

Form 990-PF

Department of the Treasury  
Internal Revenue Service

## Return of Private Foundation

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

- Do not enter social security numbers on this form as it may be made public.
- Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.

2018

Open to Public  
Inspection

For calendar year 2018, or tax year beginning 01-01-2018, and ending 12-31-2018

Name of foundation REVIEW FOUNDATION	A Employer identification number 22-3252633		
	B Telephone number (see instructions) (518) 465-4747		
C If exemption application is pending, check here ► <input type="checkbox"/>			
D 1. Foreign organizations, check here ► <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation ► <input type="checkbox"/>			
E If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/>			
F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► <input type="checkbox"/>			
<b>G Check all that apply</b> <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>H Check type of organization</b> <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation	
<b>I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ► \$ 13,331,747</b>		<b>J Accounting method</b> <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	
<b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))			
Revenue	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income
1 Contributions, gifts, grants, etc., received (attach schedule)	342,323		
2 Check ► <input type="checkbox"/> if the foundation is not required to attach Sch B			
3 Interest on savings and temporary cash investments	3,063	3,063	
4 Dividends and interest from securities	138,560	138,560	
5a Gross rents			
b Net rental income or (loss)			
6a Net gain or (loss) from sale of assets not on line 10	-851		
b Gross sales price for all assets on line 6a	100,000		
7 Capital gain net income (from Part IV, line 2)		0	
8 Net short-term capital gain			
9 Income modifications			
10a Gross sales less returns and allowances			
b Less Cost of goods sold			
c Gross profit or (loss) (attach schedule)			
11 Other income (attach schedule)	103,897	484,876	
12 Total. Add lines 1 through 11	586,992	626,499	
Operating and Administrative Expenses	(d) Disbursements for charitable purposes (cash basis only)		
13 Compensation of officers, directors, trustees, etc	0	0	0
14 Other employee salaries and wages			
15 Pension plans, employee benefits			
16a Legal fees (attach schedule)			
b Accounting fees (attach schedule)	1,500	0	1,500
c Other professional fees (attach schedule)			
17 Interest			
18 Taxes (attach schedule) (see instructions)	4,785	1,317	0
19 Depreciation (attach schedule) and depletion			
20 Occupancy			
21 Travel, conferences, and meetings			
22 Printing and publications			
23 Other expenses (attach schedule)	85,139	48,916	36,223
24 Total operating and administrative expenses.			
Add lines 13 through 23	91,424	50,233	37,723
25 Contributions, gifts, grants paid	616,950		616,950
26 Total expenses and disbursements. Add lines 24 and 25	708,374	50,233	654,673
27 Subtract line 26 from line 12			
a Excess of revenue over expenses and disbursements	-121,382		
b Net investment income (if negative, enter -0-)		576,266	
c Adjusted net income (if negative, enter -0-)			

	<b>Part II Balance Sheets</b>	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 Cash—non-interest-bearing		218,737	175,946	175,946
	2 Savings and temporary cash investments		75,715	301,623	301,623
	3 Accounts receivable ►				
	Less allowance for doubtful accounts ►				
	4 Pledges receivable ►				
	Less allowance for doubtful accounts ►				
	5 Grants receivable				
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7 Other notes and loans receivable (attach schedule) ►				
	Less allowance for doubtful accounts ►				
	8 Inventories for sale or use				
	9 Prepaid expenses and deferred charges				
	10a Investments—U S and state government obligations (attach schedule)				
	b Investments—corporate stock (attach schedule)		5,610,932	5,793,072	9,044,968
	c Investments—corporate bonds (attach schedule)		3,903,486	3,908,807	3,786,583
	11 Investments—land, buildings, and equipment basis ►				
	Less accumulated depreciation (attach schedule) ►				
	12 Investments—mortgage loans				
	13 Investments—other (attach schedule)				
	14 Land, buildings, and equipment basis ►				
	Less accumulated depreciation (attach schedule) ►				
	15 Other assets (describe ► )		11,847	11,344	22,627
	16 <b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)		9,820,717	10,190,792	13,331,747
	17 Accounts payable and accrued expenses				
	18 Grants payable		20,000	25,000	
	19 Deferred revenue				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable (attach schedule)				
	22 Other liabilities (describe ► )		20,000	25,000	
	23 <b>Total liabilities</b> (add lines 17 through 22)				
	<b>Foundations that follow SFAS 117, check here ► <input type="checkbox"/></b> <b>and complete lines 24 through 26 and lines 30 and 31.</b>				
	24 Unrestricted				
	25 Temporarily restricted				
	26 Permanently restricted				
	<b>Foundations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/></b> <b>and complete lines 27 through 31.</b>				
	27 Capital stock, trust principal, or current funds		9,800,717	10,165,792	
	28 Paid-in or capital surplus, or land, bldg , and equipment fund		0	0	
	29 Retained earnings, accumulated income, endowment, or other funds		0	0	
	30 <b>Total net assets or fund balances</b> (see instructions)		9,800,717	10,165,792	
	31 <b>Total liabilities and net assets/fund balances</b> (see instructions)		9,820,717	10,190,792	

