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As Filed Data -

Return of Private Foundation

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

OMB No 1545-0052

DLN: 93491330008159

2018

Form 990-PI
Department of the Treasury

		t the Treasury nue Service	▶ Do not	ection 4947(a)(1) Tr enter social security nur www.irs.gov/Form990PF	mbers on this form	as it	may be made ¡	oublic.	ZUIO Open to Public
		- d 20			-				Inspection
		ndar year 20	18, or tax yea	r beginning 05-01-20)18 , a	ina e	nding 04-30-	2019 entification numb	
		RSON FOUNDATION	ON INC				16-6024689	entification numb	er
	ber and O BOX 1		ox number if mail is i	not delivered to street address)	Room/suite		mber (see ınstructı	ons)	
City	or town	, state or province	e, country, and ZIP o	r foreign postal code					
		149021522					C If exemption	application is pendi	ng, check here
i Ch	neck all	l that apply	☐ Initial return☐ Final return☐ Address chai	☐ Initial return of a☐ Amended return ☐ Name change	former public charity	/	2 Foreign or test, chec	ganizations, check l ganizations meetin k here and attach c	g the 85% omputation
_		pe of organizati	on Section	501(c)(3) exempt private	foundation e private foundation			undation status was n 507(b)(1)(A), che	
Fai of	r mark year (f	tet value of all a rom Part II, col \$ 3,797,687	ssets at end	I	Cash	ual		ation is in a 60-mon n 507(b)(1)(B), che	
Pa	rt I	of amounts in c		Expenses (The total (d) may not necessarily ee instructions))	(a) Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only
	1	Contributions, schedule)	gıfts, grants, etc	, received (attach					
	2		the foundation is	not required to attach					
	3	Sch B Interest on sa	vings and tempora	ary cash investments	2,21	7	2,217		
	4		interest from sec	•	74,04	_	74,042		
	5a	Gross rents							
	ь	Net rental inco	me or (loss)						
Revenue	6a	Net gain or (lo	ss) from sale of a	ssets not on line 10	157,21	0			
	ь	Gross sales pr	ice for all assets o	on line 6a					
Şe v	_		. t	902,370			457.240		
ш	7		et income (from P	,			157,210		
	8		cations						
	10a			1					
	ь	Less Cost of o	ss returns and allo	wances	<u>. </u>				
	c	_	(loss) (attach sch	nedule)	<u>. </u>				
	11	·	(attach schedule)	•					
	12				233,46	.9	233,469		
	13		of officers, direct						
	14		ee salaries and wa	, ,					
^	15	Pension plans,	employee benefit	ts					
156	16a	Legal fees (att	ach schedule) .		9 59	6	596		
Expenses	ь	Accounting fee	s (attach schedul	e)					
Ĕ	c	Other professi	onal fees (attach :	schedule)	17,25	1	17,251		
II A G	17	Interest			_				
2	18	Taxes (attach	schedule) (see ins	structions)	7,29	4	7,294		
Ē	19	•	attach schedule) a	•	_				
	20	Occupancy .							
Ĭ	21	Travel, confere	ences, and meetin	ngs					
and Administrative	22	Printing and pi	ublications						
2	23	Other expense	s (attach schedul	e)	9 26	9			25
Operating	24	Total operati	ng and administ	trative expenses.					
<u> </u>		Add lines 13 th	nrough 23		25,41	0	25,141		25
>	25	Contributions,	gıfts, grants paıd		190,09	9			190,09
	26	Total expens	es and disburse	ments. Add lines 24 and	345 50		2E 1/4		100.34
	27	Subtract line 2	6 from line 12		215,50	1	25,141		190,34
	a		enue over expe	nses and					
		disbursemen	ts		17,96	0			
	b		,	gative, enter -0-) cive, enter -0-)			208,328		
	C	majasteu net	come (ii liegal	, circei -0-) i i i	į.	1		İ	- i

2,135,695

2,701,473

2,701,473

2,701,473

2,701,473

483,615

2,210,562

2,719,433

2,719,433

2,719,433 2,719,433

2

3

4

5

6

2,701,473

2,719,433

2,719,433 Form 990-PF (2018)

17,960

625,367

3,147,064

3,797,687

Receivables due from officers, directors, trustees, and other

Prepaid expenses and deferred charges

Investments—land, buildings, and equipment basis ▶ _

Less accumulated depreciation (attach schedule)

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Less allowance for doubtful accounts ▶

Land, buildings, and equipment basis ▶ _

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe ▶_

Unrestricted . . .

