P	GENERAL	2,500
CATHOLIC CHARITIES OF SOUTHEAST TEXAS 2780 EASTEX FREEWAY BEAUMONT,TX 77703	NONE	N/P	GENERAL	2,000
CORPORATION OF YADDO 312 UNION AVE SARATOGA SPRINGS,NY 12866	NONE	N/P	GENERAL	100,000
SECOND STAGE THEATRE 305 W 43RD STREET NEW YORK,NY 10036	NONE	N/P	GENERAL	50,000
ALBANY MEDICAL CENTER 43 NEW SCOTLAND AVE - MC 119 ALBANY,NY 12208	NONE	N/P	GENERAL	400,000
<b>Total . . . . .</b>				1,198,850

**TY 2015 Accounting Fees Schedule****Name:** DAVID AND CANDACE WEIR FOUNDATION

C/O CL KING &amp; ASSOCIATES INC

**EIN:** 13-3797919

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	4,500	1,125		3,375

TY 2015 Investments Corporate Stock Schedule

**Name:** DAVID AND CANDACE WEIR FOUNDATION  
C/O CL KING & ASSOCIATES INC  
**EIN:** 13-3797919

Name of Stock	End of Year Book Value	End of Year Fair Market Value
49,728 SHS JABIL CIRCUIT, INC.	997,464	1,158,165
30,000 SHS KIRKLANDS, INC.	340,800	435,000
44,754 SHS VIASYSTEMS GROUP, INC.	0	0
40,000 SHS BEBE STORES, INC.	251,052	22,600
40,000 SHS CRAY, INC.	209,252	1,298,000
30,000 SHS FINISH LINE, INC.	426,898	542,400
5,246 SHS VIASYSTEMS GROUP, INC.	0	0
50,000 SHS STAGE STORES, INC.	662,507	455,500
70,000 SHS TTM TECHNOLOGIES, INC.	700,101	455,700
80,600 SHS NEW YORK & CO., INC.	285,783	184,574
5,000 SHS FOSSIL, INC.	530,000	182,800
10,000 SHS STEINER LEISURE LIMITED	0	0
50,000 SHS RUDOLPH TECHNOLOGIES INC.	554,337	711,000
60,000 SHS BEBE STORES, INC.	322,526	33,900
20,000 SHS FINISAR CORP.	0	0
119,400 SHS NEW YORK & CO., INC.	498,060	273,426
40,000 SHS ALLSCRIPTS HEALTHCARE SOLUTIONS, INC.	544,538	615,200
10,000 SHS BROWN SHOE COMPANY	233,134	268,200
100,000 SHS EXTREME NETWORKS	460,691	408,000
20,000 SHS FINISAR CORP.	0	0
13,900 SHS GLOBUS MEDICAL INC. CL A NEW	328,549	386,698
10,000 SHS KAPSTONE PAPER	254,942	225,900
30,000 SHS MITEL NETWORKS CORP.	300,746	230,700
40,000 SHS SILICON GRAPHICS INTERNATIONAL CORP.	435,829	236,000
80,000 SHS TGC INDS INC.	0	0
30,000 SHS TTM TECHNOLOGIES, INC.	250,403	195,300
1,780 SHS VALEANT PHARMACEUTICALS INTERNATIONAL	234,310	180,937
137,272 SHS JABIL CIRCUIT, INC.	2,788,477	3,197,065
30,000 SHS AVID TECHNOLOGY, INC.	355,063	218,700
6,100 SHS GLOBUS MEDICAL INC. CL A NEW	170,906	169,702

Name of Stock	End of Year Book Value	End of Year Fair Market Value
80,000 SHS JABIL CIRCUIT, INC.	1,914,800	1,863,200
20,000 SHS MITEL NETWORKS CORP.	209,535	153,800
40,000 SHS STEIN MART INC.	275,785	269,200
35,300 SHS TTM TECHNOLOGIES, INC.	348,764	229,803

**TY 2015 Investments - Other Schedule****Name:** DAVID AND CANDACE WEIR FOUNDATION

C/O CL KING &amp; ASSOCIATES INC

**EIN:** 13-3797919

Category / Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
PCM PARTNERS LP, II	AT COST	6,218,810	6,446,909
PCM PARTNERS INTERNATIONAL, LTD.-PARTNERSHIP INTEREST	AT COST	2,400,000	7,863,512
ARTWORK	AT COST	1,014,937	1,014,937

**TY 2015 Other Expenses Schedule****Name:** DAVID AND CANDACE WEIR FOUNDATION

C/O CL KING &amp; ASSOCIATES INC

**EIN:** 13-3797919

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADMINISTRATIVE EXPENSES	8,609	2,152		6,457
INSURANCE - ARTWORK	1,330	1,330		0
STORAGE FEES - ARTWORK	4,154	4,154		0
INVESTMENT FEE EXPENSES	6,985	6,985		0
PENALTIES & INTEREST	289	0		0

# TY 2015 Other Income Schedule

**Name:** DAVID AND CANDACE WEIR FOUNDATION

C/O CL KING & ASSOCIATES INC

**EIN:** 13-3797919

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
REFUND OF EXCISE TAX ON INVESTMENT INCOME	1,585		1,585



**TY 2015 Taxes Schedule****Name:** DAVID AND CANDACE WEIR FOUNDATION

C/O CL KING &amp; ASSOCIATES INC

**EIN:** 13-3797919

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX ON INVESTMENT INCOME	474	0		0
FEDERAL TAXES	16,956	0		0
NYS TAXES	250	250		250

<b>Schedule B</b> (Form 990, 990-EZ, or 990-PF)  Department of the Treasury Internal Revenue Service	<b>Schedule of Contributors</b>  ▶ <b>Attach to Form 990, 990-EZ, or 990-PF.</b>  ▶ <b>Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <u>www.irs.gov/form990</u>.</b>	OMB No 1545-0047  <b>2015</b>

<b>Name of the organization</b> DAVID AND CANDACE WEIR FOUNDATION C/O CL KING & ASSOCIATES INC	<b>Employer identification number</b> 13-3797919
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Organization type (check one)

<b>Filers of:</b>	<b>Section:</b>
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)( ) (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.  
**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

- ☒
- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

- ☐
- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
- ☐
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III
- ☐
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc , contributions totaling \$5,000 or more during the year . . . . . ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer “No” on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

<b>Name of organization</b> DAVID AND CANDACE WEIR FOUNDATION C/O CL KING & ASSOCIATES INC	<b>Employer identification number</b> 13-3797919
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Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CANDACE WEIR	\$ 1,914,800	Person <input type="checkbox"/>
	9 ELK STREET		Payroll <input type="checkbox"/>
	ALBANY, NY 12207		Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )

<b>Name of organization</b> DAVID AND CANDACE WEIR FOUNDATION C/O CL KING & ASSOCIATES INC	<b>Employer identification number</b> 13-3797919
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Part II

Noncash Property

(see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	76,097 90 SH JABIL CIRCUIT, INC	\$ 1,914,800	2015-12-24
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

<b>Name of organization</b> DAVID AND CANDACE WEIR FOUNDATION C/O CL KING & ASSOCIATES INC	<b>Employer identification number</b> 13-3797919
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Part III

*Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed

(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
-			
-			
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-			
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
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(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
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(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
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Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
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