**Part III Analysis of Changes in Net Assets or Fund Balances**

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	9,800,717
2	Enter amount from Part I, line 27a	2	-121,382
3	Other increases not included in line 2 (itemize) ►	3	491,457
4	Add lines 1, 2, and 3	4	10,170,792
5	Decreases not included in line 2 (itemize) ►	5	5,000
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	10,165,792

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

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a 8033 272 VANGUARD S/T INVEST GR-ADM DTD 9/1/09		P	2018-10-01	2018-12-27
b 926 02912 VANGUARD S/T INVEST GR-ADM DTD 9/1/09		P	2016-08-08	2018-12-27
c 637 62788 VANGUARD S/T INVEST GR-ADM DTD 9/1/09		P	2016-10-03	2018-12-27
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a 83,707		84,328	-621	
b 9,649		9,649	0	
c 6,644		6,874	-230	
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
a			-621	
b			0	
c			-230	
d				
e				
2 Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	2	-851
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)			3	

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

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

 Yes  No

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	603,113	13,362,966	0 045133
2016	646,405	12,353,915	0 052324
2015	565,407	12,602,196	0 044866
2014	556,126	12,302,966	0 045203
2013	506,218	11,340,019	0 044640
<b>2 Total</b> of line 1, column (d)			0 232166
<b>3 Average</b> distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years			0 046433
<b>4 Enter</b> the net value of noncharitable-use assets for 2018 from Part X, line 5			14,052,615
<b>5 Multiply</b> line 4 by line 3			652,505
<b>6 Enter</b> 1% of net investment income (1% of Part I, line 27b)			5,763
<b>7 Add</b> lines 5 and 6			658,268
<b>8 Enter</b> qualifying distributions from Part XII, line 4			654,673

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

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)	1	11,525
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input type="checkbox"/> and enter 1% of Part I, line 27b		
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	0
3	Add lines 1 and 2.	3	11,525
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	0
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3 If zero or less, enter -0- . . . . .	5	11,525
6	Credits/Payments		
a	2018 estimated tax payments and 2017 overpayment credited to 2018	6a	3,840
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments Add lines 6a through 6d.	7	3,840
8	Enter any <b>penalty</b> for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	8	0
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . ►	9	7,685
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . . ►	10	
11	Enter the amount of line 10 to be <b>Credited to 2019 estimated tax</b> ►	Refunded	11

**Part VII-A Statements Regarding Activities**

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	1a	Yes	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). . . . .	1b	Yes	No
<i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>				
c	Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	1c	Yes	No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ► \$ _____ 0 (2) On foundation managers ► \$ _____ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ _____ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities</i>	2	Yes	No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	Yes	No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	4a	Yes	No
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	4b	Yes	No
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>	5	Yes	No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	6	Yes	No
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes	No
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ► NY			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i>	8b	Yes	No
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the taxable year beginning in 2018? See the instructions for Part XIV <i>If "Yes," complete Part XIV</i>	9	Yes	No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	Yes	No

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

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11	No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions.	12	No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ►N/A	13	Yes
14	The books are in care of ►MICHELLE LECLAIR	Telephone no ►(518) 465-4747	
Located at ►20 CORP WOODS SUITE 600 ALBANY NY			ZIP+4 ►12211
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here. and enter the amount of tax-exempt interest received or accrued during the year.	15	<input type="checkbox"/>
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►	16	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**File **Form 4720** if any item is checked in the "Yes" column, unless an exception applies.

