



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 (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing . . . . .			
	2	Savings and temporary cash investments . . . . .	219,265	92,790	92,790
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (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)	518,413	0	
	b	Investments—corporate stock (attach schedule) . . . . .	6,833,944	7,339,693	10,839,410
	c	Investments—corporate bonds (attach schedule) . . . . .	2,501,340	2,827,000	2,866,437
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans . . . . .			
	13	Investments—other (attach schedule) . . . . .			
	14	Land, buildings, and equipment basis ▶ 109,664 Less accumulated depreciation (attach schedule) ▶ 80,972	40,605	28,692	28,692
15	Other assets (describe ▶ _____)				
16	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	10,113,567	10,288,175	13,827,329	
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 ▶ _____)	5,781	6,167	
	23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	5,781	6,167	
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>				
	24	Unrestricted . . . . .	10,107,786	10,282,008	
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 27 through 31.</b>				
	27	Capital stock, trust principal, or current funds . . . . .			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	<b>Total net assets or fund balances</b> (see instructions) . . . . .	10,107,786	10,282,008	
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) .	10,113,567	10,288,175		

**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	10,107,786
2	Enter amount from Part I, line 27a	2	73,870
3	Other increases not included in line 2 (itemize) ▶ _____	3	100,352
4	Add lines 1, 2, and 3	4	10,282,008
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	10,282,008

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e g , real estate, 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 )
<b>1 a CAPITAL GAIN DISTRIBUTIONS</b>	P	2017-01-01	2017-12-31
<b>b CAPITAL GAIN DISTRIBUTIONS</b>	P	2016-12-31	2017-12-31
<b>c PUBLICLY TRADED SECURITIES</b>	P	2016-12-31	2017-12-31
<b>d</b>			
<b>e</b>			

(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)
<b>a</b> 81,921	0	0	81,921
<b>b</b> 228,523	0	0	228,523
<b>c</b> 2,367,621	0	1,887,901	479,720
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(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	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
<b>a</b> 0	0	0	81,921
<b>b</b> 0	0	0	228,523
<b>c</b> 0	0	0	479,720
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	<b>2</b>	790,164
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		<b>3</b>	81,921

**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))
2016	2,387,274	12,830,477	0 186063
2015	2,411,127	13,359,600	0 180479
2014	2,551,823	14,135,270	0 180529
2013	2,157,073	12,962,663	0 166407
2012	2,169,031	12,188,266	0 177961

<b>2</b> Total of line 1, column (d)	<b>2</b>	0 891439
<b>3</b> 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	<b>3</b>	0 178288
<b>4</b> Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	<b>4</b>	13,073,910
<b>5</b> Multiply line 4 by line 3	<b>5</b>	2,330,921
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	9,535
<b>7</b> Add lines 5 and 6	<b>7</b>	2,340,456
<b>8</b> Enter qualifying distributions from Part XII, line 4	<b>8</b>	2,354,855

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 instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	9,535
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	9,535
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	9,535
<b>6</b>	Credits/Payments		
<b>a</b>	2017 estimated tax payments and 2016 overpayment credited to 2017	<b>6a</b>	8,400
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	8,400
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	<b>8</b>	17
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	<b>9</b>	1,152
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	<b>10</b>	
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2018 estimated tax</b> <input type="checkbox"/> 0 <b>Refunded</b> <input type="checkbox"/>	<b>11</b>	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> 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? . . . . .	<b>1a</b>	No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . <i>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</i>	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities</i>	<b>2</b>	No
<b>3</b> 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? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>	<b>5</b>	No
<b>6</b> 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? . . . . .	<b>6</b>	Yes
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i> . . . . .	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> NY		
<b>b</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? <i>If "No," attach explanation</i> .	<b>8b</b>	Yes
<b>9</b> 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 2017 or the taxable year beginning in 2017 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i> . . . . .	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> . . . . .	<b>10</b>	No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	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).	<b>11</b>		<b>No</b>
<b>12</b>	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)	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>WWW RCSHELDONFOUNDATION ORG</b>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of <b>LINDA SWANSON EXECUTIVE DIRECTOR</b> Telephone no <b>(716) 664-9890</b>			

Located at **217 NORTH MAIN STREET JAMESTOWN NY** ZIP+4 **14701**

<b>15</b>	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 . . . . . <b>15</b>		
<b>16</b>	At any time during calendar year 2017, 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 <b>▶</b>	<b>16</b>	<b>Yes</b> <b>No</b>

**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.**

<b>1a</b>	During the year did the foundation (either directly or indirectly)		<b>Yes</b>	<b>No</b>
	(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 checked="" type="checkbox"/> Yes <input 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>b</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"/> <b>1b</b>			<b>No</b>
<b>c</b>	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 2017? <input type="checkbox"/> <b>1c</b>			<b>No</b>
<b>2</b>	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))			
<b>a</b>	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <b>▶ 20____, 20____, 20____, 20____</b>			
<b>b</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). <input type="checkbox"/> <b>2b</b>			
<b>c</b>	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 <b>▶ 20____, 20____, 20____, 20____</b>			
<b>3a</b>	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>b</b>	If "Yes," did it have excess business holdings in 2017 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? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>3b</b>			
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? <b>4a</b>			<b>No</b>
<b>b</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 2017? <b>4b</b>			<b>No</b>

