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Form **990-PF**

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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

▶ **Do not enter social security numbers on this form as it may be made public.**
▶ **Go to *www.irs.gov/Form990PF* for instructions and the latest information.**

OMB No 1545-0052

2018

Open to Public Inspection

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

Name of foundation
STERLING INSURANCE COMPANY FOUNDATION
CO COMMUNITY BANK NA 008132

A Employer identification number
46-7199984

Number and street (or P O box number if mail is not delivered to street address)
5 FORD AVE

Room/suite

B Telephone number (see instructions)

City or town, state or province, country, and ZIP or foreign postal code
ONEONTA, NY 13820

C If exemption application is pending, check here ▶ ☐

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here ▶ ☐
2 Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

H Check type of organization ☑ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐

I Fair market value of all assets at end of year (from Part II, col (c), *line 16)* ▶$ 996,808

J Accounting method ☑ Cash ☐ Accrual ☐ Other (specify) _____
(Part I, column (d) must be on cash basis)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

Part I **Analysis of Revenue and Expenses** *(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))*

		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	681			
	2 Check ▶ ☑ if the foundation is **not** required to attach Sch B				
	3 Interest on savings and temporary cash investments	8,177	8,177		
	4 Dividends and interest from securities	15,469	15,469		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	183,441			
	b Gross sales price for all assets on line 6a 291,547				
	7 Capital gain net income (from Part IV, line 2)		183,441		
	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)				
	12 **Total.** Add lines 1 through 11	207,768	207,087		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	4,793	4,793		
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	1,500			1,500
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	347			347
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	442			442
	24 **Total operating and administrative expenses.** Add lines 13 through 23	7,082	4,793		2,289
	25 Contributions, gifts, grants paid	115,492			115,492
	26 **Total expenses and disbursements.** Add lines 24 and 25	122,574	4,793		117,781
	27 Subtract line 26 from line 12				
	a **Excess of revenue over expenses and disbursements**	85,194			
	b **Net investment income** (if negative, enter -0-)		202,294		
	c **Adjusted net income** (if negative, enter -0-)				

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	184	140	140
	2 Savings and temporary cash investments	8,311	53,542	53,542
	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)	223,650	198,720	195,788
	b Investments—corporate stock (attach schedule)	356,575	337,631	460,138
	c Investments—corporate bonds (attach schedule)	99,286	198,146	196,386
	11 Investments—land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach schedule) ▶			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	112,991	97,991	90,814
	14 Land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach schedule) ▶			
	15 Other assets (describe ▶)			
	16 **Total assets** (to be completed by all filers—see the instructions Also, see page 1, item I)	800,997	886,170	996,808
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶)			
	23 **Total liabilities**(add lines 17 through 22)		0	
Net Assets or Fund Balances	**Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.**			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ ☑ and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	800,997	886,170	
	28 Paid-in or capital surplus, or land, bldg , and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 **Total net assets or fund balances** (see instructions)	800,997	886,170	
	31 **Total liabilities and net assets/fund balances** (see instructions)	800,997	886,170	

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	800,997
2	Enter amount from Part I, line 27a	2	85,194
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	886,191
5	Decreases not included in line 2 (itemize) ▶	5	21
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	886,170

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)
1a	See Additional Data Table			
b				
c				
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	See Additional Data Table			
b				
c				
d				
e				

	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) **or** Losses (from col (h))
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a	See Additional Data Table			
b				
c				
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 }	2	183,441
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

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

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

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

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	77,134	987,946	0 07808
2016	56,832	734,545	0 07737
2015	59,142	536,194	0 11030
2014	38,607	555,677	0 06948
2013			

2	**Total** of line 1, column (d)	2	0 335222
3	Average 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	3	0 083806
4	Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	1,040,014
5	Multiply line 4 by line 3	5	87,159
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	2,023
7	Add lines 5 and 6	7	89,182
8	Enter qualifying distributions from Part XII, line 4	8	117,781