Permanently restricted . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) ▶ ____

Temporarily restricted

Grants payable

disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (attach schedule) ▶

Investments—U S and state government obligations (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow SFAS 117, check here 🕨 🗹

Paid-in or capital surplus, or land, bldg, and equipment fund

Capital stock, trust principal, or current funds

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

	4
	5
	6
	7
S	8
Assets	9
As	10a
	b
	l c

11

12

13

14

15 16

17

18

19

20 21

22 23

24

25

28

29

31

Part III

2

Liabilities

Balances

Fund 26

ō

Assets 27

Net 30

• •	the kind(s) of property sold (e g , rehouse, or common stock, 200 shs	•	How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a PUBLICLY TRADED SECUR	RITIES		P		2019-04-30
b VARIOUS LITIGATION PR			P		2019-04-30
С					
d					
e					
	(f)		(g)	(h)
(e) Gross sales price	Depreciation allowed		other basis		r (loss)
Gross sales price	(or allowable)	plus exp	ense of sale	(e) plus (f) minus (g)
a 885	5,210		745,160		140,050
b	25				25
С					
d					
e					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69	(1)
(i)	(j)		(k)	Gains (Col (h) gain minus
(i) F M V as of 12/31/69	Adjusted basis		of col (ı)		less than -0-) or
	as of 12/31/69 over col (j), if any				om col (h))
a					140,050
b					25
c					
d					
e		If gain, also enter in P			
	or (net capital loss) ain or (loss) as defined in sections : t I, line 8, column (c) (see instructi		,	3	157,210
Part V Qualification U	nder Section 4940(e) for Re	duced Tay on Net	Investment Inc	come	
For optional use by domestic pr	rivate foundations subject to the sec	ction 4940(a) tax on ne	et investment incom	e)	
if section 4940(d)(2) applies, lea	ave this part blank				
	e section 4942 tax on the distributa t qualify under section 4940(e) Do			·	es 🗹 No
 Enter the appropriate am 	ount in each column for each year,	see instructions before	making any entries	5	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	(d) Distribution rati (col (b) divided by c	
2017	171,463		3,744,709		0 045788
2016	175,298		3,473,284		0 050470
2015	182,473		3,416,443		0 053410
2014	187,500		3,693,288		0 050768
2013	177,437		3,493,344		0 050793
2 Total of line 1, column (d)		2		0 251229
	for the 5-year base period—divide				
	dation has been in existence if less		3		<u>0 050246</u>
	charitable-use assets for 2018 fron	•	4		3,705,273
5 Multiply line 4 by line 3			5		186,175
	nt income (1% of Part I, line 27b)		6		2,083
			7		188,258
	ons from Part XII, line 4 ,			10/	190,349
If line 8 is equal to or gre- instructions	ater than line 7, check the box in Pa	art vi, line ib, and com	ipiete that part usin	yai 1% tax rate Se 	e the Part VI

