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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information

OMB No 1545-0047 Inspection

	A F	or the	2017 calendar year, or tax year beginning APR 1, 2017 and en	naing M	AR 31, 2018					
Ì	B Ch	eck if plicable	C Name of organization		D Employer identific	ation number				
		Addre chang	OTSEGO 2000, INC.							
		Name chang	Doing business as		11-2	554945				
		Initial retum	Number and street (or P.O. box if mail is not delivered to street address) Ro	oom/suite	e E Telephone number					
		Final return	PO BOX 1130		(607	<u>)547-8881</u>				
		termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	318,836.				
		Amen	COOPERSTOWN, NY 13326-1130		H(a) Is this a group return					
		Application	F Name and address of principal officer. NECODE DELIDERGIAM		for subordinates	Yes X No				
		pendii	SAME AS C ABOVE	is 1/	H(b) Are all subordinates in	cluded? Yes No				
	I Ta	ax-ex	empt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or	□ √527	If "No," attach a	list (see instructions)				
	JΜ	ebsi	e: ► WWW.OTSEGO2000.ORG		H(c) Group exemption	number >				
	K Fo	orm of	organization: X Corporation Trust Association Other ▶	L Year	of formation: 1981 N	State of legal domicile; DE				
	Pa	rt I	Summary							
		1	Briefly describe the organization's mission or most significant activities TO PRO	OTECT	THE ENVIRON	IMENTAL,				
	Activities & Governance		AGRICULTURAL, SCENIC, CULTURAL AND HISTORI	C RES	OURCES OF T	HE OTSEGO				
	ja Ja	2	Check this box Fig. 1 if the organization discontinued its operations or disposed	d of more	than 25% of its net ass	ets				
	Š	3	Number of voting members of the governing body (Part VI, line 1a)		. 3	20				
	ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	20				
<u>©</u>	တ္ခ	5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)		5	3				
2013	.≝	6	Total number of volunteers (estimate if necessary)		. 6	50				
LO	ફ	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		. 7a	0.				
63	_	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.				
<u> </u>			RECEIVED	<u> </u>	Prior Year	Current Year				
00	اه	8	Contributions and grants (Part VIII, line 1h)	ال ر—	494,512.	181,428.				
	evenue	9	Program service revenue (Part VIII, line 2g)	S-08(34,983.	37,037.				
لِينَا	8	10	Investment income (Part VIII, column (A), lines 3, 4, and SEP 1 7 2018	S.	-426.	3,728.				
SCANNED OCT	۳	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and=1-1e)] ≝[34,560.	31,041.				
Z		12	Total revenue - add lines 8 through 11 (must equal Part VIII, columna A) Imai 2) IT		563,629.	253,234.				
\mathcal{Q}		13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.				
90		14	Benefits paid to or for members (Part IX, column (A), line 4)	. L	0.	0.				
	ø	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		165,940.	157,918.				
	Expense	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.				
	ę,	b	Total fundraising expenses (Part IX, column (D), line 25) ► 16,750	<u>0. </u>						
	Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		127,383.	95,756.				
		18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		293,323.	<u>253,674.</u>				
		19	Revenue less expenses. Subtract line 18 from line 12		270,306.	-440.				
	Assets or Ralances			Ве	ginning of Current Year	End of Year				
	Sets	20	Total assets (Part X, line 16)		619,307.	589,995.				
	± BS	21	Total liabilities (Part X, line 26)		26,426.	270.				
	<u></u>	22	Net assets or fund balances. Subtract line 21 from line 20		592,881.	589,725.				
		ırt II	<u> </u>							
			alties of perjury, I declare that I have examined this return, including accompanying schedules a			knowledge and belief, it is				
	true,	corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of whice	ch preparer	has any knowledge.	a				
			Signature of officer		10/10//	<u>r</u>				
	Sig	1	1'		Ly ale					
	Her	е	Type or print name and title							
				L	Date! Chart	PTIN				
			Print/Type preparer's name Preparer's synature Preparer's synature	- 1	Date Check of Self-emotors					
	Paid		PATRICK JORDAN Firm's name INSERO & CO. CPAS, LLP		John Chilpho)					
		arer			Firm's EIN ▶	47-5324570				
	use	Only	Firm's address 401 E. STATE STREET ITHACA, NY 14850		Dhara 1.6	071 272 4444				
		. 44	RS discuss this return with the preparer shown above? (see instructions)		j Phone no. (O	07) 272-4444 X Yes No				
	rvia\	, ine	no discuss this return with the preparer shown above? (see instructions)			LALTES I INO				

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Form 990 (2017) OTSEGO 2000, INC.