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 ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter _____ **(attach copy of letter if necessary–see instructions)**		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☑ and enter 1% of Part I, line 27b	1	2,023
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	
3	Add lines 1 and 2	3	2,023
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	
5	**Tax based on investment income.** Subtract line 4 from line 3 If zero or less, enter -0-	5	2,023
6	Credits/Payments		
a	2018 estimated tax payments and 2017 overpayment credited to 2018 — 6a		
b	Exempt foreign organizations—tax withheld at source — 6b		
c	Tax paid with application for extension of time to file (Form 8868) — 6c		
d	Backup withholding erroneously withheld — 6d		
7	Total credits and payments Add lines 6a through 6d	7	
8	Enter any **penalty** for underpayment of estimated tax Check here ☑ if Form 2220 is attached	8	9
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶	9	2,032
10	**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶	10	
11	Enter the amount of line 10 to be **Credited to 2019 estimated tax** ▶ **Refunded** ▶	11	

Part VII-A **Statements Regarding Activities**

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

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule See instructions.	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement See instructions	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	

Website address ▶ N/A

14 The books are in care of ▶ COMMUNITY BANK NA Telephone no ▶ (607) 433-4131

Located at ▶ 5 FORD AVENUE ONEONTA NY ZIP+4 ▶ 13820

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of **Form 1041** —check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the year ▶ 15

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?		Yes	No
		16		No
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes", enter the name of the foreign country ▶			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

			Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☑ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☑ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☑ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☑ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☑ 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). ☐ Yes ☑ No			
b	If any answer is "Yes" to 1a(1)–(6), did **any** 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	1b		No
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 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? ☐ Yes ☑ No			
	If "Yes," list the years ▶ 20____ , 20____ , 20____ , 20____			
b	Are there any years listed in 2a for which the foundation is **not** 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 **all** years listed, answer "No" and attach statement—see instructions)	2b		No
c	If the provisions of section 4942(a)(2) are being applied to **any** 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? ☐ Yes ☑ 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		No
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)*

			Yes	No
5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☑ No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☑ No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☑ No		
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? See instructions	☐ Yes ☑ No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☑ No		
b	If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance? See instructions	5b		No
	Organizations relying on a current notice regarding disaster assistance check here ▶	☐		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	☐ Yes ☑ No		
	If "Yes," attach the statement required by Regulations section 53 4945–5(d)			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☑ No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		No
	If "Yes" to 6b, file Form 8870			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☑ No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		No
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?	☐ Yes ☑ No		

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

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions

(a) Name and address	**(b)** Title, and average hours per week devoted to position	**(c)** Compensation **(If not paid, enter -0-)**	**(d)** Contributions to employee benefit plans and deferred compensation	**(e)** Expense account, other allowances
COMMUNITY BANK NA 5 FORD AVE ONETONA, NY 13820	Trustee 1 00	4,793		

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

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

Total number of other employees paid over $50,000 ▶

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. ▶		

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 ▶	

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	1,007,147
b	Average of monthly cash balances	1b	48,705
c	Fair market value of all other assets (see instructions)	1c	0
d	**Total** (add lines 1a, b, and c)	1d	1,055,852
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	
3	Subtract line 2 from line 1d	3	1,055,852
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	15,838
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,040,014
6	**Minimum investment return.** Enter 5% of line 5	6	52,001

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

1	Minimum investment return from Part X, line 6			1	52,001
2a	Tax on investment income for 2018 from Part VI, line 5	2a	2,023		
b	Income tax for 2018 (This does not include the tax from Part VI)	2b			
c	Add lines 2a and 2b			2c	2,023
3	Distributable amount before adjustments Subtract line 2c from line 1			3	49,978
4	Recoveries of amounts treated as qualifying distributions			4	
5	Add lines 3 and 4			5	49,978
6	Deduction from distributable amount (see instructions)			6	
7	**Distributable amount** as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1			7	49,978

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	117,781
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	**Qualifying distributions.** Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	117,781
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	2,023
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	115,758

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				49,978
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.				
b Total for prior years 20___, 20___, 20___				
3 Excess distributions carryover, if any, to 2018				
a From 2013.				
b From 2014. 11,055				
c From 2015. 32,724				
d From 2016. 20,469				
e From 2017. 28,084				
f **Total** of lines 3a through e.	92,332			
4 Qualifying distributions for 2018 from Part XII, line 4 ▶ $ 117,781				
a Applied to 2017, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2018 distributable amount.				49,978
e Remaining amount distributed out of corpus	67,803			
5 Excess distributions carryover applied to 2018				
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 **Enter the net total of each column as indicated below:**				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	160,135			
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount —see instructions				
e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)				
8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions) . . .				
9 **Excess distributions carryover to 2019.** Subtract lines 7 and 8 from line 6a	160,135			
10 Analysis of line 9				
a Excess from 2014. . . . 11,055				
b Excess from 2015. . . . 32,724				
c Excess from 2016. . . . 20,469				
d Excess from 2017. . . . 28,084				
e Excess from 2018. . . . 67,803				