Page **6**

1201	Statements Regard	uing	Activities for which	FORM 4720 May Be	Required (Continue	u)			
5a	During the year did the foundation	pay o	r incur any amount to					Yes	No
	(1) Carry on propaganda, or other	wise a	ttempt to influence legisl	ation (section 4945(e))?	☐ Yes	✓ 1	No		
	(2) Influence the outcome of any s	pecifi	c public election (see sect	tion 4955), or to carry					
	on, directly or indirectly, any vo	oter re	egistration drive?		· · · Pes	✓ 1	No		
	(3) Provide a grant to an individual	l for t	ravel, study, or other sım	ılar purposes?	☐ Yes	✓ 1	No		
	(4) Provide a grant to an organizat in section 4945(d)(4)(A)? See i			· -		✓ 1	.		
	(5) Provide for any purpose other t				· · L Yes		No		
	educational purposes, or for the	e prev	ention of cruelty to childi	ren or animals?		✓ ,	.		
b	If any answer is "Yes" to 5a(1)-(5)	, dıd a	any of the transactions fa	all to qualify under the ex	cceptions described in	Y	No		
	Regulations section 53 4945 or in a		=				5b		
	Organizations relying on a current i								
c	If the answer is "Yes" to question 5	a(4),	does the foundation clain	n exemption from the		ш			
	tax because it maintained expendit			•	· ·	П.	.		
	If "Yes," attach the statement requi		· · · · · ·		· · L Yes	ш	No		
6 a	Did the foundation, during the year	, rece	ive any funds, directly or	indirectly, to pay premi	ums on				
	a personal benefit contract?				· 🗆 🗆 vas	✓ 1	Na		
b	Did the foundation, during the year	, pay	premiums, directly or inc	lirectly, on a personal be	nefit contract?		МО 6Ь		No
	If "Yes" to 6b, file Form 8870								
7a	At any time during the tax year, wa	s the	foundation a party to a p	prohibited tax shelter tra	nsaction?		.		
b	If yes, did the foundation receive a				∟ Yes	V	NO 7b		
8	Is the foundation subject to the sec		•						
	excess parachute payment during t								
	Information About				Yes		No		
Pa	and Contractors	OIIIC	ers, Directors, Trust	ices, roundation ma	illagers, nighty Far	u EIII	рюусс	γ,	
1	List all officers, directors, truste	es fo	oundation managers ar	nd their compensation	See instructions				
	List all officers, all cetors, traste		b) Title, and average	(c) Compensation (If		. Т			
	(a) Name and address	`	hours per week	not paid, enter	employee benefit plans	and	(e) Expe	ense acc allowan	
			devoted to position	-0-)	deferred compensation	on			
See	Additional Data Table	_							
		-							
2	Compensation of five highest-pa	id en	nployees (other than t	hose included on line	1—see instructions). I	f non	e, enter	"NONE	. "
, ,	N		(b) Title, and average		(d) Contributions t				
(a)	Name and address of each employee more than \$50,000	paid	hours per week	(c) Compensation	employee benefit plans and deferred		(e) Expe	nse acci Ilowanc	
	more than \$50,000		devoted to position		compensation	•	Ochici e	o	.03
NON	 E								
	I mumahan af athan arradana a		0.000						
TOTA	I number of other employees paid ov	/er \$5	0,000		· · · · · •		F 01	10 55	/2012
							Form 99	7U-PF	(∠018

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Part VIII Information About Officers, Directors, Trust and Contractors (continued)	ees, Foundation Managers, Highly I	Paid Employees,
3 Five highest-paid independent contractors for professional s	services (see instructions). If none, ente	er "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.		<u> </u>
Part IX-A Summary of Direct Charitable Activities	de velevent statistical information such as the number	of
List the foundation's four largest direct charitable activities during the tax year Inclu organizations and other beneficiaries served, conferences convened, research papers	s produced, etc	Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments	•	A
Describe the two largest program-related investments made by the foundation du 1 N/A	uring the tax year on lines 1 and 2	Amount
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		. •
		Form 990-PF (2018)

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

3

4

5

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

3a 3h

4

5

190.349

2.083

188.266

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Form **990-PF** (2018)

Page 9

Form 990-PF (2018) Part XIII Undistributed Income (see instructions) (a) (b) (c) Years prior to 2017 2017 Corpus Distributable amount for 2018 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2018

24.864

7.168

32,032

32,032

4,656

15 663

4.545

4.656 15,663

4.545

7.168

a Enter amount for 2017 only.

Excess distributions carryover, if any, to 2018

f Total of lines 3a through e.

d Applied to 2018 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

6 Enter the net total of each column as

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 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 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.