**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

<b>5a</b>	<p>During the year did the foundation pay or incur any amount to</p> <p><b>(1)</b> Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>(2)</b> Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>(3)</b> Provide a grant to an individual for travel, study, or other similar purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>(4)</b> Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>(5)</b> Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			
<b>b</b>	<p>If any answer is "Yes" to 5a(1)–(5), did <b>any</b> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			
<b>c</b>	<p>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? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i></p>			
<b>6a</b>	<p>Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<b>6b</b>		<b>No</b>
<b>b</b>	<p>Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><i>If "Yes" to 6b, file Form 8870</i></p>			
<b>7a</b>	<p>At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<b>7b</b>		
<b>b</b>	<p>If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>			

**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
See Additional Data Table				

**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	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				

**Total** number of other employees paid over \$50,000. . . . . **0**

**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		

**Total** number of others receiving over \$50,000 for professional services. . . . . **0**

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
<b>1</b> N/A	<b>0</b>
<b>2</b>	<b>0</b>
<b>3</b>	<b>0</b>
<b>4</b>	<b>0</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>	
<b>Total.</b> Add lines 1 through 3	

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	13,118,419
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	154,586
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	13,273,005
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	13,273,005
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	199,095
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	13,073,910
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	653,696

**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.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	653,696
<b>2a</b>	Tax on investment income for 2017 from Part VI, line 5.	<b>2a</b>	9,535
<b>b</b>	Income tax for 2017 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	9,535
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	644,161
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	
<b>5</b>	Add lines 3 and 4.	<b>5</b>	644,161
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	644,161

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	2,354,855
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	2,354,855
<b>5</b>	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).	<b>5</b>	9,535
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	2,345,320

**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 2016	(c) 2016	(d) 2017
<b>1</b> Distributable amount for 2017 from Part XI, line 7				644,161
<b>2</b> Undistributed income, if any, as of the end of 2017				
<b>a</b> Enter amount for 2016 only. . . . .			508,971	
<b>b</b> Total for prior years 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2017				
<b>a</b> From 2012. . . . .				
<b>b</b> From 2013. . . . .				
<b>c</b> From 2014. . . . .				
<b>d</b> From 2015. . . . .				
<b>e</b> From 2016. . . . .				
<b>f</b> Total of lines 3a through e. . . . .				
<b>4</b> Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ <u>2,354,855</u>				
<b>a</b> Applied to 2016, but not more than line 2a			508,971	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	1,636,969			
<b>d</b> Applied to 2017 distributable amount. . . . .				208,915
<b>e</b> Remaining amount distributed out of corpus				
<b>5</b> Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a) )				
<b>6 Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,636,969			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .				
<b>c</b> 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. . . . .				
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .				
<b>e</b> Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .				
<b>f</b> Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018 . . . . .				435,246
<b>7</b> 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). . . . .	1,636,969			
<b>8</b> Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions). . . . .				
<b>9 Excess distributions carryover to 2018.</b> Subtract lines 7 and 8 from line 6a . . . . .				
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2013. . . . .				
<b>b</b> Excess from 2014. . . . .				
<b>c</b> Excess from 2015. . . . .				
<b>d</b> Excess from 2016. . . . .				
<b>e</b> Excess from 2017. . . . .				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

<b>1a</b> If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling. . . . . ▶					
<b>b</b> Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
<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 . . . . .	Tax year	Prior 3 years			(e) Total
	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
<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					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> 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					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> 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.)**

<b>1 Information Regarding Foundation Managers:</b>	
<b>a</b> 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) ) NONE	
<b>b</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 NONE	
<div style="text-align: right;">▶</div>	
<b>2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:</b>	
Check here <input type="checkbox"/> 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	
<b>a</b> The name, address, and telephone number or e-mail address of the person to whom applications should be addressed LINDA SWANSON 217 NORTH MAIN STREET JAMESTOWN, NY 14701 (716) 664-9890	
<b>b</b> The form in which applications should be submitted and information and materials they should include SEE THE FOLLOWING WEB ADDRESS HTTP //WWW CHAUTAUQUAGRANTS ORG/	
<b>c</b> Any submission deadlines SEE THE FOLLOWING WEB ADDRESS HTTP //WWW CHAUTAUQUAGRANTS ORG/	
<b>d</b> Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors GEOGRAPHICAL, SOUTHERN CHAUTAUQUA COUNTY, NEW YORK	

**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)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . . ▶ 3a</b>				2,227,888
<b>b</b> <i>Approved for future payment</i> See Additional Data Table				
<b>Total . . . . . ▶ 3b</b>				1,659,920

Enter gross amounts unless otherwise indicated

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2017)

### Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		Yes	No
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1a(1)	No
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<b>1a(1)</b>	<b>No</b>
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1a(2)	No
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1b(1)	No
-------	----

<b>1b(1)</b>	<b>No</b>
--------------	-----------

<b>1b(2)</b>	<b>No</b>
--------------	-----------

<b>1b(3)</b>		<b>No</b>
--------------	--	-----------

<b>1b(4)</b>		<b>No</b>
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<b>1b(5)</b>		<b>No</b>
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<b>1b(6)</b>		<b>No</b>
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1c		No
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value  
ue

