Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation
Do not enter social security numbers on this form as it may be made public.

Department of the Treasury

		Go to www.irs.g	OV/ POIN	990FFTOF INSTR				п. Ор	. 20		
	alendar year 2017 or tax year	beginning			, 2017,	and endir		Employer identific			
RITA M FARRANT FBO CHARITIES 1215541708 81-6608851											
	Number and street (or P.O. box number if mail is not delivered to street address) Room/suite						R	Telephone number			
1441111	ser and street (or r.o. box namber it me	sii is not denvered t		241030,		11001117 SUNC		rejopitone nambo	(000 111011 20110110)		
Р (D BOX 2161							5 1:	7/5_1000		
	or town, state or province, country, and	ZIP or foreign post	al code	<u> </u>		<u> </u>	-	518-745-1000			
Oity C	, total, state of province, board, y, and	Zii oi joroigii pooti	u. 0000				c	If exemption applicati	on is		
CT I	ENS FALLS, NY 12801							pending, check here			
$\overline{}$		al return	-1	Initial return	of a former n	ublic chari	tv -	_			
G CII	· · · · 	l return	-	Amended ret	•	done chan	יסן יי	1 Foreign organization 2 Foreign organization			
	 1 ``	ress change	-	Name change				85% test, check he	re and attach		
H Ch	eck type of organization: X	 	1(3) ev			4) (H	computation			
	Section 4947(a)(1) nonexempt chi	_	$\overline{}$	ner taxable pri		•	E	If private foundation			
	ir market value of all assets			nethod: X Ca		rual /	_	under section 507(b)			
	d of year (from Part II, col. (c),		her (spe		asii	i uai	F		a 60-month termination		
) ► \$ 1,312,763.		-) must be on ca	sh basis l			and social sorts	TADACTION .		
Part					Deliv Beeler,				(d) Disbursements		
Tart	total of amounts in columns (b)), (c), and (d)		evenue and enses per	(b) Net inve			djusted net	for charitable purposes		
	may not necessarily equal the a column (a) (see instructions).)	amounts in		books	incon	income		income	purposes (cash basis only)		
1	Contributions, gifts, grants, etc , received ((attach schedule)	1	,000,000.							
2	Check if the foundation is	not required to		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
3	attach Sch B Interest on savings and temporary ca					-					
4	Dividends and interest from sec	F		95,977.		5,977.			STMT		
5	_		_								
	Net rental income or (loss)										
	· 	s not on line 10		63,256.							
		187,383,		7							
8 7	Capital gain net income (from P				6	3,256.					
æ 8	Net short-term capital gain		(2							
9	. ואו	1AY 1 8 2		31							
10	a Gross sales less returns and allowances	"CI 19 CE	''' (c	'n							
	b Less Cost of goods sold			2							
	Gross profit or (loss) (attach sch	edule) E.N.	UT_		}						
11	Other income (attach schedule)			≠							
12	Total. Add lines 1 through 11 .		1	,159,233.		9,233.					
13	Compensation of officers, directors,	trustees, etc.		10,194.		<u>9,175.</u>			1,01		
Ses 14	Other employee salaries and wa	ages [NONE		NONE			
C 46	Pension plans, employee benefi				ļ	NONE		NONE			
Ž 16	•			14,008.		4,008.		NONE	<u>_No</u>		
E E	b Accounting fees (attach schedu	_{ile)} STMT.3. [315	ļ	NONE		NONE	31		
<u>Ę</u> .	c Other professional fees (attach :	schedule)									
Administrative Experior 6 1 2 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Interest		-		ļ						
18	Taxes (attach schedule) (see ins	ſ		218.	·	218.					
[19	Depreciation (attach schedule)	and depletion .									
P 20	Occupancy				ļ						
p 21	Travel, conferences, and meetin	ngs				NONE		NONE			
व्ह 22	Printing and publications	Г		100.	-	NONE		NONE	10		
Operating 52	Other expenses (attach schedul	F .		1,950.	<u> </u>				1,95		
E 24	Total operating and administra			06 805	_			37037	3 22		
De	Add lines 13 through 23	l l		<u> 26,785.</u>	<u> </u>	23,401.		NONE	3,38		
				29,950	 	2 401		27027	29,95		
26	Total expenses and disbursements Add	d lines 24 and 25		56,735.	2	23,401.		NONE	33,33		
27	Subtract line 26 from line 12.			100 400							
1	a Excess of revenue over expenses and di	T I		,102,498.		E 022			-		
1	 Net investment income (if negative Adjusted net income (if negative 	· · · · · · · · · · · · · · · · · · ·				<u> 5,832.</u>					