		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days).	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions. Organizations relying on a current notice regarding disaster assistance check here.	1b	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?	1c	No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? If "Yes," list the years ► 20____, 20____, 20____, 20____	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions)	2b	
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018)	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b	No

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

5a	During the year did the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions. (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Yes	No
b	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions. Organizations relying on a current notice regarding disaster assistance check here.		5b	
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <i>If "Yes," attach the statement required by Regulations section 53.4945-5(d)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No		
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6b	No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <i>If "Yes" to 6b, file Form 8870</i>		7a	
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7b	
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?			
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

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

<b>1 List all officers, directors, trustees, foundation managers and their compensation. See instructions</b>				
<b>(a) Name and address</b>	<b>(b) Title, and average hours per week devoted to position</b>	<b>(c) Compensation (If not paid, enter -0-)</b>	<b>(d) Contributions to employee benefit plans and deferred compensation</b>	<b>(e) Expense account, other allowances</b>
See Additional Data Table				

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

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

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

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**
**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

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

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

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

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

**Expenses**

1	
2	
3	
4	

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

**Amount**

1	
2	
All other program-related investments. See instructions	
3	

**Total. Add lines 1 through 3 . . . . . ► 0**

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities. . . . .	1a	13,709,258
b	Average of monthly cash balances. . . . .	1b	534,729
c	Fair market value of all other assets (see instructions). . . . .	1c	22,627
d	<b>Total</b> (add lines 1a, b, and c). . . . .	1d	14,266,614
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	0
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	0
3	Subtract line 2 from line 1d. . . . .	3	14,266,614
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	4	213,999
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	5	14,052,615
6	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	6	702,631

**Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign**Part XI** organizations check here ►  and do not complete this part )

1	Minimum investment return from Part X, line 6. . . . .	1	702,631
2a	Tax on investment income for 2018 from Part VI, line 5. . . . .	2a	11,525
b	Income tax for 2018 (This does not include the tax from Part VI). . . . .	2b	
c	Add lines 2a and 2b. . . . .	2c	11,525
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	691,106
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	0
5	Add lines 3 and 4. . . . .	5	691,106
6	Deduction from distributable amount (see instructions). . . . .	6	0
7	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	7	691,106

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

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	1a	654,673
b	Program-related investments—total from Part IX-B. . . . .	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required). . . . .	3a	
b	Cash distribution test (attach the required schedule). . . . .	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	654,673
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b See instructions. . . . .	5	0
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	6	654,673
<b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years			

**Part XIII Undistributed Income (see instructions)**

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
<b>1</b> Distributable amount for 2018 from Part XI, line 7				691,106
<b>2</b> Undistributed income, if any, as of the end of 2018			615,677	
<b>a</b> Enter amount for 2017 only. . . . .		0		
<b>b</b> Total for prior years 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2018				
<b>a</b> From 2013. . . . .				
<b>b</b> From 2014. . . . .				
<b>c</b> From 2015. . . . .				
<b>d</b> From 2016. . . . .				
<b>e</b> From 2017. . . . .				
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	0			
<b>4</b> Qualifying distributions for 2018 from Part XII, line 4 ► \$ 654,673			615,677	
<b>a</b> Applied to 2017, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2018 distributable amount. . . . .				38,996
<b>e</b> Remaining amount distributed out of corpus	0			
<b>5</b> Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a) )	0			0
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b. . . . .		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .			0	
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .			0	
<b>e</b> Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .				0
<b>f</b> Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019 . . . . .				652,110
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . .	0			
<b>8</b> Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions) . . . . .	0			
<b>9</b> <b>Excess distributions carryover to 2019.</b> Subtract lines 7 and 8 from line 6a . . . . .	0			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2014. . . . .				
<b>b</b> Excess from 2015. . . . .				
<b>c</b> Excess from 2016. . . . .				
<b>d</b> Excess from 2017. . . . .				
<b>e</b> Excess from 2018. . . . .				

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

1a	If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. ►			
b	Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)			
2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .			
b	85% of line 2a . . . . .			
c	Qualifying distributions from Part XII, line 4 for each year listed . . . . .			
d	Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .			
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c . . . . .			
3	Complete 3a, b, or c for the alternative test relied upon			
a	"Assets" alternative test—enter			
(1)	Value of all assets . . . . .			
(2)	Value of assets qualifying under section 4942(j)(3)(B)(i)			
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .			
c	"Support" alternative test—enter			
(1)	Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .			
(2)	Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .			
(3)	Largest amount of support from an exempt organization			
(4)	Gross investment income			

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)****1 Information Regarding Foundation Managers:**

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

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

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

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

a The name, address, and telephone number or email address of the person to whom applications should be addressed

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

c Any submission deadlines

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

**Part XV Supplementary Information (continued)****3 Grants and Contributions Paid During the Year or Approved for Future Payment**