Part IV Checklist of Required Schedules

1 is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? 1				Yes	No
## Yes,* complete Schedule A If I X If I X If I X If the organization required to complete Schedule B, Schedule of Contributors? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? ## Yes,* complete Schedule C, Part I If the organization a section 501(6)(5) organization, bid the organization organization organization of the procedure 98-197 #* Yes,* complete Schedule C, Part II If the organization as section 501(6)(5)(4), 501(6)(5), 501(6)(6) organization that receives membership dues, assessments, or semilar amounts as defined in Revenue Procedure 98-197 #* Yes,* complete Schedule C, Part II B obt the organization reserved in Otal a conservation date or any similar funds or accounts of ## Wes,* complete Schedule D, Part II Did the organization reserved in Otal a conservation cassement, including easements to reserve open space, the amorphism shall be organization maintain collections of works of art, historical treasures, or other similar assets? #* Yes,* complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? ## Yes,* complete Schedule D, Part II Did the organization amount in Part X, line 21, for secrow or custodial account lability, serve as a custodian for amounts not lated in Part X, inc 10 or through a related organization, held assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? ## Yes,* complete Schedule D, Part VIII Did the organization assets are port an amount for investments of the amount of the part X, line 10 or ## Yes,* complete Schedule D, Part VIII Did the organization are amount for investments of the contribution of the tax lasts assets reported in Part X, line 10 or ## Yes,* complete Schedule D, Part X III Did the organization organization are amount for other labilities of the part X line 10 organization are organization in election 1000 organization election or consolidate	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	<u> </u>	163	140
2 Is the organization required to complete <i>Schedule B, Schedule C, Centributions</i> ? 3 Did the organization engage in identification of investigation of investigation of the organization of investigation or inv		•	1	х	
3 Det the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public offect if "Yes," complete Schedule C, Part II Section 501(c)(3) organizations. Did the organization engage in lioblying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part III b Is the organization in ascetina of (D(e)), 501(c)(6), 501(c)(6		\cdot	2	X	
public office? If If Yes, 'complete Schedule C, Part II Section 501c((3) organizations. Did the organization engage in lobbying activities, or have a section 501(n) election in effect during the tax year? If Yes, 'complete Schedule C, Part III Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(5), or 501(c)(5), or 501(c)(5), or 501(c)(5), or 501(c)(5). Or 501(c)(5) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedule of \$1919 if Yes, 'complete Schedule C, Part III Did the organization manitan any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the detathion or investment of amounts in such funds or accounts? If Yes, 'complete Schedule D, Part II Did the organization manitan any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the detathion or investment of amounts in such that or search or any similar funds or accounts for which donors have the right to provide advise on the detathion or any similar funds or accounts for which donors have the right to provide schedule D, Part II Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, and the provide advise of the schedule D, Part II Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 147 x Yes, complete Schedule D, Part V II Did the organization report an amount for land, buildings, and equipment in Part X, line 197 x Yes, complete Schedule D, Part V II Did the organization report an amount for investments or sopram related in Part X, line 197 x Yes, complete Schedule D, Part V II Did the organization report an amount for other assets in Part X, line 197 x Yes, complete Schedule D, Part V II Did the organization separate or consolidated financial statements for the tax year include a footbook that add					
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(n) election in effect during the tax year? If "Yes," complete Schedule C, Part III 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98.197 If "Yes," complete Schedule C, Part III 5 Did the organization receive or hold a conservation essement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III 6 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV 8 Did the organization directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasisendowments? If "Yes," complete Schedule D, Part IV 10 Did the organization report an amount for bland, buildings, and equipment in Part X, line 107 If "Yes," complete Schedule D, Part IV 11 If the organization report an amount for revestments of the securities in Part X, line 107 If "Yes," complete Schedule D, Part IVI 12 Did the organization report an amount for other assets in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part IVII 13 Did the organization report an amount for other assets in Part X, line 157 If Yes, complete Schedule D, Part IVIII 14 Did the organization report an amount for other assets in Part X, line 157 If Yes, complete Schedule D, Part IVIII 15 Did the organization report an amount for other assets in Part X, line 157 If Yes, complete Schedule D, Part X VIII 16 Did the organization report an amount for other assets in Part X, line 157 If Yes, complete Schedule D		public office? If "Yes." complete Schedule C. Part I	3		X
s the organization a section \$01(c)(4), \$01(c)(5), or \$01(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 99:197 (**) **(**)**, **complete Schedule C, Part III** Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? (**) "Yes,** complete Schedule D, Part II** Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? (**) "Yes,** complete Schedule D, Part II** Did the organization intended organization, hold assets in temporanity restricted endowments, permanent endowments, or quasi-endowments? (**) "Yes,** complete Schedule D, Part II** Did the organization report an amount for liand, buildings, and equipment in Part X, line 10? (**) "Yes,** complete Schedule D, Part III** Did the organization report an amount for investments - organization report an amount for orbiter assets in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? (**) "Yes,** complete Schedule D, Part III** Did the organization report an amount for orbiter assets in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? (**) "Yes,** complete Schedule D, Part III** Did the organization report an amount for orbiter assets in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? (**) "Yes,** complete Schedule D, Part X** Did the organization report an amount for orbiter assets in Part X, line 15 that is 5% or m	4				
5 Is the organization a section SOI (c)(4), 501 (c)(5), or SOI (c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? # "yes," complete Schedule C, Part III of the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in clied in Part X. In a 19 organization maintain collections of works of art, historical treasures, or other similar assets? # "yes," complete Schedule D, Part III of the organization maintain collections of works of art, historical treasures, or other similar assets? # yes," complete Schedule D, Part IVI or the organization or frough a related organization, hold assets in temporanily restricted endowments, permanent endowments, or quasi-endowments? # "yes," complete Schedule D, Part V or the organization report an amount for liand, buildings, and equipment in Part X, line 10? # "yes," complete Schedule D, Part V or but the organization report an amount for investments - program related in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? # "yes," complete Schedule D, Part V or but the organization report an amount for other liabilities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? # "yes," complete Schedule D, Part X or but the organization report an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? # "yes," complete Schedule D, Part X or but the organization about an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? # "yes," complete Schedule D, Part X or but the organiz			4		X
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6 Did the organization maintain any dinoror advised funds or any similar funds or accounts for which dinors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? ## 'Yes,* complete Schedule D, Part ## 7 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? ## 'Yes, complete Schedule D, Part ## 8 8 X 9 Did the organization or amounts in collections of works of art, historical treasures, or other similar assets? ## 'Yes,* complete Schedule D, Part ## 9 10 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? ## 'Yes,* complete Schedule D, Part V ## 10 Did the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V, If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V, V, II, VIII, IX, or X as applicable 3 Did the organization report an amount for investments of the securities in Part X, line 10? #* 'Yes,* complete Schedule D, Part VIII 4 Did the organization report an amount for investments or the securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? #* 'Yes,* complete Schedule D, Part VIII 5 Did the organization report an amount for other isabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? #* 'Yes,* complete Schedule D, Part X 110 Did the organization or an amount for other isabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? #* 'Yes,* complete Schedule D, Part X 111 Did the organization an amount for other isabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? #* 'Yes,* comple		similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X_
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Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporanily restricted endowments, permanent endowments, or quasi-endowments, or quasi-endowed endowments, permanents, or quasi-endowed endowments, permanents and program amount for inure stances of endouble or part X, line 15 (" Yes," complete Schedule P, Parts X q		the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If Yes, "complete Schedule D, Part VI Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part VI If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI Did the organization report an amount for investments other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments is program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for westments program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part X The Did the organization organization and the part X in the part X in the 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X The Did the organization organization and the part X in Part X, line 15? If "Yes," complete Schedule D, Part X The Did the organization organization and the part X in the part	8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			ļ
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b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 bid the organization maintain an office, employees, or agents outside of the United States? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 10 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	12a		۱.,		
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1c and 8a? If "Yes," complete Schedule G, Part II	12		<u>Г</u>	t	╁┋
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? # "Yes," complete Schedule G. Part III			18	x	[
complete Schedule G. Part III	19		<u> </u>		
			19		х
				990	_

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	i		
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	l		
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	ļ		
	of any of these persons? If "Yes," complete Schedule L, Part III	27		_X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	<u> </u>	X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		_X_
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	_36	L	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	L	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990	(2017)

	MOIG.	3
b	Enter	th

13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state?

a Initiation fees and capital contributions included on Part VIII, line 12

Section 501(c)(7) organizations. Enter

Section 501(c)(12) organizations. Entera Gross income from members or shareholders

amounts due or received from them.)

Note. See the instructions for additional information the organization must report on Schedule O.

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

b Gross income from other sources (Do not net amounts due or paid to other sources against

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

ne amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

12a

13a

10a

10b

12b

Form 990 (2017)

Form 990 (2017) OTSEGO 2000, INC. 11-2654945 Page Part VI, Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below 7b below