JSA For Paperwork Reduction Act Notice, see instructions.
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Part II Baland		Dalamas Charte	Attached schedules and amounts in the	Beginning of year	End of year			
řě		balance Sheets	description column should be for end-of-year amounts only. (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1 (Cash - non-interest-beari	ing					
1	2 :	Savings and temporary	cash investments	65,756.	43,254.	43,254		
1				_	_			
1	I	Less allowance for doul	btful accounts ▶					
١	4	Pledges receivable ▶_			_			
1	ı	Less allowance for doul	btful accounts ▶					
ŀ								
1			officers, directors, trustees, and other					
١			ach schedule) (see instructions)					
ŀ			eceivable (attach schedule)					
			btful accounts ► NONE					
2			se					
433CE2			eferred charges					
2		•	e government obligations (attach schedule).		 			
1			stock (attach schedule)					
		·	bonds (attach schedule)					
	11	Investments - land, building						
- 1		and equipment basis Less accumulated depreci-						
١		(attach schedule)						
- 1			loans	220,140.	1 150 (20)	1 200 F00		
ļ		Investments - other (atta Land, buildings, and	ach schedule) STMT . 6	220,140.	1,159,629.	1,269,509		
1		equipment, basis Less, accumulated deprecia	ation b	-				
١		(attach schedule)						
J		Other assets (describe I						
1			completed by all filers - see the					
_		instructions. Also, see p	age 1, item I)	285,896.	1,202,883.	1,312,763		
-	17	Accounts payable and a	accrued expenses					
	18	Grants payable						
	19	Deferred revenue						
Ĭ	20	Loans from officers, directo	ors, trustees, and other disqualified persons					
Liabilities	21	Mortgages and other no	otes payable (attach schedule)					
3	22	Other liabilities (describ	e ▶)					
ĺ				ĺ	{			
	23	Total liabilities (add line	es 17 through 22)		NONE			
1		Foundations that follow	w SFAS 117, check here >					
S		and complete lines 24	through 26, and lines 30 and 31.					
١٤	24	Unrestricted						
salances	25							
2								
일			ot follow SFAS 117, check here					
디		and complete lines 27						
6		-	cipal, or current funds	285,896.	1,202,883.			
2		• • •	or land, bldg., and equipment fund					
š			ilated income, endowment, or other funds					
۲		~ ·	d balances (see instructions)	285,896.	1,202,883.			
Net Assets or Fund I		Total liabilities and	· · · · · · · · · · · · · · · · · · ·		1,202,003.			
اک			· 1	285,896.	_1,202,883.			
۲			ngos in Not Assets or Sund Pole		1,202,003.			
			nges in Net Assets or Fund Balar					
1			balances at beginning of year - Part I			205 006		
_			ed on prior year's return)			<u>285,896.</u>		
			line 27a		—— —	1,102,498.		
-2	(Hh	ar increacee not inclu	geg in line 2 liternize) 🗪 INCOME DATO T	N ZULT TAXICU IN ZULK	2	144		

1,202,883. Form **990-PF** (2017)

5 6

1,388,588.

185,705.

5 Decreases not included in line 2 (itemize) ► SEE STATEMENT 7
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 . . .