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 ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
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))

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
a *Paid during the year* See Additional Data Table				
Total . . . . . ▶ **3a**				
b *Approved for future payment*				
Total . . . . . ▶ **3b**				

Part XVI-A Analysis of Income-Producing Activities

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	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments. . . .					
3 Interest on savings and temporary cash investments			14	8,177	
4 Dividends and interest from securities. . . .			14	15,469	
5 Net rental income or (loss) from real estate					
a Debt-financed property.					
b Not debt-financed property.					
6 Net rental income or (loss) from personal property					
7 Other investment income.					
8 Gain or (loss) from sales of assets other than inventory			18	183,441	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e). .				207,087	
13 **Total.** Add line 12, columns (b), (d), and (e).				13	207,087

(See worksheet in line 13 instructions to verify calculations)

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

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)

Part XVII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

		Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501 (c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash	1a(1)		No
(2) Other assets	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization	1b(2)		No
(3) Rental of facilities, equipment, or other assets	1b(3)		No
(4) Reimbursement arrangements	1b(4)		No
(5) Loans or loan guarantees	1b(5)		No
(6) Performance of services or membership or fundraising solicitations	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		No

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

(a) Line No	**(b)** Amount involved	**(c)** Name of noncharitable exempt organization	**(d)** Description of transfers, transactions, and sharing arrangements

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

b If "Yes," complete the following schedule

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

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

******	2019-02-11	******
Signature of officer or trustee	Date	Title

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

Paid Preparer Use Only

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ ☐	PTIN
William J Scannell				P00193468
Firm's name ▶ Johnson Lauder & Savidge LLP				Firm's EIN ▶16-0919630
Firm's address ▶ 2 Court Street 2nd Floor Binghamton, NY 13901				Phone no (607) 723-8216

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

	List and describe the kind(s) of property sold (e g , real estate, **(a)** 2-story brick warehouse, or common stock, 200 shs MLC Co)	**(b)** How acquired P—Purchase D—Donation	**(c)** Date acquired (mo , day, yr)	**(d)** Date sold (mo , day, yr)
1	344 59 Royce Penn Mutual	P	2014-12-04	2018-03-06
1	386 698 Royce Penn Mutual	P	2015-07-13	2018-03-06
	58 879 Vanguard Morgan Growth Adm	P	2015-07-13	2018-03-06
	25 Boeing Company	P	2016-09-27	2018-03-06
	212 IDEX Corp	P	2011-12-14	2018-03-06
	500 General Electric Co	P	2014-02-05	2018-04-19
	700 IDEX Corp	P	2011-12-14	2018-04-19
	325 IDEX Corp	P	2011-12-14	2018-04-24
	25000 Apple Inc	P	2014-09-22	2018-05-03
	25 Boeing Company	P	2016-09-27	2018-04-19

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

(e) Gross sales price	Depreciation allowed **(f)** (or allowable)	Cost or other basis **(g)** plus expense of sale	Gain or (loss) **(h)** (e) plus (f) minus (g)
3,687		5,000	-1,313
4,138		5,000	-862
5,698		5,000	698
8,733		3,279	5,454
29,726		18	29,708
6,982		12,281	-5,299
102,320		59	102,261
45,741		28	45,713
25,000		24,232	768
8,499		3,279	5,220

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) **or** **(l)** Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis **(j)** as of 12/31/69	Excess of col (i) **(k)** over col (j), if any	
			-1,313
			-862
			698
			5,454
			29,708
			-5,299
			102,261
			45,713
			768
			5,220

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

	List and describe the kind(s) of property sold (e g , real estate, **(a)** 2-story brick warehouse, or common stock, 200 shs MLC Co)	**(b)** How acquired P—Purchase D—Donation	**(c)** Date acquired (mo , day, yr)	**(d)** Date sold (mo , day, yr)
	25000 US TREASURY NOTE 1% 5/31/18	P	2014-12-01	2018-05-31
1	25000 FL TAMPA BAY WSA REV 1 362% 10/1/18	P	2015-05-13	2018-10-01
	ST CAPITAL GAIN DISTRIBUTION	P	2018-01-01	2018-12-01
	LT CAPITAL GAIN DISTRIBUTIONS	P	2016-01-01	2018-12-01