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O	See ın:	structions							
	Check if Schedule O contains a response or note to any line in this Part VI						X			
Sec	ion A. Governing Body and Management									
						Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year	<u>1a</u>		20						
	If there are material differences in voting rights among members of the governing body, or if the governing				ļ					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.									
b	Enter the number of voting members included in line 1a, above, who are independent	1b		20			·			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	iny other							
	officer, director, trustee, or key employee?		•		2		<u>X</u>			
3	Did the organization delegate control over management duties customarily performed by or under the	e direct	supervision							
_	of officers, directors, or trustees, or key employees to a management company or other person?				3		X			
4										
5	Did the organization become aware during the year of a significant diversion of the organization's ass				5		X			
6	Did the organization have members or stockholders?			•	6		X			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	nnoint d	one or	•			_==_			
	more members of the governing body?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	J.1.5 C.		7a		x			
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, si	tockhol	 Iders or	٠	- ''					
	persons other than the governing body?	-551410			7b		х			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar hv tha	following:		-0		<u> </u>			
a	The governing body?	an Dy tilt	, ronowing.		8a	X				
b	Each committee with authority to act on behalf of the governing body?		••		8b	X				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	abad a	t the	•	-00					
9	organization's mailing address? If "Yes." provide the names and addresses in Schedule O	crieu a	t tri e		9		х			
Sec			0.4.1		9					
<u> </u>	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Coae.)			V				
40-	Did the organization have local chapters, branches, or affiliates?				40-	Yes	No X			
	If "Yes," did the organization have written policies and procedures governing the activities of such ch		offiliates	•	10a					
ь	and branches to ensure their operations are consistent with the organization's exempt purposes?	iapieis	, annates,		10b					
44.	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	v hofor		m2	11a	X				
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	y beloi	e ming the for	""'	Ha	^				
b 40-					40-	X				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to cont	· · ·		12a	X				
b			•• •	• •	12b					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	res," d	escribe		40-	x				
40	In Schedule O how this was done		•	•	12c	-	X			
13	Did the organization have a written whistleblower policy?		•		13	X				
14	Did the organization have a written document retention and destruction policy?				14	^	$\overline{}$			
15	Did the process for determining compensation of the following persons include a review and approva	al by inc	dependent							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				L	- V	لـــــا			
_	The organization's CEO, Executive Director, or top management official				15a	X	v			
b	, , ,		•		15b		X			
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).						1			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger						╙╫┦			
	taxable entity during the year?			•••	16a		X			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua		•							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	nization	ı's				Щ.			
	exempt status with respect to such arrangements?				16b					
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed NY									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-1	(Secti	on 501(c)(3)s (only) av	aılable	•				
	for public inspection. Indicate how you made these available. Check all that apply.									
	Own website X Another's website X Upon request Other (explain									
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	nflict of	finterest polic	y, and	financ	ıal				
	statements available to the public during the tax year.									
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks and	d records.							
	THE ORGANIZATION - (607)547-8881									
	PO BOX 1130, COOPERSTOWN, NY 13326-1130									
					_	CMOV	(0047)			

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees, officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per		not cl	Pos neck i	more	l than o		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director			recto	Highest compensated employee	tee)	from the	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) NICOLE DILLINGHAM	2.00					ĺ				_
PRESIDENT		X		X		<u> </u>		0.	0.	0.
(2) KENT BARWICK	2.00	l								
DIRECTOR		X			!	↓_	_	0.	0.	0.
(3) RICHMOND HULSE SR.	2.00	l							_	_
DIRECTOR (PART YEAR)	+	X	_	<u> </u>	<u> </u>	├		0.	0.	0.
(4) SUSAN HUXTABLE	2.00			Ι.						_
DIRECTOR		X	<u> </u>		<u> </u>	 	<u> </u>	0.	0.	0.
(5) HUGH MACDOUGALL	2.00	۱.,						1		
DIRECTOR		X	-	<u> </u>	<u> </u>	⊢	_	0.	0.	0.
(6) ELINOR VINCENT	2.00	٠,		۱,,			ļ			
VICE PRESIDENT	+	X	-	X	<u> </u>	├	├	0.	0.	0.
(7) SYDNEY WALLER	2.00	Į.,							_	
DIRECTOR	2 00	X	⊢		-	├	-	0.	0.	0.
(8) LARRY BENNETT	2.00	₩.		l						
(9) DAVID HUTCHISON	2.00	X	├	 	-	├	├	0.	0.	0.
• • •	2.00	x							۱ ۵	_
(10) JAMES LACAVA	2.00	┝	├	<u> </u>	-	┝╌	┝	0.	0.	0.
DIRECTOR	2.00	X		1		1	1	0.	0.	_
(11) JAMES DALTON	2.00	12	 		├	╁╌	-	ļ 0.	<u> </u>	0.
DIRECTOR	2.00	X	1				ļ	0.	0.	0.
(12) CHAD MCEVOY	2.00	 ^	╁	┢	┢	╁╌	┢	 	0.	
TREASURER/DIRECTOR	2.00	\mathbf{x}			l			0.	0.	0.
(13) JULIE HUNTSMAN	2.00	1	\vdash	┢	┢	\vdash	\vdash	 		- 0.
SECRETARY	2.00	X		х				0.	0.	0.
(14) MARC KINGSLEY	2.00	 ^	t^-	1	\vdash	+-	\vdash	 	J.	<u></u>
DIRECTOR	2.00	X			l		1	0.	0.	0.
(15) JAMES HERMAN	2.00	 	1-	\vdash	t^-	┼	\vdash	 		<u> </u>
DIRECTOR		\mathbf{x}	1		ļ	1		0.	0.	0.
(16) JOANNE TOBEY	2.00	†	 	H	1	T	\vdash	† -		
DIRECTOR	<u> </u>	x	1	1	1		1	0.	0.	0.
(17) ELIZABETH COOPER	2.00	1		\vdash	T	\vdash	t	 		
DIRECTOR		x		l		1	l	0.	O.	0.

732007 11-28-17

Form 990 (2017)

(A) Name and title	(B) Average	(do		(C Pos	C) Ition			(D) Reportable	(E) Reportable		(F) Estimat	
	hours per week (list any hours for related organizations below line)	tee or director			recto	Highest compensated sand semployee	tee)	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)		amount other ompens from the organization	ation ne tion ited
(18) WAYNE MELLOR	2.00											•
DIRECTOR/TREASURER (19) KATHARINE MUIR	2.00	X		Х		 	-	0.	0	+		0.
DIRECTOR	2.00	x		<u> </u>]	1	1	0.	o	1		0.
(20) ROBERT NELSON	2.00	<u> </u>		\vdash		┢		•		•		<u> </u>
DIRECTOR		x						0.	0			0.
(21) DANIEL SULLIVAN	2.00			-					<u> </u>	- -		
DIRECTOR		x						0.	O			0.
(22) ELLEN POPE	40.00											
EXECUTIVE DIRECTOR		L		X	L	ļ	L	58,560.	0		7,9	52.
											-	
		Γ										
1b Sub-total				L				58,560.	C	•	7,9	52.
c Total from continuation sheets to Part VI	I, Section A						•	0.	0	$\overline{\cdot}$		0.
d Total (add lines 1b and 1c)							>	58,560.	C	•	7,9	52.
2 Total number of individuals (including but no compensation from the organization	ot limited to th	ose	liste	ed at	oove	e) wh	o re	eceived more than \$100,	000 of reportable			0
											Yes	No
3 Did the organization list any former officer	director, or tru	uste	e, ke	ey er	nplo	yee.	, or l	highest compensated er	nployee on			
line 1a? If "Yes," complete Schedule J for s									نــا	3	X	
4 For any individual listed on line 1a, is the su	-							•	he organization	\vdash		
and related organizations greater than \$150										\vdash	4	X
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," con							elate	ed organization or individ	Juai for services	<u> </u>	5	X
Section B. Independent Contractors	iblete Scheaul	елт	Or.SI	<i>ICN</i>	oers	ion		····			3_1	<u> </u>
Complete this table for your five highest co	mpensated inc	depe	nde	nt co	ontr	acto	rs th	nat received more than \$	5100 000 of comper	sation	n from	
the organization Report compensation for									•			
(A) Name and business			INC					(B) Description of s		Corr	(C) npensatio	nn
		141	<u> </u>	<u></u>								
				-			-					-
							\dashv					
							\dashv					
							_					
Total number of independent contractors (i \$100,000 of compensation from the organi	-	ot li	mite	d to		se lis	sted	above) who received mi	ore than			
				_						Fo	m 990	(2017)