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

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue					
a					
b					
c					
d					
e					
f					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments.					
<b>3</b> Interest on savings and temporary cash investments			14	3,063	
<b>4</b> Dividends and interest from securities.			14	138,560	
<b>5</b> Net rental income or (loss) from real estate					
a Debt-financed property.					
b Not debt-financed property.					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income.			14	103,897	
<b>8</b> Gain or (loss) from sales of assets other than inventory			18	-851	
<b>9</b> Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue a					
b					
c					
d					
e					
<b>12</b> Subtotal Add columns (b), (d), and (e).		0		244,669	
<b>13</b> Total. Add line 12, columns (b), (d), and (e).			13		244,669
(See worksheet in line 13 instructions to verify calculations.)					

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



## Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
RHEA P CLARK	PRESIDENT 2 00	0	0	0
20 CORPORATE WOODS BLVD ALBANY, NY 12211				
JAMES CLARK JR	VICE PRESIDENT 1 00	0	0	0
20 CORPORATE WOODS BLVD ALBANY, NY 12211				
KATHLEEN CLARK	SECRETARY 1 00	0	0	0
20 CORPORATE WOODS BLVD ALBANY, NY 12211				
ELIZABETH CLARK	TREASURER 1 00	0	0	0
20 CORPORATE WOODS BLVD ALBANY, NY 12211				
JEFFREY B CLARK	DIRECTOR 1 00	0	0	0
20 CORPORATE WOODS BLVD ALBANY, NY 12211				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
ALBANY INSTITUTE OF HISTORY & ART 125 WASHINGTON AVENUE ALBANY, NY 12210	NONE	PC	EDUCATIONAL PROGRAMS	15,000
CAPITAL REGION YOUTH TENNIS FOUNDATION 785 WASHINGTON AVENUE ALBANY, NY 12206	NONE	PC	15-LOVE SUMMER EDUCATIONAL PROGRAM	10,000
NPH USA 134 NORTH LASALLE STREET SUITE 500 CHICAGO, IL 606021036	NONE	PC	2018 GALA DONATION	1,100
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
SEATTLE CHILDREN'S HOSPITAL RESEARCH FOUNDATION PO BOX 9784 SEATTLE, WA 98109	NONE	PC	TEAM MAX	2,500
SEATTLE PREP 2400 ELEVENTH AVENUE EAST SEATTLE, WA 981024098	NONE	PC	ANNUAL APPEAL	5,150
SEATTLE PREP 2400 ELEVENTH AVENUE EAST SEATTLE, WA 981024098	NONE	PC	LEVEL THE FIELD, RAISE THE BAR CAMPAIGN	10,000
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
ST ANNE CHURCH 1411 1ST AVENUE W SEATTLE, WA 98119	NONE	PC	2018 GIFT	1,500
WATER 1ST INTERNATIONAL 1904 3RD AVENUE SUITE 1012 SEATTLE, WA 98101	NONE	PC	2018 GIFT	5,000
WOODLAND PARK ZOO 5500 PHINNEY AVENUE N SEATTLE, WA 98103	NONE	PC	THRIVE LEADERSHIP AWARDS	500
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
THE FAMILY RESTORED 17 BISHOP STREET SUITE 202 PORTLAND, ME 04103	NONE	PC	THE MIKE MEMORIAL	2,000
LASALLE SCHOOL 391 WESTERN AVENUE ALBANY, NY 122031491	NONE	PC	WOLFF LEGACY FUND	10,000
LASALLE SCHOOL FOUNDATION 391 WESTERN AVENUE ALBANY, NY 122031491	NONE	PC	ANNUAL FUND	10,000
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
LASALLE SCHOOL FOUNDATION 391 WESTERN AVENUE ALBANY, NY 122031491	NONE	PC	IT OPERATING SOFTWARE	20,000