	190-PF (2017)	and Lagge for Toy on Inv	actment Income			Page 3
<u>Part</u>		and Losses for Tax on Investigation and Losses for Tax on Investigation and Losses for Tax on Investigation and Investig		(b) How		(d) D-414
		rick warehouse; or common stock, 200		acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr)
1 a	PUBLICLY TRADED	SECURITIES		D - Dollation		<u> </u>
	OTHER GAINS AND					
c						
d						
е					<u> </u>	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) min	
_a	137,356.		124,127.			13,229.
_b	50,027.					50,027.
<u>c</u>				 		-
_ <u>d</u>	<u> </u>					
е_	Complete only for assets sh	l nowing gain in column (h) and owned t	by the foundation on 12/31/69.		0: (0:1/1)	<u> </u>
		(i) Adjusted basis	(k) Excess of col. (i)		Gains (Col. (h) ga (k), but not less t	
(i) FMV as of 12/31/69	as of 12/31/69	over col. (j), if any		Losses (from co	
a						13,229.
b						50,027.
С						
<u>d</u>					-	
<u>e</u>			<u> </u>			
2	Capital gain net income	or inct capital loce)	ain, also enter in Part I, line 7 oss), enter -0- in Part I, line 7	2		63,256.
3	Net short-term capital g	ain or (loss) as defined in sections	1222(5) and (6).		· -	
	If gain, also enter in F	Part I, line 8, column (c). See in	structions. If (loss), enter -0- in			
		<u></u>		3		·
Part	V Qualification C	Inder Section 4940(e) for Red	luced Tax on Net Investment in	<u> 1come</u>		
		the section 4942 tax on the distri	butable amount of any year in the b	ase perio	d?	Yes X No
1			ar; see the instructions before makir	ng any en	tries.	
	(a)	(b)	(c)		(d)	
Caler	Base period years idar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ra (col (b) divided by	
	2016	16,311.	387,440.			0.042099
	2015					
	2014					
	2013		<u> </u>			
	2012	<u> </u>				
_						0.040000
2				2		0.042099
3	•	The state of the s	de the total on line 2 by 5.0, or by	3		0.042099
	the number of years the	e toundation has been in existence	if less than 5 years			0.042033
4	Enter the net value of n	oncharitable-use assets for 2017 f	rom Part X, line 5	4	1,	265,125.
5	Multiply line 4 by line 3			5		53,260.
6	Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		1,358.
7	Add lines 5 and 6			7		54,618.
8	Enter qualifying distribu If line 8 is equal to or Part VI instructions.	ntions from Part XII, line 4 greater than line 7, check the bo	x in Part VI, line 1b, and complete	8 that part	using a 1% ta	33,334. x rate. See th

	190-PF (2017) 01-00000001	- of		age 🕶
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	nstru	ctions	5)
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)		0 5	
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check		2,1	<u> 17.</u>
	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 J		-	
	Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			<u>IONE</u>
3	Add lines 1 and 2			17.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			IONE
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		2,1	17.
6	Credits/Payments:			
8	2017 estimated tax payments and 2016 overpayment credited to 2017 6a			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c NONE			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d			ONE
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			85.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		2,8	<u> 802.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ NONE Refunded ▶ 11			
	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		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
	instructions for the definition	1b		<u> </u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	1		
	published or distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	1c	,	<u>X</u>
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers. \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u> X</u>
	If "Yes," attach a detailed description of the activities.			
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		<u>X</u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	X	
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	Х	<u> </u>
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	X	
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 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes,"			
	complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		Х

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Part	VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within th	е		_
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	. 11	<u> </u>	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualifie	d		
	person had advisory privileges? If "Yes," attach statement. See instructions	. 12	Ĺ	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application	7 13	<u> </u>	
	Website address ► N/A			
14	The books are in care of ▶ GLENS FALLS NATIONAL BANK & TRUST Telephone no. ▶ (518) 41	<u>5-442</u>	16	
	Located at ▶ 250 GLEN STREET, GLENS FALLS, NY ZIP+4 ▶ 12801			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			· 🔲
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other author	ity	Yes	No
	over a bank, securities, or other financial account in a foreign country?	. 16	_	<u> </u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name	of		
	the foreign country			
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? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes 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)?			
	(6) Agree to pay money or property to a government official? (Exception., Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
Ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulation		;	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	. 1b		X
	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2017?			Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	e		
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	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? Yes X No		1	
	If "Yes," list the years	,		
В	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2	n n	1	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			Х
_	all years listed, answer "No" and attach statement - see instructions)	. 20		
C				
20	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
30				
	at any time during the year?			
O	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	1		
		1		
	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	1		
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if th foundation had excess business holdings in 2017.)			
An	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes			Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize it			
D	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017			Х
	The state of the s		ч	<u> </u>

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3NONE

All other program-related investments. See instructions.