10 Analysis of line 9

a Excess from 2014. . .

c Excess from 2016. . . . d Excess from 2017. . . e Excess from 2018. . .

b Excess from 2015. .

Subtract lines 7 and 8 from line 6a

indicated below:

4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ 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).

b Total for prior years

a From 2013.

b From 2014. . . . c From 2015. . .

d From 2016.

e From 2017.

2018

factors

OF CHEMUNG COUNTY, NEW YORK

÷	art XIV Private Operating Found	lations (see instru	ictions and Part V	II-A, question 9)		
La	If the foundation has received a ruling or de foundation, and the ruling is effective for 20			rating		
b	Check box to indicate whether the organizat	ion is a private opera	iting foundation des	cribed in section \Box] 4942(j)(3) or □] 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Iotai
	year listed					
b	85% of line 2a					
	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					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
Ь	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
С	"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				<u> </u>	
Pa	rt XV Supplementary Information assets at any time during th			roundation nad	\$5,000 or more	ın
<u> </u>	Information Regarding Foundation Man		uctions.)			
а	List any managers of the foundation who have	ve contributed more f				n
h	before the close of any tax year (but only if List any managers of the foundation who ow					
_	ownership of a partnership or other entity)	of which the foundati	on has a 10% or gr	eater interest	arge portion of the	
2	Information Regarding Contribution, Gr	ant, Gift, Loan, Sch	olarship, etc., Pro	ograms:	· · · · · · · · · · · · · · · · · · ·	
	Check here ▶ ☐ If the foundation only make unsolicited requests for funds. If the foundation only make unsolicited requests for funds.					
	other conditions, complete items 2a, b, c, a	nd d See instruction	s			
a	The name, address, and telephone number	or e-mail address of	the person to whom	applications should	be addressed	
	JANE JORALEMON PRESIDENT ANDERSON FOUNDATION C/O PO BOX 1522 ELMIRA, NY 14902 (607) 734-2271					
b	The form in which applications should be su APPLICANTS SHOULD REQUEST, COMPLETE			•		
С	Any submission deadlines					
_	ANNUALLY ON MARCH 1, SEPTEMBER 1 AND	DECEMBER 1				

 $\textbf{d} \quad \text{Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other areas, charitable fields, kinds of institutions, and charitable fields, kinds of institutions, and charitable fields, kinds of the charitable fields, kinds of the charitable fields of the charitab$

RECIPIENT ORGANIZATIONS MUST BE IN CHEMUNG COUNTY, NEW YORK OR PROVIDE SERVICES TO ORGANIZATIONS IN AND/OR RESIDENTS



enter gross amounts unless otherwise indicated		Unrelated bus	siness income	Excluded by section	(e) Related or exempt	
_	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
q Fees	and contracts from government agencies					
	ership dues and assessments					
3 Interes	et on savings and temporary cash nents			14	2,217	
4 Dividei	nds and interest from securities			14	74,042	
5 Net re	ntal income or (loss) from real estate					
a Debt	-financed property					
	lebt-financed property					
	ntal income or (loss) from personal property					
	nvestment income					
8 Gain o invento	r (loss) from sales of assets other than					
	•			14	157,210	
	come or (loss) from special events					
1 Other	profit or (loss) from sales of inventory revenue a					
	evenue a					
а						
е	al Add columns (b), (d), and (e).				233,469	
e 2 Subtot 3 Total.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)			13	233,469	
e 2 Subtot 3 Total. (See w	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations)			· · · · · · · · · · · · · · · · · · ·	
e 2 Subtot 3 Total. (See w	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to th	lations) ne Accomplishi	ment of Exem	pt Purposes		
e 2 Subtot 3 Total. (See w Part XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations) ne Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
e 2 Subtot 3 Total. (See w Part XV Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations) ne Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
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e 2 Subtot 3 Total. (See w Part XV Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations) ne Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
e 2 Subtot 3 Total. (See w Part XV Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations) ne Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
e 2 Subtot 3 Total. (See w Part XV Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations) ne Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
e 2 Subtot 3 Total. (See w Part XV Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations) ne Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
e 2 Subtot 3 Total. (See w Part XV Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations) ne Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
e 2 Subtot 3 Total. (See w Part XV Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations) ne Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
e 2 Subtot 3 Total. (See w Part XV Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations) ne Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
e 2 Subtot 3 Total. (See w Part XV Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations) ne Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
e 2 Subtot 3 Total. (See w Part XV Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations) ne Accomplishi income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	233,469