SAINT GREGORY'S SCHOOL 121 OLD NISKAYUNA ROAD LOUDONVILLE, NY 12211	NONE	PC	109 PADDLE RAISE	5,000
SAINT GREGORY'S SCHOOL 121 OLD NISKAYUNA ROAD LOUDONVILLE, NY 10000	NONE	PC	ANNUAL FUND	10,000
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
WORKSHOPS FOR WARRIORS 2970 MAIN STREET SAN DIEGO, CA 92113	NONE	PC	2018 GIFT	5,000
ACADEMY OF THE HOLY NAMES 1075 NEW SCOTLAND ROAD ALBANY, NY 12208	NONE	PC	PARTNERS IN EDUCATION PROGRAM	30,000
ACADEMY OF THE HOLY NAMES 1075 NEW SCOTLAND ROAD ALBANY, NY 12208	NONE	PC	SPRING GALA PADDLE RAISE	2,500
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
BIG BROTHERS BIG SISTERS OF THE CAPITAL REGION 1698 CENTRAL AVENUE ALBANY, NY 12205	NONE	PC	IN HONOR OF THE CHILDS FAMILY	5,000
DIOCESE OF BURLINGTON 55 JOY DRIVE SO BURLINGTON, VT 05403	NONE	PC	BISHOP'S ANNUAL APPEAL	3,000
ROMAN CATHOLIC DIOCESE OF ALBANY 40 NORTH MAIN AVENUE ALBANY, NY 12203	NONE	PC	BISHOP'S ANNUAL APPEAL	15,000
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
CARE DIMENSIONS 75 SYLVAN STREET SUITE B-102 DANVERS, MA 01923	NONE	PC	IN MEMORY OF PATRICIA G WHAMOND	2,000
CATHOLIC CHARITIES OF THE DIOCESE OF ALBANY 40 NORTH MAIN AVENUE ALBANY, NY 12203	NONE	PC	NIGHT AT THE MUSEUM CELEBRATION	5,000
FAMILY PROMISE OF THE CAPITAL REGION 738 NEW SCOTLAND AVENUE ALBANY, NY 12208	NONE	PC	2018 GIFT	10,000
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
FRIENDS IN ACTIONPO BOX 866 DURHAM, NH 03824	NONE	PC	2018 GIFT	7,500
HOPE HOUSE FUNDING CORP 573 LIVINGSTON AVENUE ALBANY, NY 12206	NONE	PC	2018 GIFT	5,000
INTERFAITH PARTNERSHIP FOR THE HOMELESS 176 SHERIDAN AVENUE ALBANY, NY 12210	NONE	PC	CAPITAL CAMPAIGN	75,000
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
KAGANDO FOUNDATION PO BOX 723 DORSET, VT 05251	NONE	PC	2018 GIFT	5,000
LAMPLIGHTER FOUNDATION 110 WASHINGTON AVENUE ALBANY, NY 12210	NONE	PC	IN MEMORY OF JAMES A CLARK, JR	1,000
LIVING RESOURCES 300 WASHINGTON AVENUE EXTENSION ALBANY, NY 12203	NONE	PC	MATCHING GIFT CAMPAIGN	1,500
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
LUZERNE MUSIC CENTER 203 LAKE TOUR ROAD PO BOX 39 LAKE LUZERNE, NY 12846	NONE	PC	FORT ORANGE CLUB SOIREE FUNDRAISER	5,000
MAKE-A-WISH NORTHEAST NEW YORK 3 WASHINGTON SQUARE ALBANY, NY 12205	NONE	PC	IN HONOR OF CARMELLA CHILDS	5,000
MATERNITY & EARLY CHILDHOOD FOUNDATION INC 40 N MAIN AVENUE ALBANY, NY 12203	NONE	PC	DIAMOND SPONSORSHIP FOR THE FALL LUNCHEON	1,000
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
THE MICHAEL J FOX FOUNDATION FOR PARKINSON'S RESEARCH GRAND CENTRAL STATION POST OFFICE BOX 4777 NEW YORK, NY 10163	NONE	PC	IN HONOR OF HUGH ROBERTS	1,000
NORTH COUNTRY MINISTRY PO BOX 478 WARRENSBURG, NY 12885	NONE	PC	2018 GIFT	1,000
PETER G YOUNG FOUNDATION 134 FRANKLIN STREET ALBANY, NY 12207	NONE		ANNUAL FUNDRAISER	5,000
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
SARATOGA PERFORMING ARTS CENTER 108 AVENUE OF THE PINES SARATOGA SPRINGS, NY 128666296	NONE	PC	20189 GIFT	5,000