Part	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign found	ations,
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	1,054,927.
b	Average of monthly cash balances	1b	<u>229,464.</u>
C	Fair market value of all other assets (see instructions)		NONE
d	Total (add lines 1a, b, and c)	1d	1,284,391.
е	Reduction claimed for blockage or other factors reported on lines 1a and	1	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE NONE
3	Subtract line 2 from line 1d	3	1,284,391.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see]]	
	instructions)	4	19,266.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,265,125.
6	Minimum investment return. Enter 5% of line 5	6	63,256.
Par	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four	dations	
	and certain foreign organizations, check here ▶ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	63,256.
2a	Tax on investment income for 2017 from Part VI, line 5] [
b	Income tax for 2017. (This does not include the tax from Part VI.).		
	Add lines 2a and 2b	2c	2, <u>7</u> 17.
3	Distributable amount before adjustments, Subtract line 2c from line 1	3	60,539.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	60,539.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
•	line 1	7	60,539.
Dav			
F at	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	\	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	33,334.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1 1	
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	NONE
ь	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	33,334.
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	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4		33,334.
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		
	qualifies for the section 4940(e) reduction of tax in those years.		

Par	t XIII Undistributed Income (see instr	uctions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2017 from Part XI,	Corpus	Years prior to 2016	2016	2017
	line 7				60,539.
	Undistributed income, if any, as of the end of 2017				1
	Enter amount for 2016 only			3,061.	
	Total for prior years 20,20,20		NONE		
	Excess distributions carryover, if any, to 2017				
	From 2012 NONE				
	From 2013 NONE				
-	From 2014 NONE NONE				
	NOVE				
_	From 2016	NONE	j		
	Qualifying distributions for 2017 from Part XII,	HOMB		·-·-	
*	line 4 ▶ \$33,334.				
	Applied to 2016, but not more than line 2a			3,061.	
	''				
D	Applied to undistributed income of prior years (Election required - see instructions)		NONE		
	Treated as distributions out of corpus (Election				
·	required - see instructions)	NONB			
d	Applied to 2017 distributable amount				30,273.
е	Remaining amount distributed out of corpus	NONE			
5	Excess distributions carryover applied to 2017	NONE			NONE
	(If an amount appears in column (d), the same amount must be shown in column (a).))		
6	Enter the net total of each column as				
	indicated below:				
8	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	NONE			
b	Prior years' undistributed income. Subtract		370377		
	line 4b from line 2b		NONE		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)		NONE	-	
	tax has been previously assessed		NONE		
d	Subtract line 6c from line 6b. Taxable amount - see instructions		NONE		
e	Undistributed income for 2016. Subtract line		110112		
	4a from line 2a. Taxable amount - see instructions				
	}				
f	Undistributed income for 2017 Subtract lines				
	4d and 5 from line 1 This amount must be distributed in 2018				30,266.
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)	NONE NONE			
8	Excess distributions carryover from 2012 not				
	applied on line 5 or line 7 (see instructions)	NONB			
9	Excess distributions carryover to 2018.			1	
	Subtract lines 7 and 8 from line 6a	NONE			
	Analysis of line 9				
	Excess from 2013 NONE			ļ	
	Excess from 2014 NONE				
	Excess from 2015 NONE				
	Excess from 2016 NONE Excess from 2017 NONE				
e	Excess from 2017 NONE				000 85

JSA 7E1490 1.000

factors:

c Any submission deadlines:

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

Aggroved for future payment Total	Form 990-PF (2017)	(a.a., 4)			Page 11
a Paid during the year SEE STATEMENT 11 29,950. Total	Part XV Supplementary Information (continuea)	arrad fan F		
a Paid during the year SEE STATEMENT 11 29,950. Total	3 Grants and Contributions Paid Durin	if recipient is an individual.	Foundation	uture Payment	
a Paid during the year SEE STATEMENT 11 29,950. Total	Recipient	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
Total	Name and address (home or business)	or substantial contributor	recipient		
Total	a Paid during the year				
b Approved for future payment	SEE STATEMENT 11				29,950.
b Approved for future payment					
b Approved for future payment					
b Approved for future payment					
b Approved for future payment					
b Approved for future payment					20.050
			· · · · · ·		29,950.
Total					
	Total			▶ 3b	

ter gross amounts unless otherwise indicated	Unrelated	business income	Excluded by	section 512, 513, or 514	(e)
Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
a					
b					
·					
d					
·					
·					
g Fees and contracts from government agencies					
Membership dues and assessments					
nterest on savings and temporary cash investments -			1.	05 077	
Dividends and interest from securities			14	95,977.	
Net rental income or (loss) from real estate					
Debt-financed property					
Not debt-financed property	-				
Net rental income or (loss) from personal property	 				
Other investment income	 		18	63,256.	
Gain or (loss) from sales of assets other than inventory	 		10	03,236.	
Net income or (loss) from special events · · ·	 				
Gross profit or (loss) from sales of inventory	 		 		
Other revenue ab	 				
c					
e					
Subtotal. Add columns (b), (d), and (e)				159,233.	
ne No. Explain below how each activities					ted importantly to
accomplishment of the foundati					
		NOT APPLICAL	BLE		
					