[illegible]

described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**Sign  
Here**

\* \* \* \* \*


Title

(see instr )? ☐ Yes ☐ No

Form **990-PF** (2017)

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(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
MARK I HAMPTON	SECRETARY 1 00	0	0	0
217 NORTH MAIN STREET JAMESTOWN, NY 14701				
PETER B SULLIVAN	PRESIDENT 1 00	0	0	0
217 NORTH MAIN STREET JAMESTOWN, NY 14701				
ALEXIS T SINGLETON	ASSISTANT TREASURER 1 00	0	0	0
217 NORTH MAIN STREET JAMESTOWN, NY 14701				
BETSY SHULTS	VICE-PRESIDENT 1 00	0	0	0
217 NORTH MAIN STREET JAMESTOWN, NY 14701				
BARCLAY O WELLMAN	DIRECTOR EMERITUS 1 00	0	0	0
217 NORTH MAIN STREET JAMESTOWN, NY 14701				
KELLY A DAWSON	TREASURER 1 00	0	0	0
217 NORTH MAIN STREET JAMESTOWN, NY 14701				
RAYMOND J FASHANO	VICE PRESIDENT 1 00	0	0	0
217 NORTH MAIN STREET JAMESTOWN, NY 14701				
LINDA SWANSON	EXECUTIVE DIRECTOR 40 00	108,100	18,114	0
217 NORTH MAIN STREET JAMESTOWN, NY 14701				
THOMAS M BECKER	VICE PRESIDENT 1 00	0	0	0
217 NORTH MAIN STREET Jamestown, NY 14701				

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>				
ALLEGHENY HIGHLANDS COUNCIL INC 50 HOUGH HILL RD FALCONER, NY 14733		501(C) 3	DIRECTOR/STAFF UNRESTRICTED GRANTS	1,500
AMERICAN RED CROSS OF SOUTHWESTERN NY 325 E FOURTH ST JAMESTOWN, NY 14701		501(C)(3)	HUMANITARIAN VEHICLE PURCHASEDIRECTOR/STAFF UNRESTRICTED GRANTS	11,125
AUDUBON COMMUNITY NATURE CENTER RD5 RIVERSIDE RD JAMESTOWN, NY 14701		501 (C) 3	2017 CAPITAL PROJECTSDIRECTOR/STAFF UNRESTRICTED	21,250
CHAUTAUQUA ADULT DAYCARE CENTER INC 358 E FIFTH ST JAMESTOWN, NY 14701		501 (C) 3	ALZHEIMER PROGRAM FLOORING PROJECTTRANSPORTATION PROJECT	15,637
BEMUS BAY POPS INCPO BOX 9250 BEMUS POINT, NY 14712		501(C)(3)	DIRECTOR/STAFF UNRESTRICTED GRANTS	1,500
<b>Total . . . . .</b> 				2,227,888
<b>3a</b>				

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>				
BEMUS POINT UNITED METHODIST 4954 BEMUS-ELLERY ROAD BEMUS POINT, NY 14712		501(C)3	DIRECTOR/STAFF UNRESTRICTED GRANTSROYAL FAMILY KIDS' CAMP	1,000
CAMP GROSS FOUNDATION INC 8175 ROUTE 60 NORTH CASSADAGA, NY 14718		501(c)(3)	DIRECTOR/STAFF UNRESTRICTED GRANTS	250
CHAUTAUQUA AREA HABITAT FOR HUMANITY 2 ACADEMY STREET MAYVILLE, NY 14757		501(C) 3	DIRECTOR/STAFF UNRESTRICTED GRANTS	500
CHAUTAUQUA CONNECTIONS INC 92 FAIRMOUNT AVE JAMESTOWN, NY 14701		501(C)3	EX DIR DISC GRANTSUMMER PRE-K INSTITUTE	2,500
CHAUTAUQUA AREA SCHOLARSHIP PROGRAM C/O 128 SCHOOL AVE JAMESTOWN, NY 14701		501(C)3	DISCRETIONARY GRANT	700
<b>Total . . . . .</b> ► <b>3a</b>				2,227,888



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>				
CHAUTAUQUA BLIND ASSOCIATION 510 W FIFTH ST JAMESTOWN, NY 14701		501(C)(3)	EARLY VISION ASSESS/INTERVENTION PROGDISCRETIONARY GRANT	20,890
CHAUTAUQUA CHILDREN'S SAFETY VILLAGE 2695 ROUTE 394 ASHVILLE, NY 14710		501(C)(3)	TRAINING PROGRAMED DISC EMER RESPONSE BABYSITTER	2,500
CHAUTAUQUA CO DIRECTOR OF FINANCE 3 N ERIE STREET MAYVILLE, NY 14757		501(C)(3)	CORNELL COOP EXTN AGRICULTURAL PROGRAM(PAID VIA CHAUT CO RESOLUTION J178-17)	16,500
CHAUTAUQUA CO HUMANE SOCIETY 2825 STRUNK ROAD JAMESTOWN, NY 14701		501(C)(3)	DISCRETIONARY GRANT	2,000
CHAUTAUQUA INSTITUTIONPO BOX 28 CHAUTAUQUA, NY 14722		501(C)(3)	AMPHITHERTER RENOVATIONSANNUAL FUND DRIVEDISCRETIONARY GRANT	201,950
<b>Total . . . . .</b> ► <b>3a</b>				2,227,888

