## **Short Form Return of Organization Exempt From Income Tax**

OMB No. 1545-1150

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

2018

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to www.irs.gov/Form990EZ for instructions and the latest information.

**Open to Public** Inspection

		tue Service	- 40 10 11 11 11 11 11 11 11 11 11 11 11 11				
		2018 calenda		nuary 1 , 20	18, and ending	Decembe	
В	heck if ap	plicable	C Name of organization		7	D Employer id	entification number
<b>☑</b> .	Address cl	hange	Capital Area SQL Server User Group			. 4	7-3124683
$\overline{}$	Name cha	-	Number and street (or P O box, if mail is not delivered	ed to street address)	Room/suite	Telephone n	umber
_	Initial retur		34 Hearthstone Drive			(51	8) 221-0387
=	Finai returi Amended i	n/terminated	City or town, state or province, country, and ZIP or for	oreign postal code	(21)	Group Exe	mption
=	Application		Albany, NY_12205		091	Number I	<b>&gt;</b>
_		ing Method	✓ Cash		ľнс	heck ▶ 🗸	f the organization is not
	Vebsite	•	cassug.sqlpass.org				ach Schedule B
JΤ	ax-exem		ck only one) — 501(c)(3) 501(c) ( )	(insert no.) ☐ 4947(a)(	(1) or 527 (F	orm 990, 99	0-EZ, or 990-PF).
				Association			· · · · · · · · · · · · · · · · · · ·
			7b to line 9 to determine gross receipts If gross			ssets	
(Pa	rt II, colu	umn (B)) are \$	500,000 or more, file Form 990 instead of Form	990-EZ	· · · · · ·	▶ s	
	art I		e, Expenses, and Changes in Net As				s for Part I)
			the organization used Schedule O to re				
_	1		ns, gifts, grants, and similar amounts rece	<del></del>			6,404
	2		ervice revenue including government fees			2	0,404
	3	_	p dues and assessments		• • • • • •	3	0
	1		•			. 4	····
	4	Investment					0
	5a		unt from sale of assets other than invento	· –	5a	0	
	b		or other basis and sales expenses	<b>—</b>	5b	0	
	C		s) from sale of assets other than inventor	(Subtract line 5b fro	om line ba)	. 5c	0
	6		d fundraising events:	if acceptant them			
ە 2	a		ome from gaming (attach Schedule G				
Revenue	Ι.	•		<u> </u>	6a	0	
Š	þ		me from fundraising events (not including		of contributions	·;	
			alsing events reported on line 1) (attach s	A 1	1		
2			h gross income and contributions exceed	·	6b	0	
	I .		expenses from gaming and fundraising e		6c	0	
I	d		e or (loss) from gaming and fundraising of	events (add lines 6a	and 6b and subt	ract	
1		line 6c) .				· 6d	0
!	7a	Gross sale	s of inventory, less returns and allowances		7a	1	
	b	Less. cost	of goods sold	[	7b		
-	C	Gross prof	t or (loss) from sales of inventory (Subtractive (describe in Schedule O)	t line 7b from line 7a	CELA	\S\ 7c	0
?	8				، ، ، بنجست	\ <b>`\\`\</b> 8	6,071
_	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8			9	12,475
Net Assets Expenses	10		similar amounts paid (list in Schedule O)	101	MAK	10	0
	11	Benefits pa	ld to or for members	<b>/</b> ½/	EN U	٢٠ ١١١	0
	12	Salaries, of	her compensation, and employee benefits all fees and other payments to independent, rent, utilities, and maintenance	3 <b>.</b>	OGDEN.U	. 12	0
	13	Profession	al fees and other payments to independen	t contractors .\ .		13	0
	14	Occupancy	, rent, utilities, and maintenance			. 14	1,801
	15	Printing, po	blications, postage, and shipping			15	56
	16		nses (describe in Schedule O)				10,944
	17	Total expe	nses. Add lines 10 through 16	<u> </u>	<u></u>		12,801
	18	Excess or	deficit) for the year (Subtract line 17 from	line 9)		18	326
	19		or fund balances at beginning of year (f				· <del></del>
		end-of-yea	r figure reported on prior year's return) .			. 19	497
ē	20	Other char	ges in net assets or fund balances (explai	n in Schedule O)		20	0
Z	21	Net assets	or fund balances at end of year. Combine	lines 18 through 20	<u>.</u>	. ▶ 21	823
For	Paper	work Reduct	on Act Notice, see the separate instructions	· ·	Cat No 10642I		Form <b>990-EZ</b> (2018)