20540730 769695 9601

	-	Check if Schedule O contain	s a response	or note to any line	e in this Part VIII			[]
		O TOSK II OU TOGGO O COMAIN	is a response	or note to any line	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribution All other contributions, gifts, grants, similar amounts not included above Noncash contributions included in lines 1a- Total. Add lines 1a-1f	and 1f	1,500. 179,928. 1,209. Business Code	181,428.			
<u>8</u>	2 a	FARMERS MARKET		445200	37,037.	37,037.		
Program Service Revenue	b d e							
	•	Total. Add lines 2a-2f			37,037.			
	3 4 5	Investment income (including direction other similar amounts) Income from investment of taxee Royalties		▶	3,728.			3,728.
			(i) Real	(iı) Personal				
		Gross rents Less rental expenses Rental income or (loss)						
	d	Net rental income or (loss)	-	>				
	ь	assets other than inventory Less: cost or other basis and sales expenses	(i) Secunties	(ii) Other				
		Gain or (loss)	·	<u> </u>	····			<u> </u>
Other Revenue		Net gain or (loss) Gross income from fundraising e including \$ contributions reported on line 10	of					
er Re		Part IV, line 18		92,075.	-			
Ö		Less: direct expenses	b	65,602.	26,473.		·	26 472
	9 a	Net income or (loss) from fundra Gross income from gaming active Part IV, line 19	rities. See		20,4/3.			26,473.
		Less: direct expenses Net income or (loss) from gaming					<u>-</u>	
	10 a	Gross sales of inventory, less ret and allowances	_				,	
		: Net income or (loss) from sales of	of inventory					
	11 ~	Miscellaneous Revenue MISCELLANEOUS IN	COME	Business Code 900099	4,568.	4,568.		
	li a			300033	4,300.	4,500.		
	d	-,						
		All other revenue		<u> </u>	A E C O			ļ
	12	Total. Add lines 11a-11d Total revenue. See instructions.	••••		4,568. 253,234.	41,605.	0.	30,201.
73200	9 11-2	·····	· ·	·	233,2346	37,000,0	<u> </u>	Form 990 (2017)

Form 990 (2017) OTSEGO 2000, INC.
Part IX Statement of Functional Expenses

Do n	Check if Schedule O contains a respons of include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b, 8	Bb, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic	ļ	ļ	ļ	
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign	İ		Ì	
	organizations, foreign governments, and foreign	}			
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	65 516	44 422	15 000	6 065
	trustees, and key employees	65,716.	44,431.	15,020.	6,265
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and		.	l l	
	persons described in section 4958(c)(3)(B)	CA 001	42 500	14 201	0 101
7	Other salaries and wages	64,981.	42,599.	14,281.	8,101.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	17,521.	11,738.	4,206.	1 577
9	Other employee benefits	9,700.	6,500.	2,910.	1,577
10	Payroll taxes		0,500.	2,310.	
11	Fees for services (non-employees):	}			
a	Management	22,273.	22,273.		
b	Legal .	7,110.	4,976.	2,134.	
	Accounting .	7,110.		2,131.	
	Lobbying				
	Investment management fees				
f	Other. (If line 11g amount exceeds 10% of line 25,				
y	column (A) amount, list line 11g expenses on Sch 0.)	7,299.	6,631.	605.	63
12	Advertising and promotion	16,222.	16,222.		
13	Office expenses	8,365.	2,666.	5,245.	454
14	Information technology				
15	Royalties				
16	Occupancy	13,112.	9,097.	4,015.	
17	Travel	334.	166.	168.	-
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,662.	1,098.	564.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,080.	1,456.	624.	
23	Insurance	1,967.	1,376.	591.	
24	Other expenses, Itemize expenses not covered	· · · · ·			
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)	ļ			
a	FARMERS MARKET	9,852.	9,852.		
b	CONTRACTOR OF THE CONTRACTOR	1,433.	1,003.	430.	
c	DOMANTONIC AND CITING	1,147.	1,147.		
d	DITTO AND CUID CONTRACTOR	890.	555.	335.	
	All other expenses	2,010.	855.	1,155.	
25	Total functional expenses. Add lines 1 through 24e	253,674.	184,641.	52,283.	16,750
<u>26</u>	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here fit following SOP 98-2 (ASC 958-720)			[

		Check if Schedule O contains a response or note to any line in this Part >		(A)		(B)
				Beginning of year		End of year
Τ	1	Cash - non-interest-bearing	- L	578,751.	1	42,985
1	2	Savings and temporary cash investments	. [14,647.	2	292,204
ı	3	Pledges and grants receivable, net			3	
Ì	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and former officers, directors,	Γ			
		trustees, key employees, and highest compensated employees. Complet	, [
		Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined in	nder			
Ì		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contri	outing			
		employers and sponsoring organizations of section 501(c)(9) voluntary				
		employees' beneficiary organizations (see instr). Complete Part II of Sch			6	
	7	Notes and loans receivable, net			7	
ı	8	Inventories for sale or use	<u> </u>		8	
ł	9	Prepaid expenses and deferred charges		7,039.	9	1,07
		Land, buildings, and equipment: cost or other				
Ì			579.			
1	b		415.	12,864.	10c	14,16
	11	Investments - publicly traded securities		721.	11	234,28
1	12	Investments - other securities. See Part IV, line 11	· -		12	
1	13	Investments - program related. See Part IV, line 11	<u> </u>		13	
١	14	Intangible assets	<u> </u>		14	
-	15	Other assets. See Part IV, line 11	 	5,285.	15	5,28
ı	16	Total assets. Add lines 1 through 15 (must equal line 34)	· ·	619,307.	16	589,99
+	17	Accounts payable and accrued expenses		26,426.	17	27
	18	Grants payable	<u> </u>	20/1201	18	
1	19	Deferred revenue			19	· - · · · · ·
-		Tax-exempt bond liabilities	-		20	···
- 1	20	Escrow or custodial account liability. Complete Part IV of Schedule D			-	
Ţ	21	Loans and other payables to current and former officers, directors, truste	<u> </u>		21	
:	22	• •				
		key employees, highest compensated employees, and disqualified person	15. -			
		Complete Part II of Schedule L	-		22	
	23	Secured mortgages and notes payable to unrelated third parties	-		23	
-	24	Unsecured notes and loans payable to unrelated third parties	-		24	
	25	Other liabilities (including federal income tax, payables to related third	.			
١		parties, and other liabilities not included on lines 17-24). Complete Part X	or		\	
١		Schedule D	-	26,426.	25	27
+	26	Total liabilities. Add lines 17 through 25		20,420.	26	
ı		Organizations that follow SFAS 117 (ASC 958), check here X	and			
3		complete lines 27 through 29, and lines 33 and 34.	-	500 771		E 4.7 21
	27	Unrestricted net assets	·· ·· -	580,771.	27	547,21
i	28	Temporarily restricted net assets	···· ⊢	12,110.	28	42,50
2	29	Permanently restricted net assets	╌┈┞	_	29	
2		Organizations that do not follow SFAS 117 (ASC 958), check here	`			
5		and complete lines 30 through 34.	<u> </u>			
3 [30	Capital stock or trust principal, or current funds			30	
3	31	Paid-in or capital surplus, or land, building, or equipment fund	. -		31	
Social distriction	32	Retained earnings, endowment, accumulated income, or other funds		500 001	32	
-	33	Total net assets or fund balances	. -	592,881.	33	589,72
- 1	34	Total liabilities and net assets/fund balances		619,307.	34	589,99!