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>				
CHAUTAUQUA LAKE & WATERSHED MGMT ALLIANCE 201 W THIRD ST JAMESTOWN, NY 14701		501(C)(3)	DISCRETIONARY GRANT	1,400
CHAUTAUQUA LAKE ASSOCIATION INC 429 EAST TERRACE AVE LAKEWOOD, NY 14750		501(C)(3)	DISCRETIONARY GRANTS2017 LAKE MAINTENENCE	70,250
CHAUTAUQUA LAKE COMMUNITY SAILNG FOUNDATION PO BOX 291 LAKEWOOD, NY 14750		501(c)(3)	DISCRETIONARY GRANTS	500
CHAUTAUQUA LAKE PARTNERSHIP INC PO BOX 81 LAKEWOOD, NY 14750		501(c)(3)	DISCRETIONARY GRANT	1,000
CHAUTAUQUA LAKE ROWING ASSOCIATION INC PO BOX 824 JAMESTOWN, NY 14701		501(C)(3)	DISCRETIONARY GRANT	500
<b>Total . . . . .</b> <b>3a</b>				2,227,888

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>				
CHAUTAUQUA OPPORTUNITIES INC 17 W COURTNEY ST DUNKIRK, NY 14048		501(C)(3)	ED DISC IMPROVEMENTS TO THE SAFEHOUSE OF CHAUTAUQUA COUNTY	1,700
CHAUTAUQUA REGION COMMUNITY FOUNDATION 418 SPRING ST JAMESTOWN, NY 14701		501(C)(3)	DISCRETIONARY GRANTS	4,250
CHAUTAUQUA REGIONAL YOUTH BALLET 21 E THIRD ST 3 FLOOR JAMESTOWN, NY 14701		501(C)(3)	ED DISC EMERGENCY FUNDINGPROGRAM SUPPORTDISCRETIONARY GRANT	22,750
CHAUTAUQUA REGIONAL YOUTH SYMPHONY PO BOX 3454 JAMESTOWN, NY 14702		501(C)(3)	2017 DIRECTOR HONORARIUMDISCRETIONARY GRANT	3,750
CHAUTAUQUA SPORTS HALL OF FAME PO BOX 1192 JAMESTOWN, NY 14702		501(C)(3)	DISCRETIONARY GRANT	500
<b>Total . . . . .</b> <b>3a</b>				2,227,888

**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>				
CHAUTAUQUA STRIDERS 301 E SECOND ST SUITE 102 JAMESTOWN, NY 14701		501(C)(3)	PROGRAM SUPPORTDISCRETIONARY GRANT	81,000
CHAUTAUQUA WATERSHED CONSERVANCY INC 413 NORTH MAIN ST JAMESTOWN, NY 14701		501(C)(3)	DISCRETIONARY GRANTS	1,550
COMMUNITY HELPING HANDS INC 31 WATER STREET JAMESTOWN, NY 14701		501(C)(3)	WORKFORCE DEVELOPMENT PROJECT	10,000
COMMUNITY MUSIC PROJECT INC 715 FALCONER ST BLDG D JAMESTOWN, NY 14701		501(C)(3)	DISCRETIONARY GRANTS	2,250
CRECHE INCPO BOX 0601 JAMESTOWN, NY 14702		501(C)(3)	DISCRETIONARY GRANT	190
<b>Total . . . . . ▶</b> <b>3a</b>				2,227,888

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>				
DREAM IT DO IT WESTERN NEW YORK 101 W MAIN ST FALCONER, NY 14733		501(C)(3)	OPERATING EXPENSESDISCRETIONARY GRANT	22,750
ERIE 2 CHAU-CATT BOCES EDUCATION FOUNDATION 9520 FREDONIA-STOCKTON RD FREDONIA, NY 14063		501(C)(3)	ED DISC STUDENT SUPPORT PROGRAM	2,500
FALCONER PUBLIC LIBRARY 101 W MAIN ST FALCONER, NY 14733		501(C)(3)	DISCRETIONARY GRANT	500
FENTON HISTORY CENTER 67 WASHINGTON ST JAMESTOWN, NY 14701		501(C)(3)	DISCRETIONARY GRANTS	1,450
FIRST PRESBYTERIAN CHURCH 509 PRENDERGAST AVE JAMESTOWN, NY 14701		501(C)(3)	MINISTER'SDISCRETIONARY FUND	1,000
<b>Total . . . . .</b> ► <b>3a</b>				2,227,888


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>				
FRESH START RECOVERY SUPPORT CENTER INC 4252 LOWER BUSH RD KENNEDY, NY 14747		501(C)(3)	DISCRETIONARY GRANT	1,000
FOOD BANK OF WNY91 HOLT STREET BUFFALO, NY 14206		501(C) 3	DISCRETIONARY GRANT	250
FRIENDS OF CHILD ADVOCACY PROGRAM 405 WEST THIRD STREET JAMESTOWN, NY 14701		501(C) 3	DISCRETIONARY GRANT	750
FRIENDS OF LAKEVIEW CEMETERY INC 907 LAKEVIEW AVE JAMESTOWN, NY 14701		501(C)3	DISCRETIONARY GRANT	2,000
GIRL SCOUTS OF WNY 3332 WALDEN AVENUE SUITE 106 DEPEW, NY 14043		501(C) 3	DISCRETIONARY GRANTS	250
<b>Total . . . . .</b> ► <b>3a</b>				2,227,888