					. #30 #
Part II Balance Sheets (see the instructions	•				
Check if the organization used Schedule	O to respond to a	ny question in this	Part II  (A) Beginning of year	· · ·	
00 Cook assumes and investments		-	(A) Beginning or year		<u>'                                    </u>
<ul><li>Cash, savings, and investments</li><li>Land and buildings</li></ul>		· · · · · ·	497	23	823
24 Other assets (describe in Schedule O)		' · · · ·	<u> </u>	24	
25 Total assets			497		823
26 Total liabilities (describe in Schedule O)				26	
27 Net assets or fund balances (line 27 of column	n (B) <b>must</b> agree with	n line 21)	497	27	823
Part III Statement of Program Service Accom	plishments (see th	e instructions for f	Part III)		
Check if the organization used Schedule	O to respond to a	ny question in this	Part III 🔲	(Dom	Expenses uired for section
What is the organization's primary exempt purpose?			<u> </u>		c)(3) and 501(c)(4)
Describe the organization's program service accompliance as measured by expenses. In a clear and concise measured by expenses, and other relevant information for each other relevant information for each other relevant information.	nanner, describe the			orgar other	nizations, optional for s.)
28 SQL Saturday: an annual database conference held		des free training to h	undreds of		
attendees in areas such as database administration,			*******		
development.					
(Grants \$ ) If this amount	includes foreign gra	ints, check here .	▶ 🗆	28a	7,411
29 SQL Saturday precon events: In depth all-day techni					į
These are advanced deep-dives into important topic					
presentation and opportunities to network and ask q (Grants \$ ) If this amount				29a	2.740
30 Capital Area SQL Server User Group monthly meetin	includes foreign gra			294	3,719
Capital Area SQL Server Oser Group monthly meeting	igs neiu each month	and provide a short	(ecimical		
(Grants \$ ) If this amount	includes foreign gra	nts, check here .	▶ □	30a	1,671
31 Other program services (describe in Schedule O)					
	includes foreign gra			31a	0
32 Total program service expenses (add lines 28a				32	12,801
Part IV List of Officers, Directors, Trustees, and Key				nstruc	tions for Part IV)
Check if the organization used Schedule	1	(c) Reportable	(d) Health benefits,	<del></del>	<u>····</u>
(a) Name and title	(b) Average hours per week devoted to position	compensation (Forms W-2/1099-MISC (if not paid, enter -0-)	contributions to employ	01	Estimated amount of their compensation
Edward Pollack		-			
Event Coordinator & Treasurer	5	ď		0	0
Greg Moore				-	
Chapter Leader	3	<u> </u>		<u> </u>	0
Raymond Kim	1	_			•
PR/Social Media Coordinator	1			0	0
••	1				
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33	Part				_
33		instructions for Part V.) Check if the organization used Schedule O to respond to any question in this	Part		<del>,   </del>
detailed description of each activity in Schedule 0 .  Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents of they reflect a change to the organization's name. Otherwise, explain the change on Schedule 0. Soe instructions of the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?  If "Yes" to line \$3a, has the organization of a form \$30-1 for the year? If "Yes," provide an explanation in Schedule 0. Set organization a section \$510(e)(6), or \$510(e)(6) organization subject to section 603(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule 0, Part III .  36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete spoilable parts of Schedule 1.  37a Enter amount of political expenditures, direct or indirect, as described in the instructions   37a   37a   37b   37c   37b   37b   37c   37b   37c   37c	33	Did the organization engage in any significant activity not previously reported to the IRS2 If "Ves." provide a		Yes	No
copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions on Schedule O. See instructions of the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?  b If "Yes" to line 35a, has the organization filed a Forn 990-T for the year? If "No.", provide an explanation in Schedule O. Was the organization a section 5016(e)(4), 5016(e)(6), or 501(e)(6) organization subject to section 6033(e) notice reporting, and proxy tax nequirements during the year? If "Yes," complete Schedule C, Part III	00		33		1
1958 Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?  b if "Yes" to line 35a, has the organization lifed a Form 990-T for the year? If "No," provide an explanation in Schedule O  c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 603(e) notice, reporting, and proxy tax requirements fouring the year? If "Yes," complete Schedule C Part III.  36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete Schedule C Part III.  37a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a organization be form 1120-POL for this year?  37b Did the organization be form 1120-POL for this year?  37c Did the organization be form 1120-POL for this year?  37d Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a organization be form 1120-POL for this year?  37e Did the organization be form 1120-POL for this year?  37e Did the organization be form 1120-POL for this year?  37e Did the organization be form 1120-POL for this year?  37e Did the organization be form 1120-POL for this year?  37e Did the organization be form 1120-POL for this year?  37e Did the organization be form 1120-POL for this year?  37e Did the organization be form 1120-POL for this year?  37e Did the organization be form 1120-POL for this year?  37e Did the organization be form 1120-POL for this year?  38e Did To organization be form 1120-POL for this year?  39e Section 501(c)(3) organizations. Enter amount of the imposed on the organization on a prior year that has not been reported on any of its prior forms 930 or 930-EZ7 II "Yes," complete Schedule L, Part I  40b V Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line  40c remindered by the organization because the form 11	34	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the	34		