(

	t XVII	Information Re Exempt Organ		ansfers to and Tr	ansactions	s and Ro	elationships V	Vith Nonc	harit	able	-
1	Did the			engage in any of the	following w	vith any of	ther organization	described		Yes	No
		=	-	501(c)(3) organizati							
	organiz	ations?									
a	Transfe	ers from the reporting	j foundation to	a noncharitable exem	ıpt organizat	ion of:			_	ĺ	
	(1) Cas	h							1a(1)		<u>X</u>
									1a(2)		X
b	Other t	ransactions:									••
				npt organization					16(1)		X
				ole exempt organization					16(2)		X
				assets					1b(3)		_X _X
									1b(4)		X
				p or fundraising solici					1 <u>b(5)</u> 1b(6)		X
				p or fundraising solici its, other assets, or pai							$\frac{x}{x}$
				es," complete the foll						fair m	
•				ices given by the rep							
				gement, show in colu							
(a) L	ine no	(b) Amount involved		noncharitable exempt organi			on of transfers, transa				
										_	
							_ 				
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		farradotion discostra		Wiliatadth. ar ralate							
Zā				ffiliated with, or relate ction 501(c)(3)) or in:					7	es D	No.
b		" complete the follow		ction so helish of in-	Section 527:				· ·		
<u> </u>		(a) Name of organization		(b) Type of org	anization		(c) Descrip	tion of relations	hıp		
				<u></u>							
				lined this return, including acci texpayer) is based on all informa				of my knowledge	and t	oalief, it	is truo,
Sig	1		_					May the IRS	discus	s this	return
Her	ے ای	- CONT V	oboaron	05/07/20			RESIDENT		pare <u>r s</u>	hown L	etow?
61	Joigi	nature of officer or trustee		Date	Tit	te		See instructions	<u> </u>	Yes	No
	KA	REN L. STAPLE		D					TINI		
Paid	ď	Print/Type preparer's na		Preparer's signature	Donald			""	TIN	·	. ^
	parer	JOHN MITCHEL		YOU THE TYPE	-mehi	()5/07/2018 se			<u>5723</u>	0
	Only		NST & YOUN		EOOO		Firm's Eli	N ► 34-6	2565	596	
USE	Only	1	.30 PARKLAI ALEIGH. NO	KE AVENUE, STE	2761	2	Phone no	919-98	81-2	991	

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990for the latest information. OMB No. 1545-0047

2017

Name of the organization

Employer identification number

RITA M FARRANT FBO CH	HARITIES 1215541708	81-6608851							
Organization type (check one):									
Filers of:	Filers of: Section:								
Form 990 or 990-EZ	501(c)() (enter number) organization								
4947(a)(1) nonexempt charitable trust not treated as a private foundation									
	527 political organization								
Form 990-PF	X 501(c)(3) exempt private foundation								
	4947(a)(1) nonexempt charitable trust treated as a private foundation	ion							
	501(c)(3) taxable private foundation								
Check if your organization is cov	vered by the General Rule or a Special Rule.								
Note: Only a section 501(c)(7), instructions.	(8), or (10) organization can check boxes for both the General Rule and a S	pecial Rule. See							
General Rule									
	ing Form 990, 990-EZ, or 990-PF that received, during the year, contribution property) from any one contributor. Complete Parts I and II. See instruction stributions.								
Special Rules									
regulations under sec 13, 16a, or 16b, and	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/tions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 of that received from any one contributor, during the year, total contributions the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Co	or 990-EZ), Part II, line of the greater of (1)							
contributor, during the	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 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).									