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>				
HOSPICE CHAUTAUQUA COUNTY INC 20 W FAIRMOUNT AVE LAKEWOOD, NY 14750		501(C)(3)	DISCRETIONARY GRANTS	750
INFINITY VISUAL & PERFORMING ARTS PROGRAM INC 301 E SECOND STREET STE 102 JAMESTOWN, NY 14701		501(C)(3)	DISCRETIONARY GRANTSPROGRAM SUPPORT/DEVELOPMENT	60,500
ROBERT H JACKSON CENTER 305 E FOURTH ST JAMESTOWN, NY 14701		501(C)(3)	DISCRETIONARY GRANTS	2,150
JAMESTOWN BOYS & GIRLS CLUB 62 ALLEN STREET JAMESTOWN, NY 14701		501(C)(3)	DISCRETIONARY GRANTSPROGRAM SUPPORT	29,250
JAMESTOWN COMMUNITY COLLEGE 525 FALCONER STREET JAMESTOWN, NY 14701		501(C)(3)	Arts & Science Bldg Revnovations	275,000
<b>Total . . . . .</b> ► <b>3a</b>				2,227,888


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>				
JAMESTOWN COMMUNITY COLLEGE FOUNDATION 525 FALCONER ST JAMESTOWN, NY 14701		501(C)(3)	Director/Staff Unrestricted Grants	1,300
JAMESTOWN COMMUNITY LEARNING COUNCIL C/O LINCOLN SCHOOL 301 FRONT ST JAMESTOWN, NY 14701		501(C)(3)	JCLC PROGRAM SUPPORT	75,000
JAMESTOWN CONCERT ASSOCIATION 315 N MAIN STREET JAMESTOWN, NY 14701		501(C)(3)	2017/2018DISCRETIONARY GRANTCONCERT SERIES	8,250
JAMESTOWN PUBLIC SCHOOLS 197 MARTIN ROAD JAMESTOWN, NY 14701		501(C)(3)	JHS CAREER ACADEMIES	25,000
JAMESTOWN PUBLIC SCHOOLS FORESTS INC c/o VP 126 WILTON AVE JAMESTOWN, NY 14701		501(C)(3)	E D DISC - CLEARCREEK SEDIMENTATION STUDY	2,500
<b>Total . . . . .</b> <b>3a</b>				2,227,888



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>				
JAMESTOWN RENAISSANCE CORPORATION 119-21 W THIRD STREET JAMESTOWN, NY 14701		501(C)(3)	Operating Support	30,000
JUNIOR ACHIEVEMENT OF WNY INC 181 FRANKLIN ST BUFFALO, NY 14202		501(C)(3)	JA PROGRAMS IN SCC	25,000
KIDNEY CONNECTION INC 57 WESTMINSTER DR WE JAMESTOWN, NY 14701		501(C)(3)	DISCRETIONARY GRANT	250
LAKEWOOD MEMORIAL LIBRARY 12 W SUMMIT ST LAKEWOOD, NY 14750		501(C)(3)	DISCRETIONARY GRANT	1,250
LAWSON BOATING HERITAGE CENTER 73 LAKESIDE DRIVE PO BOX 10 BEMUS POINT, NY 14712		501(C) 3	DISCRETIONARY GRANT	500
<b>Total</b> . . . . . 				2,227,888
<b>3a</b>				

**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>				
VILLAGE OF LAKEWOOD 20 W SUMMIT AVE LAKEWOOD, NY 14750		501(C) 3	DISCRETIONARY GRANTTREE REPLACEMENT - CHAUT AVE	1,500
LUCILLE BALL LITTLE THEATRE OF JAMESTOWN 18-24 E SECOND ST JAMESTOWN, NY 14701		501(C) 3	DISCRETIONARY GRANT	1,000
LUTHERAN SOCIAL SERVICES FOUNDATION 715 FALCONER ST JAMESTOWN, NY 14701		501(C)(3)	DISCRETIONARY GRANT	200
MEALS ON WHEELS OF THE JAMESTOWN AREA PO BOX 56 JAMESTOWN, NY 147020056		501(C)(3)	DISCRETIONARY GRANTS3 YR VAN REPLACEMENT PROJECT	25,800
MENTAL HEALTH ASSOCIATION IN CHAUT CO 31 WATER ST STE 7 JAMESTOWN, NY 14701		501(C)(3)	DISCRETIONARY GRANTSOPERATING SUPPORT	121,211
<b>Total . . . . . ►</b> <b>3a</b>				2,227,888