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

(e) Gross sales price	Depreciation allowed **(f)** (or allowable)	Cost or other basis **(g)** plus expense of sale	Gain or (loss) **(h)** (e) plus (f) minus (g)
25,000		24,992	8
25,000		24,938	62
135			135
888			888

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) **or** **(l)** Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis **(j)** as of 12/31/69	Excess of col (i) **(k)** over col (j), if any	
			8
			62
			135
			888

Form 990PF Part XV Line 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
a *Paid during the year*				
MARATHON FOR A BETTER LIFE PO BOX 268 WARNERVILLE, NY 12187	NONE	NC	PROVIDE FINANCIAL SUPPORT	1,515
RONALD MCDONALD HOUSE CHARITIES 139 SOUTH LAKE AVE ALBANY, NY 12208	NONE	PC	TO SUPPORT OTGANIZATION'S MISSION	900
CATSKILL AREA HOSPICE PALLIATIVE CA 1 BIRCHWOOD DRIVE ONEONTA, NY 13820	NONE	PC	FINANCIAL SUPPORT OF ORGANIZATION'S MISSION	2,600
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
IROQUOIS INDIAN MUSEUM PO BOX 7 324 CAVERNS ROAD HOWES CAVE, NY 12092	NONE	PC	PROVIDE FINANCIAL SUPPORT TO THE MUSEUM	2,000
LANDIS ARBORETUM PO BOX 186 LAPE ROAD ESPERANCE, NY 12066	NONE	NC	FUNDRAISER AT GRAPEVINE FARMS	1,000
LITERACY NEW YORKPO BOX 852 COBLESKILL, NY 12043	NONE	PC	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	1,500
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
REGIONAL FOOD BANK OF NENY 965 ALBANY-SHAKER ROAD LATHAM, NY 12110	NONE	PC	PROVIDE SUPPORT OF ORGANIZATION'S MISSION	2,500
AYERS MEMORIAL ANIMAL SHELTER 133 HILLTOP ROAD SPRAKERS, NY 12166	NONE	PC	ASSIST IN CARE OF SHELTER ANIMALS	900
CATHOLIC CHARITIES OF DELWARE OTSEG 489 WEST MAIN ST COBLESKILL, NY 12043	NONE	PC	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	50
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
THE JOSHUA PROJECTPO BOX 413 MIDDLEBURGH, NY 12122	NONE	PC	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	1,350
BS - TROOP 264488 ALTAMONT BLVD ALTAMONT, NY 12009	NONE	NC	PROVIDE SUPPORT FOR TROOP'S ACTIVITIES	1,000
ANIMAL SHELTER OF SCHOHARIE VALLEY PO BOX 40 HOWES CAVE, NY 12092	NONE	PC	ASSIST IN CARE OF SHELTER ANIMALS	2,170
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
SCHOHARIE COUNTY ARCPO BOX 307 SCHOHARIE, NY 12157	NONE	PC	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	6,985
COBLESKILL PARTNERSHIP INC PO BOX 10 COBLESKILL, NY 12043	NONE	NC	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	5,200
SCHOHARIE COUNTY CHILD DEVELOPMENT 11 LARK STREET COBLESKILL, NY 12043	NONE	NC	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	500
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
EXCHANGE CLUB OF COBLESKILL 4949 STATE ROUTE 145 COBLESKILL, NY 12043	NONE	NC	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	250
SCHOHARIE COUNTY HISTORICAL SOCIETY 145 FORT ROAD SCHOHARIE, NY 12157	NONE	PC	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	500
SUNY COBLESKILL FOUNDATION 106 SUFFOLK CIRCLE COBLESKILL, NY 12043	NONE	PC	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	3,000
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
WOUNDED WARRIOR PROJECT INC 4899 BETFORD RD SUITE 300 JACKSONVILLE, FL 32256	NONE	PC	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	500
HERO FUND OF AMERICAPO BOX 121 SHARON SPRINGS, NY 13459	NONE	PC	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	500
ASPCA FOUNDERS SOCIETY 424 EAST 92ND STREET NEW YORK, NY 10128	NONE	PC	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
ST JUDE CHILDREN'S RESEARCH HOSPITA 262 DANNY THOMAS PLACE MEMPHIS, TN 38105	NONE	PC	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	450
LITTLE LAWS BIG DREAMS 868 MINERAL SPRINGS ROAD COBLESKILL, NY 12043	NONE	PC	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	125
SCHOHARIE COUNTY COMM ACTION PROGRA 795 E MAIN ST SUITE 5 COBLESKILL, NY 12043	NONE	NC	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	5,000
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
CCE SCHOHARIE AND OTSEGO COUNTIES 173 SOUTH GRAND ST SUITE 1 COBLESKILL, NY 12043	NONE	PC	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	725
FRIENDS OF BASSETT ONE ATWELL ROAD COOPERSTOWN, NY 13326	NONE	PC	MATCHING CONTRIBUTION FOR EMERGENCY ROOM	26,183
WHMT4 GLOBAL VIEW TROY, NY 12180	NONE	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	150
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
THE SALVATION ARMYPO BOX 16310 ALBANY, NY 12212	NONE	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	500
SCHO WRIGHT AMBULANCE 388 MAIN ST SCHOHARIE, NY 12157	NONE	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
COBLESKILL-RICHMONDVILLE LITTLE LEA 120 WASHINGTON AVE COBLESKILL, NY 12043	NONE	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	150
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
GILBOA HISTORICAL SOCIETY 122 STRYKER ROAD GILBOA, NY 12076	NONE	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
YMCA OF THE GREATER TRI-VALLEY 701 SENECA ST ONEIDA, NY 13421	NONE	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
AMERICAN CANCER SOCIETY 1120 SOUTH HOODMAN ST ROCHESTER, NY 14620	NONE	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	200
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
AMERICAN RED CROSSPO BOX 17021 BALTIMORE, MD 21297	NONE	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
LEATHERSTOCKING HONOR FLIGHT PO BOX 621 COBLESKILL, NY 12043	NONE	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
NC OF MISSING EXPLOITED CHILDREN 690 PRINCE STREET ALEXANDRIA, VA 22314	NONE	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	200
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
SUSQUEHANNA ANIMAL SHELTER 4841 NY-28 COOPERSTOWN, NY 13326	NONE	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
SHRINERS HOSPITAL FOR CHILDREN 2900 N ROCKY POINT DRIVE TAMPA, FL 33607	NONE	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	250
CHENANGO MEMORIAL HOSPITAL 179 N BROAD ST NORWICH, NY 13815	NONE	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
THE MICHAEL J FOX FOUNDATION 469 7TH AVE 498 NEW YORK, NY 10018	NONE	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
RICHMONDVILLE VOLUNTEER FIRE DEPT 288 MAIN ST RICHMONDVILLE, NY 12149	NONE	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