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Page 2 Name of organization **Employer identification number** RITA M FARRANT FBO CHARITIES 1215541708 81-6608851 Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (d) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 Estate of Rita Farrant Person Payroll Glens Falls Natl Bk, PO Box 2161 1,000,000. Noncash (Complete Part II for Glens Falls, NY 12801 noncash contributions.) (a) (b) (c) (d) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person Payroll Noncash

			(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
		Schodule	B (Form 990 990 F7 or 990 PE) (201)

81-6608851

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	1,088. 1,273. 581. 691. 70,638. 1,679. 848. 1,508. 6,038. 1,314. 8,638.	95,977.
REVENUE AND EXPENSES PER BOOKS	1,088. 1,273. 581. 691. 70,638. 1,679. 1,679. 1,14. 1,314. 1,314. 8,638.	95,977.
DESCRIPTION 	BLACKROCK TREASURY TRUST FUND #62 DODGE & COX STK FD COM FIDELITY OVERSEAS FUND GS-INTL EQTY INSIGHTS-INST ISHARES MSCI EMERGING MKT ETF ISHARES MSCI ALL COUNTRY ASIA ESTATE OF RITA M FARRANT NUVEEN PREFERRED SECURIT-I PIMCO LOW DURATION FUND-INST VANGUARD REAL ESTATE INDEX ADM VANGUARD MID CAP INDEX-ADM VANGUARD SMALL-CAP INDEX-ADM VANGUARD SOO INDEX FUND-ADM VANGUARD SOO INDEX FUND-ADM	TOTAL

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81-6608851

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LEGAL FEES	
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CHARITABLE PURPOSES	1 1 1 1 1 1		NONE	() () () () () () () () () () () () () (
ADJUSTED NET INCOME			NONE	11 11 11 11 11 11 11 11 11
NET INVESTMENT INCOME	 	14,008.		
REVENUE AND EXPENSES PER BOOKS		14,008.		
		(ALLOCA	TOTALS	
		: - PRINCIPAL (ALLOCA		
DESCRIPTION	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	LEGAL FEES		

STATEMENT

FEES	
ACCOUNTING	
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990PF, PA	

CHARITABLE PURPOSES	!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!	315.	315.	
ADJUSTED NET INCOME	! ! ! !			
NET INVESTMENT INCOME	1 1 1 1 1			
REVENUE AND EXPENSES PER BOOKS		315.	315.	
		FEE (NON-ALLOC	TOTALS	
DESCRIPTION	; ; ; ; ;	TAX PREPARATION FEE		

- TAXES	
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RITA M FARRANT FBO CHARITIES 1215541708

NET INVESTMENT INCOME	160.
REVENUE AND EXPENSES PER BOOKS	160. 58.
DESCRIPTION	FOREIGN TAXES ON QUALIFIED FOR FOREIGN TAXES ON NONQUALIFIED TOTALS

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81-6608851

- OTHER EXPENSES FORM 990PF, PART I

RITA M FARRANT FBO CHARITIES 1215541708

REVENUE AND

EXPENSES PER BOOKS

CHARITABLE PURPOSES

DESCRIPTION

1,950.

1,950.

OTHER ALLOCABLE EXPENSE-PRINCI

1,950.

TOTALS

1,950.

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81-6608851		-
RITA M FARRANT FBO CHARITIES 1215541708	FORM 990PF, PART II - OTHER INVESTMENTS	

DESCRIPTION	COST/ FMV C OR F	ENDING BOOK VALUE	END I NG FMV
; ; ; ; ; ; ;	1 1 1 1		!!!
FIDELITY OVERSEAS FUND	υ	96	,48
VANGUARD MID CAP INDEX-ADM	ט	89,916.	,45
VANGUARD REIT INDEX FUND-ADM	ט	14	-
VANGUARD SMALL-CAP INDEX-ADM	U	9,59	,87
VANGUARD 500 INDEX FUND-ADM	ט	4,17	6,61
PIMCO LOW DURATION FUND -INST	U	6,90	, 95
VANGUARD TOTAL BD MKT IDX ADM	ט	296,350.	6,79
ISHARES MSCI EMERGING MKT ETF	U	27,514.	33,078.
NUVEEN PREFERRED SECURITIES	ט	7	8,19
DODGE & COX STOCK FUND	ט	7,13	0,73
GS-INTL EQTY INSIGHTS-INST	U	6	_
ISHARES MSCI ALL COUNTRY ASIA	บ	14,054.	16,400.
WESTERN ASSET CORE BD FUND-S	บ	37,065.	37,330.
	•		11111111111
JC TO	TOTALS	1,159,629.	1,269,509.