11 (20	10)												
(VII	Information Exempt Org	g Transfers To	and T	ransactio	ns and	Relation	ship	s V	/ith I	Non	charit	able	

Part	XVII	Exempt Organi		ransters to a	and Transacti	ons and Re	latio	nsnips with Nonc	naritable		
		ganization directly or in than section 501(c)(3)	directly enga						501	Yes	No
a Trar	sfers	from the reporting foun	dation to a n	oncharitable exe	empt organizatio	n of					
									1a(1)		No
(2)	Othe	r assets							. 1a(2)		No
b Oth	er trar	nsactions									
		of assets to a nonchar	•	-					. 1b(1)		No
		nases of assets from a r							. 1b(2)		No
		al of facilities, equipmer							. 1b(3)		No
		bursement arrangemen s or loan guarantees.							1b(4) 1b(5)		No No
		mance of services or m							1b(5)		No
٠.		f facilities, equipment, n	•	-					1c		No
d If th	e ans	wer to any of the above	ıs "Yes," cor	mplete the follow	ving schedule Co	olumn (b) sho	uld alv	ways show the fair ma	rket value		
of th	ne goo	ds, other assets, or ser	vices given b	y the reporting	foundation If the	e foundation re	eceive	d less than fair marke	t value		
ın a	ny trai	nsaction or sharing arra	ngement, sn	ow in column (d	1) the value of th	ie goods, otne	r asse	ts, or services receive	a		
(a) Line	No	(b) Amount involved	(c) Name of	noncharitable exe	mpt organization	(d) Descrip	tion of	transfers, transactions, ar	nd sharing arra	ngemen	ts
		ndation directly or indire	•	•	•		_	_	_		
desc	rıbed	ın section 501(c) (othei	r than section	n 501(c)(3)) or ı	in section 527? .			∐Yes	✓ No		
b If "Y	es," c	omplete the following s		1							
		(a) Name of organization	on	(1) Type of organiza	tion		(c) Description of	relationship		
	of m	er penalties of perjury, ny knowledge and belief	, it is true, c								
Sign	whic	ch preparer has any kno	wledge		I			ı	May the TDC 1		
Here		*****			2019-11-22	***	***		May the IRS dı return	scuss tn	115
пеге						—) —			with the prepa below	rer show	vn
	,	Signature of officer or t	rustee		Date	Title	•		(see instr)?	∕ γes l	□ No
		Print/Type preparer's	name	Preparer's Sigr	nature	Date		PT Check if self-	IN		
								employed ▶ □	P01370	080	
Doid		AARON T ALSHEIM	IER			2019-11	-26	employed P			
Paid	3ra-										
Preparent Use (THE PARTY OF THE P	LES & EVANS	5				Fır	m's EIN ▶16	-07605	91
USE (JIIIY		W CHURCH S	ST							
								Dh	one no (607	734-1	2271
		EL	MIRA, NY 14	4901				[""	2.10 110 (007	, , , , , ,	,_

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation JANE G JORALEMON PRES/TRUSTEE 0 50 MANCHESTER ROAD PINE CITY, NY 14871 PAUL GREENLEE IR VPRES/TRUSTE 0.50 1203 K STREET WASHOUGAL, WA 98671 E WILLIAM WHITTAKER TREAS/TRUSTE 0 50 507 WEST BLUFF DRIVE KEUKA PARK, NY 14478 AARON T ALSHEIMER SEC'Y/TRUSTE 0 0 50 461 DEMAREST PKWY ELMIRA, NY 14905 ELIZABETH T DALRYMPLE TRUSTEE 0.50 5 WOODLAND WAY ITHACA, NY 14850 JUDITH MCINTOSH TRUSTEE 0.50 333 EAST WATER STREET ELMIRA, NY 14901