SIENA COLLEGE515 LOUDON ROAD LOUDONVILLE, NY 12211	NONE	PC	FR KEVIN J MULLEN THANKS A MILLION CAMPAIGN	2,000
SAINT ANNE FOUNDATIONPO BOX 6305 ALBANY, NY 12206	NONE	PC	2018 GIFT	5,000
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
SAINT GREGORY'S SCHOOL 121 OLD NISKAYUNA ROAD LOUDONVILLE, NY 12211	NONE	PC	HEADMASTER'S GALA	10,000
ST PETER'S HOSPITAL FOUNDATION 310 SOUTH MANNING BOULEVARD ALBANY, NY 12208	NONE	PC	2018 GIFT	10,000
ST PIUS X CHURCH 23 CRUMITIE ROAD LOUDONVILLE, NY 12211	NONE	PC	2018 GIFT	10,000
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
ST PIUS X CHURCH 23 CRUMITIE ROAD LOUDONVILLE, NY 12211	NONE	PC	GROWING OUR FAITH CAMPAIGN	50,000
STRIDE ADAPTIVE SPORTS 4482 NY HIGHWAY 150 WEST SAND LAKE, NY 12196	NONE	PC	IN MEMORY OF DAVID AND MELISSA CLARK	700
TRINITY COLLEGE 125 MICHIGAN AVENUE NE WASHINGTON, DC 20017	NONE	PC	ANNUAL FUND	1,000
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
WMHT4 GLOBAL VIEW TROY, NY 121808375	NONE	PC	EDUCATIONAL PROGRAMS	2,500
AGRICULTURAL STEWARDSHIP ASSOCIATION 2531 STATE ROUTE 40 GREENWICH, NY 12834	NONE	PC	FARM-TO-FORK PROGRAM	5,000
AIDS COUNCIL OF NORTHEASTERN NEW YORK INC 927 BROADWAY ALBANY, NY 12207	NONE	PC	WOMEN'S SERVICES PROGRAM	2,500
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
ALBANY DAMIEN CENTER 728 MADISON AVENUE ALBANY, NY 122083302	NONE	PC	SMART MEALS	2,500
ALBANY FUND FOR EDUCATION PO BOX 3110 ALBANY, NY 12203	NONE	PC	THE FEED AND READ PROGRAM	7,500
A VILLAGE INC 3 LINCOLN SQUARE PO BOX 10152 ALBANY, NY 12201	NONE	PC	INNOVATIONS BLOCKS	5,000
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
BABY INSTITUTE 23 N SWAN STREET ALBANY, NY 12210	NONE	PC	PARENT ENGAGEMENT	5,000
BOYS & GIRLS CLUBS OF ALBANY INC 21 DELAWARE AVENUE ALBANY, NY 12210	NONE	PC	BOYS & GIRLS CLUBS OF ALBANY - THE MERGER	10,000
THE CAPITAL AREA COUNCIL OF CHURCHES 646 STATE STREET ALBANY, NY 122031217	NONE	PC	THE KIDZ LUNCHBOX	5,000
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
CAPITAL REGION SPONSOR-A-SCHOLAR 1 UNITED WAY ALBANY, NY 12205	NONE	PC	STUDENT SPONSORSHIP	3,000
CAPITAL REGION YOUTH TENNIS FOUNDATION 785 WASHINGTON AVENUE ALBANY, NY 12206	NONE	PC	EDUCATIONAL PROGRAMS	7,500
CAPITAL REPERTORY THEATRE 432 STATE STREET SCHENECTADY, NY 12305	NONE	PC	ON-THE-GO!	5,000
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
CAPTAIN COMMUNITY HUMAN SERVICES 543 SARATOGA ROAD GLENVILLE, NY 12303	NONE	PC	STREET OUTREACH PROJECT	5,000
CAREY INSTITUTE FOR GLOBAL GOOD 63 HUYCK ROAD RENSSELAERVILLE, NY 12147	NONE	PC	KEYSTONE PROGRAMS	5,000
COMMUNITY FATHERS INC 120 EMMONS STREET SCHENECTADY, NY 12304	NONE	PC	MALE ACHIEVERS PROGRAM	2,000
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
EAST SIDE NEIGHBORHOOD RECREATION CENTER 596 PAWLING AVENUE TROY, NY 12180	NONE	PC	EAT WISE & EXERCISE	5,000
EMPIRE STATE YOUTH ORCHESTRA 432 STATE STREET SCHENECTADY, NY 12305	NONE	PC	CHIME	5,000
FAST BREAK FUND ONE MUSTANG DRIVE COHOES, NY 12047	NONE	PC	2019 SUMMER CAMP SCHOLARSHIP PROGRAM	5,000
<b>Total . . . . .</b>			► 3a	616,950