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>				
NY FUNDERS ALLIANCE 431 E FAYETTE ST STE 250 SYRACUSE, NY 13202		501(C)(3)	2017MEMBERSHIP DUES	3,500
JAMES PRENDERGAST LIBRARY ASSOCIATION 509 CHERRY ST JAMESTOWN, NY 14701		501(C)(3)	DISCRETIONARY GRANTS	7,750
REG LENNA CENTER FOR THE ARTS 116 EAST THIRD STREET JAMESTOWN, NY 14701		501(C)(3)	MASTER PLAN RENOVATIONS DISCRETIONARY GRANTS OPERATIONAL SUPPORT	590,450
ROGER TORY PETERSON INSTITUTE 311 CURTIS STREET JAMESTOWN, NY 14701		501(C)(3)	DISCRETIONARY GRANT Conservation & Education Initiatives	22,650
ST LUKE'S EPISCOPAL CHURCH PO BOX 704 JAMESTOWN, NY 14701		501 (C) 3	ED Disc green up jamestown event DISCRETIONARY FUND	3,000
<b>Total</b> . . . . . 				2,227,888
<b>3a</b>				

**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>				
SAINT SUSAN CENTER INCPO BOX 1276 JAMESTOWN, NY 14702		501(C)(3)	DISCRETIONARY GRANTS	6,300
STARFLIGHT INCPO BOX 840 JAMESTOWN, NY 14701		501(C)(3)	DISCRETIONARY GRANT	1,000
THE RELIEF ZONE INC 5 FREW RUN ROAD FREWSBURG, NY 14738		501(C)(3)	DISCRETIONARY GRANTOPERATING SUPPORT	25,500
THE SALVATION ARMY 83 SOUTH MAIN STREET JAMESTOWN, NY 14701		501(C)(3)	DISCRETIONARY GRANT	4,875
UNITED CHRISTIAN ADVOCACY NETWORK 7 WEST FIRST STREET LAKEWOOD, NY 14750		501 (c) 3	DISCRETIONARY GRANT FORHOMELESS INITIATIVE	2,250
<b>Total . . . . . ▶</b> <b>3a</b>				2,227,888

**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>				
UNITED WAY OF SOUTHERN CHAUTAUQUA CO 413 NORTH MAIN STREET JAMESTOWN, NY 14701		501(C)(3)	DISCRETIONARY GRANTS2016 CAMPAIGN	160,500
UPMC CHAUTAUQUA WCA HOSPITAL 207 FOOTE AVE JAMESTOWN, NY 14701		501(C)(3)	DISCRETIONARY GRANT	1,000
WCA FOUNDATION INC 207 FOOTE AVENUE JAMESTOWN, NY 14701		501(C)(3)	DISCRETIONARY GRANT	1,000
WNED HORIZONS PLAZA 140 LOWER TERRACE BUFFALO, NY 14202		501 (C) 3	DISCRETIONARY GRANTS	610
YANAA INCPO BOX 291 FALCONER, NY 14733		501(C)(3)	DISCRETIONARY GRANTS	1,000
<b>Total . . . . . ▶</b> <b>3a</b>				2,227,888

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				
YMCA101 EAST FOURTH STREET JAMESTOWN, NY 14701		501 (C) 3	DISCRETIONARY GRANTS YOUTH PROGRAMS	102,000
YWCA OF JAMESTOWN 101 EAST FOURTH STREET JAMESTOWN, NY 14701		501(C)(3)	SUPERVISED VISITATION PROGRAM DISCRETIONARY GRANT TEAM CHILD CARE PROGRAM	74,000
ZION COVENANT CHURCH 520 FAIRMONT AVE JAMESTOWN, NY 14701		501(C)(3)	DISCRETIONARY GRANT	250
<b>Total . . . . . ▶</b> <b>3a</b>				2,227,888

**TY 2017 Accounting Fees Schedule****Name:** RALPH C SHELDON FOUNDATION INC**EIN:** 16-6030502**Accounting Fees Schedule**

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
BAHGAT & LAURITO-BAHGAT, CPAS ACCOUNTING	8,500			
BAHGAT & LAURITO-BAHGAT, CPAS PAYROLL	473			

**Note:** To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

**TY 2017 Depreciation Schedule**

**Name:** RALPH C SHELDON FOUNDATION INC

**EIN:** 16-6030502

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
TYPEWRITER	1986-11-25	940	940	SL	5 00				
FILE	1995-06-01	202	202	SL	5 00				
ALARM SYSTEM	1998-06-01	660	660	SL	5 00				
OKIFAX MODEL 4580 FAX MACHINE	2003-10-03	699	699	SL	7 00				
FIREPROOF CABINET	2005-06-23	1,035	1,035	SL	5 00				
FURNITURE & FIXTURES	2011-04-01	36,179	28,426	SL	7 00	5,169			
NEW OFFICE RENOVATIONS	2011-04-01	19,449	10,697	SL	10 00	1,945			
LEASEHOLD IMPROVEMENTS	2011-04-01	50,500	26,400	SL	10 00	4,800			



**TY 2017 Distribution from Corpus Election**

**Name:** RALPH C SHELDON FOUNDATION INC

**EIN:** 16-6030502

**Election:** PURSUANT TO CODE SEC. 4942(H)(2) AND REG. 3.4942(A)-3(D) (2), RALPH C. SHELDON FOUNDATION INC. ELECTS TO TREAT CURRENT YEAR QUALIFYING DISTRIBUTIONS IN EXCESS OF THE IMMEDIATELY PRECEDING TAX YEAR'S UNDISTRIBUTED INCOME AS COMING FROM CORPUS. PETER B SULLIVAN, PRESIDENT