RICHMONDVILLE HISTORICAL SOCIETY PO BOX 316 RICHMONDVILLE, NY 12149	NONE	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	250
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
FIELDS OF HONOR FOUNDATION 5800 N PATRIOT DR OWASSO, OK 74055	NONE	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
COBLESKILL REGIONAL HOSPITAL 178 GRANDVIEW DRIVE COBLESKILL, NY 12043	NONE	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	250
WAMC Northeast Public Radio 318 Central Ave Albany, NY 12206	Not Affiliated	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	350
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
Klinkhart Hall Arts CenterPO Box 101 Sharon Springs, NY 13459	Not Affiliated	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	1,130
New York Insurance Scholarship Fdn 130 Washington Avenue Albany, NY 12210	Not Affiliated	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	2,000
Cobleskill Richmondville Education 155 Washington Avenue Cobleskill, NY 12043	Not Affiliated	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	29,550
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
Peacefful Acres Horses 3740 Rynex Corners Road Pattersonville, NY 12137	Not Affiliated	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
Shoharie County Comm Action Program 795 E Main Street Cobleksill, NY 12043	Not Affiliated	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
Family Life MinistriesPO Box 506 Bath, NY 14810	Not Affiliated	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
American Red Cross Eastern NY Regio 33 Everett Road Albany, NY 12205	Not Affiliated	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	1,000
Roots of Music50 Charles Lindeburgh Uniondale, NY 11553	Not Affiliated	N/A	PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	250
Charlotte's Finest Legacy Foundatio PO Box 34742 Charlotte, NC 28234	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	50
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
Catholic Charities Diocese of Alban 40 North Main Avenue Albany, NY 12203	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	1,000
Fiends of Grace OutreachPO Box48 Middleburgh, NY 12122	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	125
American Heart Assocaition 372 W Main Street West Winfield, NY 13491	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	1,000
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
Rescue Mission of Utica 372 W Main Street West Winfield, NY 13491	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
United Way of Northern Chautaquacty 626 Central Avenue Dunkirk, NY 14048	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	200
National Brain Tumor Society 38 Fifth Avenue Saratoga Springs, NY 12866	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	200
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
Cobleskill Fire Deparment 601 E Main Street Cobleskill, NY 12043	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	200
Summer Youth Cultural Performing Ar PO Box 554 Schohaire, NY 12043	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	500
ALSACSt Jude Childrens Research Hos 2 Pine West Plaza Suite 202 Albany, NY 12205	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	250
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
Food Bank of the Southern Tier 12067 Old Route 31 Clyde, NY 14433	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	300
West Fulton ArtsPO Box 60 West Fulton, NY 12194	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	500
Le Moyne College 1419 Salt Springs Road Syracuse, NY 13214	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	250
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
Diaz Memorial Abulance Service PO Box 147 Saugerties, NY 12477	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	200
Juvenile Diabetes Research Foundati 950 New London Road Latham, NY 12110	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
The Childrens Home of Kingston 26 Grove Street Kingston, NY 12401	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
Palmyra Community Center 229 E Main Street - PO Box 8 Palmyra, NY 14522	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
Jowonio School Inc 3040 East Genessee Street Syrcause, NY 13244	Not Affiliated	N/A	TO PROVIDE SUPPORT ORGANIZATION'S MISSION	100
Finger Lakes Cultural NaturalPO Box 96 Keuka Park, NY 14478	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
Canajoharie Area Little League PO Box 91 Canjoharie, NY 13317	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR THE ORGANIZATION'S MISSION	150
Jim Juli Boeheim Foundation 7002 Tiffany Circle Fayetteville, NY 13066	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	50
Rotary Club of CobleskillPO Box 39 Cobleskill, NY 12043	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	1,500
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
Fam FundsPO Box 399 Cobleskill, NY 12043	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	1,000
The Friends of Grant College PO Box 2294 Wilton, NY 12831	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
No Bottom Left Behind Diaper Bank 530 North Perry Street Johnstown, NY 12095	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
Scholarie Mohawk Initiative for Sci PO Box 121 Duanesburg, NY 12056	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	600
Regional Food Bank of NE NY 965 Albany Road Latham, NY 12110	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	50
Schoharie County Trail Association PO Box 851 Cobleskill, NY 12043	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	50
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
Summit Lake AssociationPO Box 256 Summit, NY 12175	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	310
Captain Youth Family Services 1705 US Route 9 Clifton Park, NY 12065	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
The Addiction Center of Albany 90 McCarty Avenue Albany, NY 12202	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
Insulin for Life USA 5745 SW 75th Street 116 Gainesville, FL 32608	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
K9's of ValorPO Box 108 Kent, OH 44240	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	300
Rescue Freedom Project 4804 Laurel Canyon Blvd 534 Valley Village, CA 91607	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
Total . . . . . ▶ **3a**				115,492