0

TRUSTEE

0 50

DR MICHAEL A DOHERTY

137 LINCOLN ROAD HORSEHEADS, NY 14845

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

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

a Paid during the year				
CAPABILITIES1149 SULLIVAN STREET ELMIRA, NY 14901	NONE	PUBLIC	GENERAL SUPPORT	5,000

ELMIRA, NY 14901				
CASAPO BOX 778 CORNING, NY 14830	NONE	PUBLIC	GENERAL SUPPORT	4,772
CATHOLIC CHARITIES	NONE	PUBLIC	GENERAL SUPPORT & SVE HS	23,000

CORNING, NY 14830	NONE	TOBLIC	GENERAL SOLLOKI	٦,//٤
CATHOLIC CHARITIES 215 EAST CHURCH STREET ELMIRA, NY 14901	NONE	PUBLIC	GENERAL SUPPORT & SVE HS PROGRAM	23,000

CORNING, NY 14630				
CATHOLIC CHARITIES 215 EAST CHURCH STREET ELMIRA, NY 14901	NONE	PUBLIC	GENERAL SUPPORT & SVE HS PROGRAM	23,000
Total	190.099			

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CHEMUNG COUNTY CHILD CARE NONE PUBLIC PROGRAM SUPPORT 13,423 COLINCIA

571 ST JOSEPHS BLVD SUITE 205 ELMIRA, NY 14901				
CHEMUNG COUNTY HABITAT FOR HUMANITY 161 HIGH STREET ELMIRA NY 14901	NONE	PUBLIC	GENERAL SUPPORT	2,800

· · · · · · · · · · · · · · · · · · ·				
CHEMUNG COUNTY HABITAT FOR HUMANITY 161 HIGH STREET ELMIRA, NY 14901	NONE	PUBLIC	GENERAL SUPPORT	2,800
CHEMUNG COUNTY HISTORICAL SOCIETY 415 E WATER STREET ELMIRA, NY 14901	NONE	PUBLIC	GENERAL SUPPORT	5,000

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CHEMUNG COUNTY HUMANE SOCIETY NONE PUBLIC GENERAL SUPPORT 15,000 2435 RTE 352 ELMIRA, NY 14903

CHEMUNG COUNTY PERFORMING ARTS INC 207 CLEMENS CENTER PKWY ELMIRA, NY 14901	NONE	PUBLIC	HVAC UPDATE & GENERAL SUPPORT	27,500
CHEMUNG COUNTY YOUTH BUREAU	NONE	PUBLIC	SUMMER COHESIONS PROGRAM	4,950

207 CLEMENS CENTER PKWY ELMIRA, NY 14901			3011 01(1	
CHEMUNG COUNTY YOUTH BUREAU 599 HARRIS HILL ROAD	NONE	PUBLIC	SUMMER COHESIONS PROGRAM	4,9

ELMIRA, NT 14901				
CHEMUNG COUNTY YOUTH BUREAU 599 HARRIS HILL ROAD ELMIRA.NY 14903	NONE	PUBLIC	SUMMER COHESIONS PROGRAM	4,9

Total . .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year COMMUNITY ARTS OF ELMIRA NONE PUBLIC: GENERAL SUPPORT 4.200 413 LAKE STREET FIMIRA NY 14901

EEI 1110 (, 141 1 1 1 3 0 1				
COMPEER FAMILY SERVICES OF CHEMUNG COUNTY 310 PENNSYLVANIA AVE ELMIRA, NY 14904	NONE	PUBLIC	YOUTH PROGRAMS	8,500
FRIENDS OF CHEMUNG RIVER WATERSHED	NONE	PUBLIC	PROGRAM SUPPORT	7,500