b if "Yes" to line \$5a, has the organization filed a Form \$90-T for the year? If "No," provide an explanation in Schedule O  Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III .  36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete Schedule N.  37a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a o  37b Did the organization ber Form 1120-PCI. for this year?  38a Did the organization berrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prory year and still outstanding at the end of the tax year covered by this return?  38b Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prory year and still outstanding at the end of the tax year covered by this return?  38c Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prory year and still outstanding at the end of the tax year covered by this return?  38b Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prory year and a financial account any approved any officer.  38c Did the organization borrow from solitical and the any of the tax year covered by this return?  38c Did the organization borrow from solitical and the any of the section \$39b Did the organization end the system in the state such any officer and the state system in the state such any officer and the state system in the	35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business			
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III .  36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N  37a Did the organization tile Form 1120-PDL for this year?  38 Did the organization file Form 1120-PDL for this year?  38 Did the organization file Form 1120-PDL for this year?  38 Did the organization file form 1120-PDL for this year?  39 Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on line 9 or public use of club facilities  a Initiation fees and capital contributions included on line 9 or public use of club facilities  a Initiation fees and capital contributions included on line 9 or public use of club facilities  b Gross receipts, included on line 9, for public use of club facilities  a Initiation fees and capital contributions included on line 9 or public use of club facilities  b Gross receipts, included on line 9, for public use of club facilities  a Initiation fees and capital contributions included on line 9 or public use of club facilities  b Gross receipts, included on line 9, for public use of club facilities  b Gross receipts, included on line 9, for public use of club facilities  a limitation fees and capital contributions included on line 9 or public use of club facilities  b Gross receipts, included on line 9, for public use of club facilities  b Gross receipts, included on line 9, for public use of club facilities  b Gross receipts, included on line 9, for public use of club facilities  b Gross receipts, included on line 9, for public use of club facilities  cecepts included on line 9, for public use of club facilities  b Gross receipts, included on line 9, for public use of club facilities on any section 4955 because be price year.  c Section 501(c)(3), 50	h		$\overline{}$	├	<del>-</del>
during the year? If "Yes," complete applicable parts of Schedule N  27a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0  28b Did the organization bife Form 1120-POL for this year?  28c Did the organization bife Form 1120-POL for this year?  28c Did the organization bife Form 1120-POL for this year?  28c Did the organization bife Form 1120-POL for this year?  28c Did the organization bife Form 1120-POL for this year?  28c Did the organization bife Form 1120-POL for this year?  28c Did the organization bife Form 1120-POL for this year?  28c Did the organization of the Experiment of Experiment of the Experiment of		Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,			<b>V</b>
b Did the organization file Form 1120-POL for this year?  38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b 0 0 39 Section 501(c)(3) organizations. Enter:  a Initiation fees and capital contributions included on line 9 39 39	36		36		1
Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  b If "Yes," complete Schedule L, Part II and enter the total amount involved 38bb 0. Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on line 9 39a 39b 39a	37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0			
b If "Yes," complete Schedule L, Part II and enter the total amount involved  38 Section 501(c)(7) organizations. Enter:  Intitation fees and capital contributions included on line 9  39 Gross receipts, included on line 9, for public use of club facilities  39 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ section 4912 ▶ section 4955 ★ section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4955 ★ secess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part 1  c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912. 4955, and 4958.  d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912. 4955, and 4958.  d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912. 4956, and 4958.  d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax in inequality and the organization is filed ▶ NY  The organization's books are in care of ▶ Edward Pollack.  Located at ▶ 34 Hearthstone Drive. Albany, NY 12205  b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account; or other		Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were	37b	,	
a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ section 4915 ▶ section 4911 ▶ section 4915 ▶ section 4916 Period of the organization engage in any section 4955 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-E27 if "Yes," complete Schedule L, Part I  c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T  Located at ▶ 34 Hearthstone Drive, Albany, NY 12205  Located at ▶ 34 Hearthstone Drive, Albany, NY 12205  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country ▶ completed instead of Form 990-EZ.  b Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ.  c Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ.  c Did the organization receive any payments			38a		<b>✓</b>