FORM 990PF	, PART III -	OTHER DECREASES	IN NET WORTH	OR FUND BALANCES
========	=========	=======================================		=======================================

DESCRIPTION	AMOUNT
ROUNDING ADJUSTMENT 2016 TAXES PD WITH FORM 7004 ESTATE OF RITA FARRANT K-1 ADJUSTMENT COST BASIS ADJUSTMENT INCOME PAID IN 2018 TAXED IN 2017 FEDERAL TAX FREE RETURN OF CAPITAL ADJ ESTM FIDUCIARY TAXES NYS	3. 59,961. 120,665. 3,925. 978. 59. 114.
TOTAL	185,705.

GAINS AND LOSSES FROM PASS-THRU ENTITIES

NET LONG-TERM GAIN (LOSS) FROM PARTNERSHIPS, S CORPORATIONS AND OTHER FIDUCIARIES

PARTNERSHIPS, TRUSTS, S CORPORATIONS

50,027.00

TOTAL NET LONG-TERM GAIN OR LOSS (ROUNDED)

50,027.00

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RITA M FARRANT FBO CHARITIES 1215541708 81-6608851 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: CHILDREN'S LEUKEMIA RESEARCH ASSOC. ATTN: ANTHONY R PASQUA, PRESIDENT ADDRESS: 585 STEWART AVE, SUITE 18 GARDEN CITY, NY 11530 AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: AMERICAN CANCER SOCIETY ATTN: BILL ROBERTS ADDRESS: PO BOX 720366 OKLAHOMA CITY, OK 73172 AMOUNT OF GRANT PAID 6,000. RECIPIENT NAME: SISTERS OF THE PRECIOUS BLOOD ADDRESS: 301 RAMSAY ROAD ONTARIO CANADA N6G 1N7 AMOUNT OF GRANT PAID 50. RECIPIENT NAME: THE SALVATION ARMY LEGAL DEPARTMENT ADDRESS: ATTN: MICHAEL J SOUTHWICK WEST NYACK, NY 10994 AMOUNT OF GRANT PAID 2,000. RECIPIENT NAME: AMERICAN HEART ASSOCIATION NATIONAL BEOUEST CENTER ADDRESS: ATTN: LIZ TZINBERG ST PETERSBURG, FL 33742 AMOUNT OF GRANT PAID 5,200.

RITA M FARRANT FBO CHARITIES 1215541708 81-6608851 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: GLENS FALLS ASSN FOR THE BLIND ADDRESS: 144 RIDGE ST GLENS FALLS, NY 12801 AMOUNT OF GRANT PAID 500. RECIPIENT NAME: THE COMMUNITY HOSPICE, INC ADDRESS: 295 VALLEY VIEW BLVD RENSSELEAR, NY 12144 AMOUNT OF GRANT PAID 200. RECIPIENT NAME: CARITAS, INC. ADDRESS: 142 BAY STREET GLENS FALLS, NY 12801 RELATIONSHIP: N/A FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 300. RECIPIENT NAME: SPCA OF UPSTATE NY ADDRESS: 588 QUEENSBURY AVE QUEENSBURY, NY 12804 AMOUNT OF GRANT PAID 100. RECIPIENT NAME: HIGH PEAKS HOSPICE & PALLIATIVE CARE ATTN: TINA MOODY ADDRESS: PO BOX 840 SARANAC LAKE, NY 12983 AMOUNT OF GRANT PAID 200.

RITA M FARRANT FBO CHARITIES 1215541708 81-6608851 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: OUR LADY OF VICTORY HOMES OF CHARITY ATTN: RICHARD L. HEIST, EXEC. DIR. ADDRESS: 780 RIDGE RD LACKAWANNA, NY 14218 2,000. AMOUNT OF GRANT PAID RECIPIENT NAME: CENTRAL ASSOC. OF THE MIRACULOUS MEDAL ADDRESS: ATTN: FLORENCE DELLISANTI PHILADELPHIA, PA 19144 AMOUNT OF GRANT PAID 2,000. RECIPIENT NAME: AMERICAN RED CROSS ATTN: TRUST & ESTATES ADDRESS: OFFICE OF GENERAL COUNSEL WASHINGTON, DC 20006 400. AMOUNT OF GRANT PAID RECIPIENT NAME: ARTHRITIS FOUNDATION ATTN: KIMBERLY JORDAN ADDRESS: 1355 PEACHTREE ST ATLANTA, GA 30309 10,000. AMOUNT OF GRANT PAID 29,950. TOTAL GRANTS PAID:

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