▶ 3a

190,099

111 N MAIN STREET ELMIRA, NY 14901

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FRIENDS OF WOODLAWN CEMETERY NONE PUBLIC PROGRAM SUPPORT 2,500 **ELMIRA** MALNUT CERET

ELMIRA, NY 14905				
GOLD SHOE STEP IT UP COALITION 103 WASHINGTON STREET ELMIRA, NY 14901	NONE	PUBLIC	PROGRAM SUPPORT	1,854
HORSEHEADS FAMILY RESOURCE CENTER1034 WEST BROAD STREET HORSEHEADS, NY 14845	NONE	PUBLIC	GENERAL OPERATIONS	7,000

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year INSTITUTE FOR HUMAN SERVICES-NONE **PUBLIC** PROGRAM SUPPORT 1.800 GOTR 50 LIBERTY STREET

BATH, NY 14810				
JUNIOR ACHIEVEMENT OF CENTRAL UPSTATE NY1600 COLLEGE AVENUE ELMIRA, NY 14901	NONE	PUBLIC	CHEMUNG COUNTY PROGRAMS	10,000
LET ELMIRA LIVE 1205 WEST CHURCH STREET	NONE	PUBLIC	COMMUNITY CENTERS	7,000

ELMIRA, NY 14901				
LET ELMIRA LIVE 1205 WEST CHURCH STREET ELMIRA, NY 14905	NONE	PUBLIC	COMMUNITY CENTERS	7,000
Total	190,099			

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NEIGHBORHOOD TRANSFORMATION NONE PUBLIC PROGRAM SUPPORT 7,000 CENTER

314 W CHURCH STREET ELMIRA, NY 14901				
ORCHESTRA OF SOUTHERN FINGER LAKES 49 BRIDGE STREET CORNING, NY 14830	NONE	PUBLIC	GENERAL SUPPORT	3,300

LAKES 49 BRIDGE STREET CORNING, NY 14830				
ROCKWELL MUSEUM OF WESTERN ART 111 CEDAR STREET CORNING, NY 14830	NONE	PUBLIC	GENERAL SUPPORT	6,000
Total			▶ 3a	190,099

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SCIENCE & DISCOVERY CENTER NONE PUBLIC MOBILE LAB VISITS TO 1.000 19 EAST MARKET STREET SCHOOLS

SUITE 201 CORNING, NY 14830				
SOUTHERN TIER BICYCLE LEAGUE 21 CHELSEA DRIVE HORSEHEADS, NY 14845	NONE	PUBLIC	BIKE HELMET PROGRAM	2,000
SOUTHSIDE COMMUNITY CENTER	NONE	PUBLIC	GENERAL SUPPORT	7,000

PO BOX 4187 ELMIRA, NY 14904

Total .

Recipient If recipient is an individual, show any relationship to any foundation manager Name and address (home or business)

Recipient If recipient is an individual, show any relationship to any foundation manager recipient Purpose of grant or contribution any foundation manager recipient

	or substantial contributor			
a Paid during the year				
TANGLEWOOD NATURE CENTER 443 COLEMAN AVENUE	NONE	PUBLIC	GENERAL SUPPORT	12,000