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

**TY 2017 Gain/Loss from Sale of Other Assets Schedule**

**Name:** RALPH C SHELTON FOUNDATION INC  
**EIN:** 16-6030502

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
VANGUARD INFLATION-PROTECTED SECURITIES FUND ADMIRAL SHARES	2010-01	Purchased	2017-07		255,730	252,958			2,772	
VANGUARD INTERMEDIATE-TERM BOND INDEX FUND ADMIRAL SHARES		Purchased	2017-07		419,612	404,373			15,239	
VANGUARD EQUITY-INCOME FUND ADMIRAL SHARES		Purchased	2017-07		315,184	220,469			94,715	
VANGUARD EXPLORER FUND ADMIRAL SHARES		Purchased	2017-07		181,237	142,937			38,300	
VANGUARD 500 INDEX FUND ADMIRAL SHARES		Purchased	2017-06		100,000	54,798			45,202	
VANGUARD GROWTH AND INCOME FUND ADMIRAL SHARES		Purchased	2017-07		331,228	231,304			99,924	
VANGUARD PRECIOUS METALS AND MINING FUND INVESTOR SHARES		Purchased	2017-07		36,015	29,038			6,977	
VANGUARD REIT INDEX FUND ADMIRAL SHARES		Purchased	2017-07		17,320	11,590			5,730	
VANGUARD TOTAL INTERNATIONAL STOCK INDEX FUND ADMIRAL SHARES		Purchased	2017-07		255,425	185,370			70,055	
VANGUARD HIGH-YIELD CORPORATE FUND ADMIRAL SHARES		Purchased	2017-07		138,798	140,424			-1,626	
VANGUARD INTERNATIONAL GROWTH FUND ADMIRAL SHARES		Purchased	2017-07		317,072	213,584			103,488	
HARTLAND NET LONG TERM CAPITAL GAIN		Purchased	2017-07		12,572	6,884			5,688	
HARTLAND SHORT-TERM CAPITAL GAIN					2,204				2,204	
HARTLAND LONG TERM CAPITAL GAINS					13,296				13,296	
VANGUARD SHORT TERM CAPITAL GAIN DISTRIBUTION					33,965				33,965	
VANGUARD LONG TERM CAPITAL GAIN DISTRIBUTION					81,026				81,026	
HUNTINGTON/M&N SHORT TERM CAPITAL GAIN		Purchased	2017-01		1,218,082	1,172,012	FMV		46,070	
HUNTINGTON/M&N LONG TERM CAPITAL GAIN		Purchased	2017-01		2,604,593	2,477,454			127,139	

**TY 2017 Investments Corporate Bonds Schedule****Name:** RALPH C SHELDON FOUNDATION INC**EIN:** 16-6030502**Investments Corporate Bonds Schedule**

<b>Name of Bond</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
114,532.219 SHS INTERMEDIATE-TERM BOND INDEX FUND VANGUARD	1,437,283	1,482,510
75,120.531 SHS HIGH YIELD CORP FUND VANGUARD	500,878	494,272
17,653.570 SHS CS FLOATING RATE HIGH INC INSTL SHS	120,946	120,927
22,132.970 SHS FEDERATED TOTAL RETURN BOND IS	241,257	241,249
12,935.564 SHS JPMORGAN STRATEGIC INCOME OPPS - CL I	150,951	150,053
15,624.105 SHS PRUDENTIAL TOTAL RETURN BOND FUND Q	225,629	228,112
14,046.509 SHS VANGUARD SHORT TERM INVMT GRADE ADMIRAL	150,056	149,314

## TY 2017 Investments Corporate Stock Schedule

**Name:** RALPH C SHELDON FOUNDATION INC

**EIN:** 16-6030502

Name of Stock	End of Year Book Value	End of Year Fair Market Value
13,721.571 SHS EQUITY INCOME FUND VANGUARD	702,034	1,080,425
5,825.653 SHS EXPLORER FUND VANGUARD	443,316	543,219
13,928.779 SHS GROWTH AND INCOME ADM VANGUARD	734,333	1,092,430
33,492.392 SHS INFLATION PROTECT VANGUARD	977,878	988,836
8,764.907 SHS INTERNATIONAL GROWTH VANGUARD	468,030	793,780
2,858.130 SHS MID CAP INDEX FUND VANGUARD	255,124	529,633
13,707.388 SHS PRECIOUS METALS & MINING VANGUARD	162,246	216,409
2,937.038 SHS REIT INDEX FUND VANGUARD	267,256	398,355
26,254.412 SHS TOTAL INTERNATIONAL STOCK INDEX FUND VANGUARD	502,553	759,684
9,096.854 SHS 500 INDEX FUND VANGUARD	1,139,639	2,171,857
8,107.978 SHS AQR LONG SHORT EQUITY FUND CL I	113,671	112,539
3,245.669 SHS DFA EMERGING MARKETS PORTFOLIO	90,729	98,896
2,554.573 SHS DFA US SMALL CAP VALUE PRTF INSTL	94,336	96,869
10,052.073 SHS JOHN HANCOCK GLABSO RETURN STRATS CL I	104,240	105,748
3,717.917 SHS OPPEN HEIMER INTERNTL GROWTH CL I	150,620	162,213
8,716.290 SHS TRANSAMERICA INT EQUITY CL I	153,702	159,601
787.246 SHS VANGUARD REIT INDEX ADMIRAL	66,211	92,541
15,762.529 SHS VANGUARD DEVELOPED MRKTS INDEX ADMIRAL	211,573	227,138
1,199.179 SHS VANGUARD MID CAP INDEX ADMIRAL SHS	102,022	229,703
3,064.592 SHS VANGUARD 500 INDEX ADMIRAL	382,471	756,403
820.822 SHS VICTORY RS SMALL CAP GROWTH CL Y	65,484	68,654
13,562.541 WELLS FARGO ABSOLUTE RETURN INST	152,225	154,477