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
THE FOOD PANTRIES 32 ESSEX STREET ALBANY, NY 12206	NONE	PC	INFANT NEEDS	5,000
GIRLS INC OF THE GREATER CAPITAL REGION 962 ALBANY STREET SCHENECTADY, NY 12307	NONE	PC	GIRLS GET THE MESSAGE	3,000
GIRLS ON THE RUN CAPITAL REGION 916 WESTERN AVENUE ALBANY, NY 12203	NONE	PC	ANY GIRL CAN BE A GIRL ON THE RUN	5,000
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
HABITAT FOR HUMANITY CAPITAL DISTRICT 207 SHERIDAN AVENUE ALBANY, NY 12210	NONE	PC	15 CROSS STREET - HOUSE SPONSORSHIP	10,000
KOINONIA PRIMARY CARE 553 CLINTON AVENUE ALBANY, NY 12206	NONE	PC	REFURBISHMENT OF THE NORTH LAKE ENTRANCE	20,000
PARK PLAYHOUSE INCPO BOX 525 ALBANY, NY 12201	NONE	PC	31ST SEASON EDUCATIONAL PROGRAMS AND PRODUCTIONS	5,000
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
NORTHERN RIVERS60 ACADEMY ROAD ALBANY, NY 12208	NONE	PC	CAPITAL REGION CHILD AND ADOLESCENT MOBIL CRISIS TEAM	5,000
RADIX ECOLOGICAL SUSTAINABILITY CENTER 153 GRAND STREET ALBANY, NY 12202	NONE	PC	HEALTHY SOUTH END COLLABORATION	5,000
THE RED BOOKSHELF INC 22 VALLEYVIEW DRIVE ALBANY, NY 12208	NONE	PC	RED BOOKSHELF IN A MEDICAL OFFICE	2,500
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
REGIONAL FOOD BANK OF NORTHEASTERN NEW YORK 965 ALBANY-SHAKER ROAD LATHAM, NY 12110	NONE	PC	RETAIL STORE DONATION PROGRAM	5,000
RONALD MCDONALD HOUSE CHARITIES OF THE CAPITAL REGION 139 SOUTH LAKE AVENUE ALBANY, NY 12208	NONE	PC	HVAC PROJECT - ROOMS 9 & 10	5,000
SPIRIT OF ASSISI FOUNDATION INC PO BOX 11015 LOUDONVILLE, NY 12211	NONE	PC	GENERAL OPERATING SUPPORT	5,000
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
ST PAUL'S CENTER INCPO BOX 589 RENSSELAER, NY 12144	NONE	PC	PARENT CAFES & LIVING THE PROTECTIVE FACTORS WORKSHOPS	5,000
TO LIFE410 KENWOOD AVENUE DELMAR, NY 12054	NONE	PC	SCHENECTADY PROGRAM	3,000
TRINITY ALLIANCE OF THE CAPITAL REGION INC 15 TRINITY PLACE ALBANY, NY 12202	NONE	PC	2018 HOLIDAY HELP	10,000
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
UNDERGROUND RAILROAD HISTORY PROJECT OF THE CAPITAL REGION 194 LIVINGSTON AVENUE ALBANY, NY 12210	NONE	PC	YOUNG ABOLITIONIST TEEN SCHOLARS' INSTITUTE	4,000
UNITY HOUSE 2431 SIXTH AVENUE TROY, NY 12180	NONE	PC	CHILDREN'S HOLIDAY PROGRAM	5,000
WARRIORS ON WHEELS 32 MARWOOD STREET ALBANY, NY 12209	NONE	PC	GENERAL OPERATING SUPPORT	10,000
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
WELLSPRING480 BROADWAY LL-20 SARATOGA SPRINGS, NY 12866	NONE	PC	STUDENT ACTIVISTS ENDING DATING ABUSE	2,500
WHITNEY M YOUNG JR HEALTH CENTER INC 920 LARK DRIVE ALBANY, NY 12207	NONE	PC	CAMPAIGN FOR SMILES	10,000
WILDWOOD FOUNDATION 2995C CURRY ROAD EXTENSION SCHENECTADY, NY 12303	NONE	PC	COMMUNITY INTEGRATED ARTS PROGRAM	7,500
<b>Total . . . . .</b>			► 3a	616,950