a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities  Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶  Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4956 degree on organization managers or disqualified persons during the year under sections 4912, 4955, and 4956 degree on 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8866-T.  List the states with which a copy of this return is filed ▶ NY  List the states with which a copy of this return is filed ▶ NY  List the states with which a copy of this return is filed ▶ NY  List the states with which a copy of this return is filed ▶ NY  List the states with which a copy of this return is filed ▶ NY  List the states with which a copy of this return is filed ▶ NY  List the states with which a copy of this return is filed ▶ NY  List the states with which a copy of this return is filed ▶ NY  List the states with which a copy of this return is filed ▶ NY  List the states with which a copy of this return is filed ▶ NY  List the states with which a copy of this return is filed ▶ NY  List the states with which a copy of this return is filed ▶ NY  List the states with which a copy of this return is filed ▶ NY  List the states with which a copy of this return is		· · · · · · · · · · · · · · · · · · ·	<b> </b>	١ .	
Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4915 ▶  Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ7 if "Yes," complete Schedule L, Part I c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 c		· · · · · · · · · · · · · · · · · · ·		,	
Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ;section 4915 ▶ ;section 4915 ▶ ;section 4910 ▶ ;section 4911 ▶ ;secti		· · · · · · · · · · · · · · · · · · ·			
b Section 4911		· · · · · · · · · · · · · · · · · · ·	,		-
excess benefit transaction furing the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I  C Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.  Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization  4 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization  4 RII organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T  4 List the states with which a copy of this return is filed ▶ NY  4 The organization's books are in care of ▶ Edward Pollack  Located at ▶ 34 Hearthstone Drive, Albany, NY 12205  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country y location as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶  See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  43 A tany time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country ▶  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year. ▶ 43  44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  C Did the organization perate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  C		section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶		٠	`
that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I  Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.  d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization  e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8866-T  List the states with which a copy of this return is filed  NY  12205-1706  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country  See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  c At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  b Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  b Did the organizati	Ь				لحنا
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All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T  List the states with which a copy of this return is filed ▶ NY  1220  134 Lest the states with which a copy of this return is filed ▶ NY  145 The organization's books are in care of ▶ Edward Pollack  Located at ▶ 34 Hearthstone Drive, Albany, NY 12205  137 At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶  See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country ▶  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year. ▶  143  144a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  15 Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  15 Did the organization receive any payments for indoor tanning services during the year?  16 "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  16 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ  16 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ In lieu of Form	d		, , *		1
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If "Yes," enter the name of the foreign country ►  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year		Financial Accounts (FBAR).	***	G.	. 0
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Pes No.  44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	43			.	
Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		and enter the amount of tax-exempt interest received or accrued during the tax year			
completed instead of Form 990-EZ	440	Did the executation maintain and dense advant finds divise the use 0 if 10/45 if Farm 000 and the		Yes	No
completed instead of Form 990-EZ	<del>44</del> a	completed instead of Form 990-EZ	44a		<u> </u>
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	b	completed instead of Form 990-EZ	44b	5,	7
explanation in Schedule O			44c		1
Did the organization have a controlled entity within the meaning of section 512(b)(13)?	d				لــــا
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of			-		<b>√</b>
meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of	_	• • • • • • • • • • • • • • • • • • • •	45a		<b>√</b>
	b	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of	45h		