Form 990PF Part XV Line 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
a *Paid during the year*				
Green Mountain Pug Rescue 283 Town Line Road Mendon, VT 05701	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	100
The Daily Bread Food PantryPO Box 328 Cherry Valley, NY 13320	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	174
Friends of Bassett Health Care 1 Atwell Road Cooperstown, NY 13326	Not Affiliated	N/A	TO PROVIDE SUPPORT FOR ORGANIZATION'S MISSION	200
Total . . . . . ▶ **3a**				115,492

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491042004009

TY 2018 Accounting Fees Schedule

Name: STERLING INSURANCE COMPANY FOUNDATION
CO COMMUNITY BANK NA 008132

EIN: 46-7199984

Software ID: 18007218

Software Version: 2018v3.1

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	1,500	0	0	1,500

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491042004009

TY 2018 Investments Corporate Bonds Schedule

Name: STERLING INSURANCE COMPANY FOUNDATION
CO COMMUNITY BANK NA 008132

EIN: 46-7199984

Software ID: 18007218

Software Version: 2018v3.1

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
CISCO SYSTEMS INC 2.6%	24,809	24,504
ORACLE CORP 2.5% 10/15/22	25,247	24,331
TEXAS INSTRUMENTS 1.75%	24,939	24,609
PEPSI CO. 2.75%	24,831	24,748
AUTOMATIC DATA PROCESSING 3.375%	24,989	24,798
BANK OF NY MELLON CORP 2.050%	24,387	24,401
BERKSHIRE HATHAWAY 3.125%	24,307	24,231
MICROSOFT CORP 2.875%	24,637	24,764