**TY 2017 Investments Government Obligations Schedule****Name:** RALPH C SHELDON FOUNDATION INC**EIN:** 16-6030502**US Government Securities - End  
of Year Book Value:****US Government Securities - End  
of Year Fair Market Value:****State & Local Government  
Securities - End of Year Book  
Value:****State & Local Government  
Securities - End of Year Fair  
Market Value:**

**TY 2017 Land, Etc.  
Schedule****Name:** RALPH C SHELDON FOUNDATION INC**EIN:** 16-6030502

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
TYPEWRITER	940	940		
FILE	202	202		
ALARM SYSTEM	660	660		
OKIFAX MODEL 4580 FAX MACHINE	699	699		
FIREPROOF CABINET	1,035	1,035		
FURNITURE & FIXTURES	36,179	33,595	2,584	
ARTWORK	2,500		2,500	
NEW OFFICE RENOVATIONS	19,449	12,641	6,808	
LEASEHOLD IMPROVEMENTS	48,000	31,200	16,800	

# TY 2017 Other Expenses Schedule

**Name:** RALPH C SHELDON FOUNDATION INC

**EIN:** 16-6030502

## Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
DUES & SUBSCRIPTIONS	1,828	914		914
INSURANCE	3,474	1,737		1,737
MISCELLANEOUS	207	103		104
POSTAGE & SUPPLIES	955	477		478
REPAIRS & MAINTENANCE	664	332		332
PUBLIC RELATIONS	629	314		315
OFFICE EXPENSE	2,061	1,030		1,031
COMMON WEBSITE AT CRCF				
BANK FEE	25	12		13

**TY 2017 Other Income Schedule****Name:** RALPH C SHELDON FOUNDATION INC**EIN:** 16-6030502**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
FED EXCISE TAX			
RECEIPTS IN KIND			



**TY 2017 Other Increases Schedule**

**Name:** RALPH C SHELDON FOUNDATION INC  
**EIN:** 16-6030502

Description	Amount
FMV ADJUSTMENT HARTLAND/HUNTINGTON TRANSFER	100,352

**TY 2017 Other Liabilities Schedule****Name:** RALPH C SHELDON FOUNDATION INC**EIN:** 16-6030502

Description	Beginning of Year - Book Value	End of Year - Book Value
TAXES WITHHELD/PAYABLE	5,781	6,167

**TY 2017 Other Liabilities Schedule****Name:** RALPH C SHELDON FOUNDATION INC**EIN:** 16-6030502

Description	Beginning of Year - Book Value	End of Year - Book Value
TAXES WITHHELD/PAYABLE	5,781	6,167

**TY 2017 Other Professional Fees Schedule****Name:** RALPH C SHELDON FOUNDATION INC**EIN:** 16-6030502

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
INVESTMENT MANAGEMENT FEES INVESTMENT MANAGEMENT FEES	6,038			
INVESTMENT AND BANK FEES WIRE TRANSFER/STOP PAYMENT				

**TY 2017 Taxes Schedule****Name:** RALPH C SHELDON FOUNDATION INC**EIN:** 16-6030502

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
NYS ANNUAL FEE	775	775		
PAYROLL TAXES	11,962	5,981		5,981
FOREIGN TAX ON INVESTMENTS				
FEDERAL EXCISED TAX	7,241	7,241		

<b>Schedule B</b> (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	<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>2017</b>
	<b>Name of the organization</b> RALPH C SHELDON FOUNDATION INC	<b>Employer identification number</b> 16-6030502

**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. Don't 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 isn't covered by the General Rule and/or the Special Rules doesn't 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 doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

**Employer identification number**  
16-6030502

Part I	Contributors (See instructions) Use duplicate copies of Part I if additional space is needed
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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ISABELLA M SHELDON TRUST US 6848	\$ 1,487,177	Person <input checked="" type="checkbox"/>
	C/O JP MORGAN SERVICES 1 CHASE SQUA		Payroll <input type="checkbox"/>
	Rochester, NY14623		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 )
(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 )

Employer identification number

16-6030502

**Part II** **Noncash Property** (See instructions) Use duplicate copies of Part II if additional space is needed

[illegible]



**Name of organization**

RALPH C SHELDON FOUNDATION INC

**Employer identification number**

16-6030502

<b>Part III</b>	<b>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.) ▶ \$ _____</b> 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	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	