	n 990 (2017) OTSEGO 2000, INC.	11-2654945	Page 12
Pa	rt XI, Reconciliation of Net Assets		age 12
	Check if Schedule O contains a response or note to any line in this Part XI		
1	Total revenue (must equal Part VIII, column (A), line 12)	1 25	3,234.
2	Total expenses (must equal Part IX, column (A), line 25)		3,674.
3	Revenue less expenses Subtract line 2 from line 1	3	-440.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4 59	2,881.
5	Net unrealized gains (losses) on investments		$\frac{2,716}{2}$
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,		<u>··</u>
_	_column (B))	10 589	9,725.
Pa	rt XII Financial Statements and Reporting		271230
	Check if Schedule O contains a response or note to any line in this Part XII		X
			Yes No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other	<u></u>	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule C).	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	22	- $+$ x $-$
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed of	on a	-
	separate basis, consolidated basis, or both		
	Separate basis Consolidated basis Both consolidated and separate basis		
b	Were the organization's financial statements audited by an independent accountant?	2b	$\overline{\mathbf{x}}$
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate I	nasis	
	consolidated basis, or both		
	X Separate basis Consolidated basis Both consolidated and separate basis		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit	
	review, or compilation of its financial statements and selection of an independent accountant?	2c	$\overline{\mathbf{x}}$
	If the organization changed either its oversight process or selection process during the tax year, explain in Sched	ule O	
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single	le Audit	
	Act and OMB Circular A-133?	32	$\frac{1}{x}$
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	d audit	
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3h	
			990 (2017)
		FORTI	2017)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2017

Open to Public Inspection

Employer identification number Name of the organization OTSEGO 2000 11-2654945 INC. Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi), (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or 12 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with. its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV. Sections A and D. and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations g Provide the following information about the supported organization(s) (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions))

Total

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual grants ")	209,278.	25 <u>1,9</u> 42.	229,194.	494,512.	181,428.	1366354.
2	Tax revenues levied for the organ-						
	ızatıon's benefit and erther paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	222-272	0-1 0 10		101 = 10		
-	Total. Add lines 1 through 3	209,278.	251,942.	229,194.	494,512.	181,428.	1366354.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included			'			
	on line 1 that exceeds 2% of the						
	amount shown on line 11,]					
	column (f)						353,709.
	Public support. Subtract line 5 from line 4						1012645.
	tion B. Total Support			· · · ·			
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	209,278.	251,942.	229,194.	494,512.	181,428.	1366354.
8	Gross income from interest,						
	dividends, payments received on	<u>'</u>					
	securities loans, rents, royalties,	0.54	2=6				
	and income from similar sources	854.	356.	757.	2,061.	3,728.	7,756.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carned on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)					_	
11	Total support. Add lines 7 through 10		<u> </u>	l	<u> </u>		1374110.
12	-	•	•			12	512,450.
13	First five years. If the Form 990 is fo	-	s first, second, thir	d, fourth, or fifth ta	ax year as a section	501(c)(3)	
Se	organization, check this box and stoction C. Computation of Publi	_{p here} ic Support Per	centage				
	Public support percentage for 2017 (olumn (f))		14	73.69 %
	Public support percentage from 2016	• • •	-		•	15	75.18 %
	33 1/3% support test - 2017. If the			n line 13, and line	14 is 33 1/3% or m	ore, check this box	
	stop here. The organization qualifies	=					▶ X
t	33 1/3% support test - 2016. If the	organization did no	ot check a box on I				
	and stop here. The organization qua	-			•		▶□
17a	10% -facts-and-circumstances test	•	•			*	or more.
	and if the organization meets the "fac	-					- •
	meets the "facts-and-circumstances"						▶□
1	10% -facts-and-circumstances test				•	7a, and line 15 is	10% or
	more, and if the organization meets the						
	organization meets the "facts-and-circ				•		▶□
18	Private foundation. If the organization		-	•			
						dule A (Form 990	

Schedule A (Form 990 or 990 EZ) 2017 OTSEGO 2000, INC. Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to

Section A. Public Support	511, picass 55p					
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")				4		y y
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
The value of services or facilities furnished by a governmental unit to the organization without charge				11		
6 Total. Add lines 1 through 5				7		
7a Amounts included on lines 1, 2, and				,		
3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that				i .		
exceed the greater of \$5,000 or 1% of the amount on line 13 for the year			.4			
c Add lines 7a and 7b			,//			
8 Public support. (Subtract line 7c from line 6)				1		
Section B. Total Support			/			
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6			/			
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources			/			
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b		/				
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		/				
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		,				
13 Total support. (Add lines 9, 10c, 11, and 12)	the esemplestical	Great page and Abilia	d founds of Chin	J	F01(a)(2)	
14 First five years. If the Form 990 is for	ule organization:	s iirst, secona, thir	a, rourth, or timb t	ax year as a section	1 30 1(c)(3) organiz	ation,
check this box and stop here Section C. Computation of Public	Support Per	rcentage	 		 	<u> </u>
			roluma (fi)		15	
15 Public support percentage for 2017 (III16 Public support percentage from 2016)				· · · · · · · · · · · · · · · · · · ·	16	<u>%</u>
Section D. Computation of Invest				· <u>·······</u>		<u> </u>
17 Investment income percentage for 20			ne 13, column (f))		17	%
18 Investment income percentage from 2			,		18	%
19a 33 1/3% support tests - 2017. If the			on line 14, and lin	e 15 is more than 3		
more than 33 1/3%, check this box an	_		•		•	
b 33 1/3% support tests - 2016. If the				- · ·		and
line 18 is not more than 33 1/3%, chec	•			•	•	▶□
20 Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see ins	tructions	▶

Schedule A (Form 990 or 990-EZ) 2017

732023 10-06-17

Yes No

Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I if you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E if you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Orgar	nizations	ons
---------------------------------	-----------	-----

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes." and *if* you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?

 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

1		
2		
3a		
3b		
3c		
\ \tilde{		
4a		
4b		
,	-	
4c	 	
5a		
5b		<u> </u>
5c		
6		
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_ 9a		
9b		
9c		
10a	-	
10b	 	H
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🔟 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

2 Enter 85% of line 1

Enter greater of line 2 or line 3

instructions).