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491042004009

TY 2018 Investments Corporate Stock Schedule

Name: STERLING INSURANCE COMPANY FOUNDATION
CO COMMUNITY BANK NA 008132

EIN: 46-7199984

Software ID: 18007218

Software Version: 2018v3.1

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
ISHARES RUSSELL MIDCAP VALUE	22,224	22,905
VANGUARD MSCI EMERGING MARKETS	8,335	7,620
ISHARES S&P MIDCAP 400 GR	21,189	23,904
ISHARES CORE MSCI EAFE ETF	10,290	11,000
SCHWAB US SMALL CAP ETF	11,126	12,136
AT&T	12,833	11,416
ABBVIE INC	9,583	18,438
C H ROBINSON WORLDWIDE INC	5,403	8,409
CHEVRON	16,447	16,318
CISCO SYSTEMS INC	8,810	17,332
COCA COLA CO	15,055	18,940
EXXON MOBIL CORP	17,953	13,638
GENERAL MILLS	9,459	7,788
INTEL CORP	11,821	23,465
PFIZER INC	14,763	21,825
VERIZON COMMUNICATIONS	13,958	16,866
MERCK & COMPANY	17,121	22,923
SPDR TECH SELECT SECTOR ETF	8,392	12,396
AMGEN	15,024	19,467
CVS HEALTH CORP	9,050	6,552
WALT DISNEY CO	9,926	10,965
DOWDUPONT INC	10,447	10,696
HOME DEPOT INC	12,650	17,182
JPMORGAN CHASE & CO	11,923	19,524
NIKE INC CL B	11,998	14,828
PROCTOR & GAMBLE CO	7,652	9,192
PUBLIC SVC ENTERPRISE GRP	7,616	10,410
IDEX CORP	25	37,878
BOEING COMPANY	6,558	16,125

TY 2018 Investments Government Obligations Schedule

Name:	STERLING INSURANCE COMPANY FOUNDATION CO COMMUNITY BANK NA 008132
EIN:	46-7199984
Software ID:	18007218
Software Version:	2018v3.1
US Government Securities - End of Year Book Value:	74,747
US Government Securities - End of Year Fair Market Value:	73,883
State & Local Government Securities - End of Year Book Value:	123,973
State & Local Government Securities - End of Year Fair Market Value:	121,905

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491042004009

TY 2018 Investments - Other Schedule

Name: STERLING INSURANCE COMPANY FOUNDATION
CO COMMUNITY BANK NA 008132

EIN: 46-7199984

Software ID: 18007218

Software Version: 2018v3.1

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
DODGE AND COX INTL STOCK FD	AT COST	25,000	20,682
LOOMIS SAYLES BOND INSTL	AT COST	25,000	21,035
VANGUARD inflation prot adm	AT COST	4,941	4,647
VANGUARD SHORT TERM CORP BOND	AT COST	24,050	23,382
T ROWE PRICE DIVERS SC GRWTH	AT COST	19,000	21,068

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TY 2018 Other Decreases Schedule

Name: STERLING INSURANCE COMPANY FOUNDATION
CO COMMUNITY BANK NA 008132

EIN: 46-7199984

Software ID: 18007218

Software Version: 2018v3.1

Description	Amount
NON-DEDUCTIBLE PENALTY	21

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491042004009

TY 2018 Other Expenses Schedule

Name: STERLING INSURANCE COMPANY FOUNDATION
CO COMMUNITY BANK NA 008132

EIN: 46-7199984

Software ID: 18007218

Software Version: 2018v3.1

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CHECK CHARGE	192			192
NYS FILING FEES	250			250

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491042004009

TY 2018 Taxes Schedule

Name: STERLING INSURANCE COMPANY FOUNDATION
CO COMMUNITY BANK NA 008132

EIN: 46-7199984

Software ID: 18007218

Software Version: 2018v3.1

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAX	347			347