Total

DLN: 93491330008159

TY 2018 Investments Corporate Stock Schedule

Name: THE ANDERSON FOUNDATION INC

EIN: 16-6024689

Investments Corporation Stock Schedule				
Name of Stock	End of Year Book Value	End of Year Fair Market Value		
ADOBE SYSTEMS INC	15,203	20,247		
BB&T CORP				
BCE INC	16,707	17,225		
BERKSHIRE HATHAWAY	20,703	21,671		
CHEVRON CORPORATION				
CISCO	13,406	28,534		
COCA COLA	12,894	29,436		
COLGATE PALMOLIVE				
DISNEY,WALT COMPANY	25,174	29,449		
DOMINION	19,469	19,857		
DUKE ENERGY	19,505	19,591		
EMERSON ELECTRIC				
ENBRIDGE INC	19,820	21,795		
EXXON MOBIL CORP				
HOME DEPOT				
GLAXOSMITHKLINE PLC SPONSORED ADR	20,255	20,154		
JPMORGAN CHASE & COMPANY				
MERCK & CO INC	12,487	26,368		
MICROSOFT	13,233	33,956		
PFIZER				
PROCTER & GAMBLE	13,361	22,893		
SALESFORCE.COM	19,937	23,149		
SPDR S&P BIOTECH				
SECTOR SPDR MATERIALS SELECT				
SECTOR SPDR CONSUMER DISC	17,953	28,817		
SECTOR SPDR ENERGY SELECT	27,131	27,105		
SECTOR SPDR FINANCIAL SELECT				
SECTOR SPDR INDUSTRIAL SELECT	27,485	29,254		
SECTOR SPDR TECHNOLOGY SELECT	11,905	17,710		
SECTOR SPDR REAL ESTATE	26,386	30,445		

Name of Stock

Investments Corporation Stock Schedule

THE TRAVELERS COMPANIES INC

UNITED TECHNOLOGIES

WAL-MART STORES INC

STARBUCKS

зм со

VERIZON

VISA INC

Value 18,948

End of Year Book

16,989

16,836

25,025

24,083

14,058

14,662

End of Year Fair

Market Value

22,916

15,161

18,687

26,383 25,735

28,775

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TY 2018 Investments - Other Schedule

Name: THE ANDERSON FOUNDATION INC

EIN: 16-6024689

Caba a a weel Thans	Listed at Coat an	Deels Value	Fud of Vocu Fair
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
ALLIANZ NACM INTL GROWTH	AT COST		
DODGE & COX INCOME FUND	AT COST	123,515	124,779
FIDELITY INTL INDEX INSTL	AT COST	71,581	72,606
ISHARES MSCI EAFE INDEX FD	AT COST	83,997	81,781
LEGG MASON CLEARBRIDGE S/C GR	AT COST	69,645	84,972
LOOMIS SAYLES BOND FUND	AT COST	36,311	40,437
LOOMIS SAYLES GLOBAL BOND FD	AT COST	463,578	475,918
MSIF INTERNATIONAL EQUITY	AT COST		
OPPENHEIMER DEV MARKETS	AT COST		
PIMCO CREDIT ABSOLUTE RETURN	AT COST	88,488	86,667
VANGUARD INT TERM BOND IDX	AT COST	57,650	56,664
VANGUARD EXTENDED MARKET IDX	AT COST	76,892	90,282
VANGUARD TOTAL BOND MARKET INDEX FUN	AT COST	322,706	326,680
VANGUARD TOTAL INT'L STOCK INDEX	AT COST	395,445	486,178
VANGUARD 500 INDEX FUND	AT COST	420,754	1,220,100

efile GRAPHIC print - DO NOT PRO	CESS As Filed Data	-	DL	N: 93491330008159
TY 2018 Legal Fees Sche	dule			_
N	lame: THE ANDERS	SON FOUNDATION	INC	
	EIN: 16-6024689)		
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL & TAX PREPARATION FEES	596	596		

efile GRAPHIC print - DO NOT PROCES	SS As Filed Data -		DLN	l: 93491330008159	
TY 2018 Other Expenses Schedule					
Nan	ne: THE ANDERSON	N FOUNDATION I	NC		
E	EIN: 16-6024689				
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
EXPENSES					
NY ATTORNEY GENERAL FILING FE	250			250	
PENALTY & INTERST	19				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	·]	DLN	N: 93491330008159		
TY 2018 Other Professional F	Fees Schedul	e				
Name: THE ANDERSON FOUNDATION INC						
				!		
EIN: 16-6024689						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable		
			1	Purposes		

17,251

INVESTMENT MANAGEMENT FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLN	l: 93491330008159
TY 2018 Taxes Schedule				
	THE ANDERSON FOUNDATION INC 16-6024689			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ESTIMATED EXCISE TAX 4/30/19	4,740	4,740		
FOREIGN TAX W/H	87	87		
BALANCE EXCISE TAX DUE 4/30/18	2,467	2,467		