Income tax imposed in prior year

Adjusted net income for prior year (from Section A, line 8, Column A)

6 Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

Minimum asset amount for prior year (from Section B, line 8, Column A)

2

3

4

5

	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations _(continued)				
Secti	on D - Distributions			Current Year			
1	Amounts paid to supported organizations to accomplish exer	mpt purposes					
2	Amounts paid to perform activity that directly furthers exempt purposes of supported						
	organizations, in excess of income from activity						
3_	Administrative expenses paid to accomplish exempt purpose	es of supported organizations					
4	Amounts paid to acquire exempt-use assets						
5_	Qualified set-aside amounts (prior IRS approval required)						
6	Other distributions (describe in Part VI) See instructions						
7	Total annual distributions. Add lines 1 through 6						
8	Distributions to attentive supported organizations to which the	ne organization is responsive					
	(provide details in Part VI). See instructions						
9	Distributable amount for 2017 from Section C, line 6						
10	Line 8 amount divided by line 9 amount						
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017			
1_	Distributable amount for 2017 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2017 (reason-						
	able cause required- explain in Part VI) See instructions						
3_	Excess distributions carryover, if any, to 2017						
а							
b	From 2013						
С	From 2014						
d	From 2015						
е_	From 2016						
f	Total of lines 3a through e						
g	Applied to underdistributions of prior years						
h	Applied to 2017 distributable amount						
i	Carryover from 2012 not applied (see instructions)						
i	Remainder Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2017 from Section D,						
	line 7·\$						
а	Applied to underdistributions of prior years						
b	Applied to 2017 distributable amount						
c	Remainder Subtract lines 4a and 4b from 4						
5	Remaining underdistributions for years prior to 2017, if						
	any Subtract lines 3g and 4a from line 2. For result greater						
	than zero, explain in Part VI. See instructions.						
6	Remaining underdistributions for 2017. Subtract lines 3h						
	and 4b from line 1 For result greater than zero, explain in	l.					
	Part VI See instructions						
7			<u> </u>				
•	and 4c.						
8							
	Excess from 2013						
	Excess from 2014						
	Excess from 2015						
	Excess from 2016						
	Excess from 2017						

Schedule A (Form 990 or 990-EZ) 2017

chedule A	(Form 990 or 990-EZ	2017 OTSEGO	<u> 2000, INC. </u>		11-2654945	Page
Part VI	Supplemental I Part IV, Section A, 1 line 1; Part IV, Secti	Information. Provi ines 1, 2, 3b, 3c, 4b, 4 ion D, lines 2 and 3, Pa	de the explanations requ c, 5a, 6, 9a, 9b, 9c, 11a art IV, Section E, lines 1c	, 11b, and 11c, Part IV, S c. 2a. 2b. 3a, and 3b: Part	art II, line 17a or 17b, Part III, line 12; ection B, lines 1 and 2, Part IV, Sectio V, line 1; Part V, Section B, line 1e, F for any additional information.	on C,
	(See instructions)		COULT E, INIES E, O, and	——————————————————————————————————————		
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		J				
						
2028 10-06-	17	<u> </u>			Schedule A (Form 990 or 99	0-EZ) 2

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations. Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations. Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy

Tax) (see separate instructions), then			·	
 Section 501(c)(4), (5), or (6) organization 	ons: Complete Part III			
Name of organization			Em	ployer identification number
OTSEGO 2	2000, INC.			11-2654945
Part I-A Complete if the orga	anization is exempt under	section 501(c) c	or is a section 527 o	rganization.
 Provide a description of the organization Political campaign activity expenditure Volunteer hours for political campaign 	ires	campaign activities in	n Part IV. . •	\$
Part I-B Complete if the orga	anization is exempt under	section 501(c)(3	3).	
1 Enter the amount of any excise tax i	ncurred by the organization under	section 4955	· · · · · · · · · · · · · · · · · ·	\$
2 Enter the amount of any excise tax i	ncurred by organization managers	under section 4955	. . ▶	\$
3 If the organization incurred a section	4955 tax, did it file Form 4720 for	r this year?		. Yes No
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV				
Part I-C Complete if the org	anization is exempt under	section 501(c),	except section 501	(c)(3).
1 Enter the amount directly expended	by the filing organization for section	on 527 exempt functi	ion activities	\$
2 Enter the amount of the filing organi	zation's funds contributed to othe	r organizations for se	ction 527	
exempt function activities	•		. ▶	\$
3 Total exempt function expenditures	Add lines 1 and 2. Enter here and	on Form 1120-POL,		
line 17b		•	. ▶	\$
4 Did the filing organization file Form	1120-POL for this year?			Yes No
5 Enter the names, addresses and em	ployer identification number (EIN)	of all section 527 pol	itical organizations to whi	ch the filing organization
made payments. For each organizat	ion listed, enter the amount paid f	rom the filing organiz	ation's funds. Also enter	the amount of political
contributions received that were pro	mptly and directly delivered to a s	eparate political orga	anization, such as a separ	ate segregated fund or a
political action committee (PAC) If a	additional space is needed, provide	information in Part I	IV	
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	contributions received and
			-	
	<u> </u>			-
		<u> </u>		
		 		
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For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2017

LHA

732041 11-09-17

Chedule C (Form 990 or 990 EZ) 2017 Of Part II-A Complete if the organ	rsego 2000,	INC.	501/c)(3) and filed	11-2 Form 5768 (ele	654945 Page:
section 501(h)).	nzation is exemp	of under Section .	oo i(c)(o) and med	11 01111 3700 (ele	cuon unaei
Check ▶ ☐ if the filing organization	n belongs to an affilia of excess lobbying ex	- · · ·	Part IV each affiliated g	roup member's name	e, address, EIN,
Check Filing organization	n checked box A and	"limited control" provi	sions apply		
	on Lobbying Expend ures" means amount			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influen	nce public opinion (gra	ass roots lobbying)		0.	
b Total lobbying expenditures to influei			[0.	
c Total lobbying expenditures (add line				0.	
d Other exempt purpose expenditures			[253,674.	
e Total exempt purpose expenditures (add lines 1c and 1d)		[253,674.	
f Lobbying nontaxable amount Enter	the amount from the f	ollowing table in both	columns.	50,735.	
If the amount on line 1e, column (a) or (b) is: The lobb	ying nontaxable amo	unt is:		
Not over \$500,000	20% of th	e amount on line 1e			
Over \$500,000 but not over \$1,000,0	000 \$100,000	plus 15% of the exces	ss over \$500,000.		
Over \$1,000,000 but not over \$1,500	0,000 \$175,000	plus 10% of the exces	ss over \$1,000,000		
Over \$1,500,000 but not over \$17,00	00,000 \$225,000	plus 5% of the excess	over \$1,500,000.		
Over \$17,000,000	\$1,000,00	00			
Cyceyests gentsychle amount (onto	r 25% of line 10			12,684.	
g Grassroots nontaxable amount (enterh Subtract line 1g from line 1a. If zero			·	0.	
i Subtract line 1f from line 1c if zero c		•	· · •	0.	
i If there is an amount other than zero		ne 1ı dıd the organizat	ion file Form 4720		·
reporting section 4911 tax for this ye		io ii, aid tiio organizat		[Yes I
(Some organizations tha	4-Year Aver	aging Period Under s 1(h) election do not ha te instructions for line	ave to complete all of	the five columns be	
	Lobbying Expend	ditures During 4-Year	Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2a Lobbying nontaxable amount	59,533.	60,599.	58,665.	50,735.	229,532
b Lobbying ceiling amount (150% of line 2a, column(e))				<u></u>	344,298
c Total lobbying expenditures	500.				500
d Grassroots nontaxable amount	14,883.	15,150.	14,666.	12,684.	57,383
e Grassroots ceiling amount (150% of line 2d, column (e))				 :	86,075
f Grassroots lobbying expenditures	500.				500

Schedule C (Form 990 or 990-EZ) 2017

Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	ch "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)	
	lobbying activity.	Yes	No	Amo	ount
	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		_		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		_		
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
_	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	<u> </u>			
<u>d</u>	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	1			
Par	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)(:	5), or sec	tion	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section				
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."				e 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	cal			
	expenses for which the section 527(f) tax was paid).				
	Current year		2a		
b	Carryover from last year		<u>2b</u>		
С	Total	• •	2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical			
	expenditure next year?		_4_		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		_
Par					
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-	A, lines 1 a	nd 2 (see	
ınstn	ctions); and Part II-B, line 1. Also, complete this part for any additional information.				
				·	-
					-
				-	

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

OTSEGO 2000, INC.