Form **990-EZ** (2018)

							Tes No	
	the organization engage, directly or in							
	candidates for public office? If "Yes," o		Part I	• • • •	<u>····</u>	46		
Part VI	Section 501(c)(3) Organizations All section 501(c)(3) organization		stions 47, 40b and	<b>50</b> and ac	mploto th	a tablas fo	ar linos	
	50 and 51.	s must answer que	Suons 47–490 and	52, and co	uibiere ui	e lables ic	n illies	
	Check if the organization used Sch	nedule O to respond	to any question in t	this Part VI			П	
	Onock ii tilo organization acca co.	reduie o to respond	to any quodition in	ino i dit vi	<del></del>		Yes No	
<b>47</b> Did	I the organization engage in lobbying activities or have a section 501(h) election in effect during the tax							
	ar? If "Yes," complete Schedule C, Par					. 47	-   ✓	
<b>48</b> Is t	the organization a school as described in	n section 170(b)(1)(A)(ı	)? If "Yes," complete	Schedule E		. 48	✓	
	d the organization make any transfers to						✓ ✓	
	Yes," was the related organization a se							
	implete this table for the organization's iployees) who each received more than							
	iployees) who each received more than		T	(d) Health		e, enter ivi	JIIE.	
	(a) Name and title of each employee	(b) Average hours per week	(c) Reportable compensation	contributions to employe				
	<b>(.,</b> ,	devoted to position	(Forms W-2/1099-MISC)	benefit plans, compe	and deferred nsation	other com	pensation	
None				<u> </u>			-	
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		•						
				<del></del>				
f To	tal number of other employees paid ov	er \$100,000	. ▶ 0					
	emplete this table for the organization		ensated independent	contractors	who each	received	more than	
\$1	00,000 of compensation from the orga	nization. If there is no	one, enter "None."					
	(a) Name and business address of each independ	lent contractor	(b) Type of ser	vice	(c	Compensation	on	
					-			
None			ļ					
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			}					
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- d To	tal number of other independent contra	estore each recounted	Over \$100,000		<u> </u>	0	<del></del>	
	tal number of other independent contra d the organization complete Schedu	_		nizations n	ouet attacl			
	mpleted Schedule A	ile A: Note. All se					✓ No	
	ties of perjury, I declare that I have examined this	eturn, including accompan	ying schedules and statem	ents, and to the	best of my kr			
	, and complete. Declaration of preparer (other than					J	•	
		7			3//	5/201	9	
Sign	Signature di oficer Date							
Here	tdword Colach, Treasurer Jevent Coodhater							
	Type or print name and title	Preparer's signature	15	ate	<del></del> _	PTIN		
Paid	Print/Type preparer's name	i reparer a signature	۱۲	ald	Check self-emplo	1 17		
Prepare				E	n's EIN ▶	,		
Use On	ly Firm's name ► Firm's address ►				one no	<del></del>		
May the II	RS discuss this return with the prepare	shown above? See	instructions .	1.18		▶ ☐ Yes	□No	