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
YOUTH FX INC 17 WILBUR STREET ALBANY, NY 12202	NONE	PC	DOC LAB - DOCUMENTING OUR COMMUNITY	5,000
<b>Total . . . . .</b>			► 3a	616,950

## TY 2018 Accounting Fees Schedule

**Name:** REVIEW FOUNDATION**EIN:** 22-3252633

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MAZARS USA LLP	1,500	0		1,500

## TY 2018 Investments Corporate Bonds Schedule

**Name:** REVIEW FOUNDATION

**EIN:** 22-3252633

### Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
VANGUARD SHORT TERM INV	3,908,807	3,786,583

## TY 2018 Investments Corporate Stock Schedule

**Name:** REVIEW FOUNDATION

**EIN:** 22-3252633

### Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
EATON VANCE EMERGING MKTS	152,493	141,214
MJP INTERNATIONAL	1,603,099	1,778,052
MJP LARGE CAP FUND	1,679,942	2,971,630
MJP SMALL CAP FUND	1,500,484	1,809,317
NEWPORT ASIA	128,654	179,440
EQUITIES	728,400	2,165,315

## TY 2018 Other Assets Schedule

**Name:** REVIEW FOUNDATION**EIN:** 22-3252633

## Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
KMP PROPERTIES	11,847	11,344	22,627

## TY 2018 Other Decreases Schedule

**Name:** REVIEW FOUNDATION

**EIN:** 22-3252633

Description	Amount
INCREASE IN GRANTS PAYABLE	5,000

## TY 2018 Other Expenses Schedule

**Name:** REVIEW FOUNDATION**EIN:** 22-3252633**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CHARR 500 NY FILING FEE	750	0		750
FIDUCIARY FEE	4,002	4,002		0
FIRST MANHATTAN FEES	20,405	20,405		0
NEW YORK LAW JOURNL	160	0		160
COMMUNITY FOUNDATION	11,125	0		11,125
FTC UNITIZATION	150	150		0
ADR FEES	170	170		0
MJP HOLDINGS FEE	48,377	24,189		24,188

## TY 2018 Other Income Schedule

**Name:** REVIEW FOUNDATION**EIN:** 22-3252633**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
NEWPORT ASIA INSTITUTIONAL FUND	0	15,828	0
MJP LARGE CAP FUND LLC	6,610	136,574	0
MJP SMALL CAP FUND LLC	87,291	239,309	0
MJP INTERNATIONAL FUND LLC	9,996	93,668	0
KMP PROPERTIES	0	-503	0

## TY 2018 Other Increases Schedule

**Name:** REVIEW FOUNDATION**EIN:** 22-3252633

<b>Description</b>	<b>Amount</b>
CHECKS WRITTEN IN 2018 AND NOT CLEARED	230,500
UNREALIZED ADJUSTMENT	260,957

## TY 2018 Taxes Schedule

**Name:** REVIEW FOUNDATION**EIN:** 22-3252633

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES	1,317	1,317		0
FEDERAL ESTIMATED EXCISE TAX	3,468	0		0

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

OMB No 1545-0047

- Attach to Form 990, 990-EZ, or 990-PF
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information

**2018****Name of the organization**  
REVIEW FOUNDATION**Employer identification number**  
22-3252633**Organization type** (check one)**Filers of:****Section:**

Form 990 or 990-EZ

- 501(c)( ) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

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

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

**Special Rules**

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

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

<b>Name of organization</b> REVIEW FOUNDATION		<b>Employer identification number</b> 22-3252633	
<b>Part I</b> <b>Contributors</b> (See instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RPC CHARITABLE LEAD ANNUITY TRUST	\$ 342,323	Person <input checked="" type="checkbox"/>
	20 CORPORATE WOODS BLVD		Payroll <input type="checkbox"/>
	ALBANY, NY 12211		Noncash <input type="checkbox"/>
(Complete Part II for noncash contributions )			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
(Complete Part II for noncash contributions )			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
(Complete Part II for noncash contributions )			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
(Complete Part II for noncash contributions )			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
(Complete Part II for noncash contributions )			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
(Complete Part II for noncash contributions )			

Name of organization

REVIEW FOUNDATION

Employer identification number

22-3252633

## Part II

## Noncash Property

(a) No. from Part I		(See instructions) Use duplicate copies of Part II if additional space is needed (b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
			\$	
(a) No. from Part I		(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
			\$	
(a) No. from Part I		(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
			\$	
(a) No. from Part I		(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
			\$	
(a) No. from Part I		(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
			\$	
(a) No. from Part I		(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
			\$	
(a) No. from Part I		(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
			\$	

**Name of organization**  
REVIEW FOUNDATION

**Employer identification number**

22-3252633

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

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