Employer identification number 11-2654945

Par	I Organizations Maintaining Donor Advised	d Funds or Other Similar Funds o	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advise	d funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be u	sed only
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpose co	onferring
	impermissible private benefit?		Yes No
Par	II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, Pa	art IV, line 7
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a histo	rically important land area
	Protection of natural habitat	Preservation of a certif	ied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form o	f a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ucture included in (a)	. 2c
d	Number of conservation easements included in (c) acquired a	after 7/25/06, and not on a historic structur	e
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the o	organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per	• • •	
	violations, and enforcement of the conservation easements if	•	. Yes . No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conse	ervation easements during the year
_	<u> </u>		
7	Amount of expenses incurred in monitoring, inspecting, hand	iling of violations, and enforcing conservati	on easements during the year
_		4700	V(A)(D)(2)
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(n	
_	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservati	·	
	include, if applicable, the text of the footnote to the organization operation	uons ililanciai statements triat describes ti	le organization's accounting for
Pa	t III Organizations Maintaining Collections of	Art. Historical Treasures, or Oth	er Similar Assets.
	Complete if the organization answered "Yes" on Form	·	
12	If the organization elected, as permitted under SFAS 116 (AS		ent and halance sheet works of art
10	historical treasures, or other similar assets held for public ext		
	the text of the footnote to its financial statements that descri		oo o, pasiio so, vioo, provido, iii i are xiii,
h	If the organization elected, as permitted under SFAS 116 (AS		and halance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	, , , , , , , , , , , , , , , , , , ,	•
	relating to these items:		in control, provide and teneving anticarno
	(i) Revenue included on Form 990, Part VIII, line 1		▶ \$
			· · · · > \$
2	If the organization received or held works of art, historical tre		
_	the following amounts required to be reported under SFAS 1		• · · · · · · · · · · · · · · · · · · ·
а	5		▶ \$
b	Assets included in Form 990, Part X		→ \$ 5,285.
	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.	Schedule D (Form 990) 2017

732051 10-09-17

Sched		2000, INC.						11-26	54945	Page 2
Part										
	(check all that apply)									
а	X Public exhibition	d			hange progra	ıms				
b	Scholarly research	е	Ш	Other						
С	Preservation for future generations						_			
	Provide a description of the organization's co	•		-	•			se in Part	XIII.	
	During the year, did the organization solicit or				•	r sımılar	assets	_	7 v	[▽]
Par	to be sold to raise funds rather than to be ma							<u>L</u>	Yes	X No
	reported an amount on Form 990, Par		ie ii trie	organizatio	n answered	res on	romi 990	J, Part IV,	line 9, or	
	Is the organization an agent, trustee, custodia		any for a		or other see	eate not u	ncluded			
	on Form 990, Part X?	and other intermedi	ary ior c	Johnhoutions	o or ourier ass	ers not ii	iciaaea	Γ-	Yes	□No
	If "Yes," explain the arrangement in Part XIII a	and complete the foll	 owina t	ahle.	•				_ res	L NO
-	in 100, explain the artangement in Fact Aire	and complete the following	ownig t	abic					Amount	
С	Beginning balance						1c		Amount	
	Additions during the year						1d			
	Distributions during the year	•		•			1e			
	Ending balance			•			1f			
	Did the organization include an amount on Fo	orm 990, Part X, line	21, for (escrow or cu	Istodial accoi	unt liabili			Yes	No
	If "Yes," explain the arrangement in Part XIII									
Par	t V Endowment Funds. Complete r	f the organization an	swered	"Yes" on Fo	rm 990, Part	IV, line 1	0			
		(a) Current year		nor year	(c) Two year			years back	(e) Four y	ears back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses		_							
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs								<u></u>	
f	Administrative expenses						_			
g	End of year balance				<u></u>					
2	Provide the estimated percentage of the curr	ent year end balance	e (line 1ç	g, column (a))) held as.					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Temporarily restricted endowment ▶	%								
	The percentages on lines 2a, 2b, and 2c show									
3a	Are there endowment funds not in the posse	ssion of the organiza	tion tha	it are held ar	nd administer	ed for th	e organız	ation	_	
	by:								<u> </u>	Yes No
	(i) unrelated organizations .	•		•					3a(i)	 -
	(ii) related organizations									
	If "Yes" on line 3a(ii), are the related organiza	•							_3b	L
Day	4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment.									
<u> rai</u>			Dort IV	/ line 11a S	oo Form 000	Dort V	lino 10			
	Complete if the organization answere			T					4-0 D1	
	Description of property	(a) Cost or o basis (investr		1 17	t or other (other)		ccumulat preciatior		(d) Book	value
	Load	Jasis (mvesti		Dasis	(50.101)	08	prociation	'- -		
	Land			 						
b	Buildings			 				- 		
C	Leasehold improvements	·		1 3	6,579.		22,4	15	1 /	,164.
	Equipment			 	0,0,19.		44,4		14	, 104.
	Other	must Form 000, D==	V 0=1:			L		 -	1 1	,164.
10ta	. Aud mies Ta miough Te. (Column (a) must e	oual Form 990, Part	A. COIUI	uu (e). Iine. 1	<i>UC.1</i>			Schodul		990) 2017
								~cuu11	- TI () ()	JJU1 20 11

THE ARTWORK COLLECTION CONSISTS OF 9 PHOTOGRAPHIC WORKS BY LOCAL ARTISTS

OF LOCAL LANDSCAPES WHO DONATED THEIR WORKS TO OTSEGO 2000 IN MEMORY OF

HENRY S.F. COOPER, THE ORGANIZATION'S FOUNDER. THEY WERE PART OF AN

EXHIBITION OF PHOTOGRAPHS OTSEGO 2000 ORGANIZED TO MEMORIALIZE HENRY

FOLLOWING HIS DEATH IN EARLY 2016. THE EXHIBITION, TITLED ALMOST LOST

LANDSCAPES: THE LEGACY OF HENRY S.F. COOPER, FOCUSED ON THE AGRICULTURAL

AND NATURAL LANDSCAPES AROUND OTSEGO REGION WHICH HAD BEEN THREATENED BY

INDUSTRIAL DEVELOPMENT AND WHICH OTSEGO 2000 SUCCESSFULLY PROTECTED

THROUGH ITS ADVOCACY WORK OVER 35 YEARS. ACCOMPANYING THE PHOTOGRAPHS ARE

NINE LARGE (2.5' X 4') VINYL PANELS MOUNTED ON FOAM CORE WITH QUOTATIONS

ABOUT THE OTSEGO LANDSCAPE FROM NOTED LOCAL LEADERS, INCLUDING JAMES

Schedule D (Form 990) 2017

732054 10-09-17

Schedule D (Form 990) 2017 OTSEGO 2000, INC.	11-2654945 Page 5
Dort VIII O	
FENIMORE COOPER, SUSAN FENIMORE COOPER	R, HENRY COOPER, AND MORE. THE ART
COLLECTION IS DISPLAYED TOGETHER WITH	THE PANELS IN OTSEGO 2000'S
CONFERENCE ROOM AND PUBLIC AREAS AS A	CONSTANT REMINDER OF OUR MISSION AND
HISTORY.	
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
DIRECT FUNDRAISING EXPENSES	65,602.
PART XII, LINE 2D - OTHER ADJUSTMENTS	
DIRECT FUNDRAISING EXPENSES	65,602.

Schedule D (Form 990) 2017

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047

Open to Public

Department of the Treasury

➤ Attach to Form 990 or Form 990-EZ. Internal Revenue Service Inspection Go to www.irs.gov/Form990 for the latest instructions. Name of the organization Employer identification number OTSEGO 2000, INC. 11-2654945 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17 Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants Internet and email solicitations Solicitation of government grants h Phone solicitations Special fundraising events In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes ີ No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) have custody or entity (fundraiser) fundraiser from activity organization listed in col (i) Yes No 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

Schedule G (Form 990 or 990-EZ) 2017

<u>Sche</u>	dule G (Form 990 or 990-EZ) 2017 OTSEGO 2000, INC.	<u>11-2</u>	<u>654945</u>	Page 3
	Does the organization conduct gaming activities with nonmembers?		Yes	☐ No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	☐ No
3	Indicate the percentage of gaming activity conducted in.	-		
а	The organization's facility	- 1	13a	9
ь	An outside facility		13b	9
4	Enter the name and address of the person who prepares the organization's gaming/special events books and record	ls:		
	Name			
	Address >			
5a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount	ount		
	of gaming revenue retained by the third party > \$			
С	If "Yes," enter name and address of the third party			
	Name			
	Address >			
16	Gaming manager information:			
	Name			
	Gaming manager compensation > \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	L No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent i	n the		
Da	organization's own exempt activities during the tax year > \$ **T IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and f	Doet III. Isa	0 05 10	N. 454
Га	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and find 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions	art III, IIn	les 9, 90, 10	JD, 15D,
	15c, 16, and 17b, as applicable. Also provide any additional information. See instructions			
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7320	83 09-13-17 Schedule	: G (Form	1990 or 990)-EZ) 2017

nedule G (Form 990 or 990-EZ) OTSEGO 2000, INC. art IV Supplemental Information (continued)	11-2654945 Pac
Supplemental information (continued)	
	
	
	
	
	
	
	

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Name of the organization

OTSEGO 2000, INC. **Employer identification number** 11-2654945

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
LAKE REGION AND NORTHERN OTSEGO COUNTY.

OTSEGO 2000 BELIEVES THAT THE OTSEGO LAKE REGION IS A MASTERPIECE OF
NATURE, AND THAT ITS SURROUNDING LANDSCAPES, VALLEYS, VILLAGES, AND
FARMS CONSTITUTE A UNIQUE CONFLUENCE OF HISTORIC, ENVIRONMENTAL,
CULTURAL, AGRICULTURAL, RURAL, AND SCENIC RESOURCES. WE BELIEVE THAT
THE LONG-TERM ECONOMIC WELL-BEING OF THE REGION AND THE QUALITY OF LIFE
FOR ITS RESIDENTS DERIVES FROM THESE RESOURCES AND THEIR STEWARDSHIP.
THUS, WE SEEK TO PROTECT THESE ATTRIBUTES FOR THE BENEFIT OF PRESENT
AND FUTURE GENERATIONS. AS NO PLACE IS AN ISLAND, WE EXTEND OUR CONCERN
AND PROGRAMS TO THE REGION'S LARGER SETTING IN CENTRAL NEW YORK. WE
ADVANCE OUR MISSION THROUGH INFORMED ADVOCACY, PUBLIC EDUCATION,
INNOVATIVE PROJECTS, ECONOMIC ALTERNATIVES, AND STRATEGIC CAMPAIGNS.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
OTSEGO 2000 BELIEVES THAT THE OTSEGO LAKE REGION IS A MASTERPIECE OF
NATURE, AND THAT ITS SURROUNDING LANDSCAPES, VALLEYS, VILLAGES, AND
FARMS CONSTITUTE A UNIQUE CONFLUENCE OF HISTORIC, ENVIRONMENTAL,
CULTURAL, AGRICULTURAL, RURAL, AND SCENIC RESOURCES. WE BELIEVE THAT
THE LONG-TERM ECONOMIC WELL-BEING OF THE REGION AND THE QUALITY OF LIFE
FOR ITS RESIDENTS DERIVES FROM THESE RESOURCES AND THEIR STEWARDSHIP.
THUS, WE SEEK TO PROTECT THESE ATTRIBUTES FOR THE BENEFIT OF PRESENT
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AND PROGRAMS TO THE REGION'S LARGER SETTING IN CENTRAL NEW YORK. WE
ADVANCE OUR MISSION THROUGH INFORMED ADVOCACY, PUBLIC EDUCATION,
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2017)

Schedule O (Form 990 or 990-EZ) (2017) Page 2 Employer identification number Name of the organization OTSEGO 2000, INC. 11-2654945 INNOVATIVE PROJECTS, ECONOMIC ALTERNATIVES, AND STRATEGIC CAMPAIGNS. FORM 990, PART VI, SECTION B, LINE 11B: THE AUDIT COMMITTEE AND THE FULL BOARD OF TRUSTEES EACH RECEIVE A COPY OF THE FORM 990 TEN DAYS PRIOR TO THE BOARD MEETING. THE FORM 990 IS DISCUSSED AND VOTED UPON AT THE BOARD MEETING. FORM 990, PART VI, SECTION B, LINE 12C: DIRECTORS AND KEY EMPLOYEES ARE REQUIRED TO REPORT ANY POTENTIAL CONFLICTS OF INTEREST WHEN THEY ARISE, RECUSE THEMSELVES FROM DECISION-MAKING, AND REPORT CONFLICTS ON A CONFLICT OF INTEREST DISCLOSURE FORM ANNUALLY IN DECEMBER. FORM 990, PART VI, SECTION B, LINE 15A: THE EXECUTIVE DIRECTOR'S COMPENSATION IS BASED ON THE PERFORMANCE REVIEW DONE BY THE BOARD OF DIRECTORS. THIS IS ALSO DONE WITH A RATE OF PAY REVIEW TO SEE IF THE INCREASE IS MERITED. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. FORM 990, PAGE 12, PART XII, LINE 2C THE PROCESS FOR AUDIT OVERSIGHT AND AUDITOR SELECTION HAS NOT CHANGED FROM THE PRIOR YEAR.