Return of Private Foundation

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

OMB No 1545-0052

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

• Go to warm its gov/Form990PF for instructions and the latest information.

| = | 1121 11040 | Go to www.irs.gov/Form990PF to | | | | on. 14 00 Open | to Public Inspection |
|-----------------------------|------------|---|------------------------------|-------------|------------------------|---|--|
| | | dar year 2018 or tax year beginning June | 1st , 2018 | , and e | | May 31st | , 20 19 |
| Nan | ne of fou | ndation | | | A Employe | r identification numbe | er |
| Pay | chex C | Charitable Foundation, Inc. | | | | 46-5691719 | |
| Nun | nber and | street (or P O box number if mail is not delivered to street address) | suite | B Telephor | e number (see instruct | ions) | |
| 911 | Panor | ama Trail South | | | 585-385-6666 | , | |
| City | or town | , state or province, country, and ZIP or foreign postal code | | | C If exemp | tion application is pend | ing, check here ▶ |
| Roc | chester | , New York 14625 | | | | | _ |
| G | Check | all that apply: Initial return Initial return | of a former public of | charity | D 1. Foreig | n organizations, check | here ▶ □ |
| | | ☐ Final return ☐ Amended | return | - 1 | _ | - | _ |
| | | Address change Name char | nge | | | n organizations meeting here and attach compt | |
| H | Check | type of organization: Section 501(c)(3) exempt p | rivate foundation | nU | E If private | foundation status was | terminated under |
| | | on 4947(a)(1) nonexempt charitable trust | | ation | section 5 | 07(b)(1)(A), check here | ▶⊔ |
| | | narket value of all assets at J Accounting method | | | ^ | | |
| • | | f year (from Part II, col. (c), Other (specify) | | | under se | ndation is in a 60-mont ction 507(b)(1)(B), chec | h termination k here |
| | line 16 | | on cash basis) | | | | |
| | art I | 1888007 1 | | | | | (d) Disbursements |
| _ | 2.1 (1 | amounts in columns (b), (c), and (d) may not necessarily equal | (a) Revenue and expenses per | | investment | (c) Adjusted net | for charitable |
| | | the amounts in column (a) (see instructions)) | books | ın | come | ıncome | purposes (cash basis only) |
| | 1 | Contributions, gifts, grants, etc , received (attach schedule) | 2500000 | | 181.81 | | |
| | 2 | Check ► ☐ if the foundation is not required to attach Sch B | 2500000 | | | | |
| | 3 | Interest on savings and temporary cash investments | | | | | |
| | 4 | Dividends and interest from securities | | | | | |
| | l <u>i</u> | | + | | | | |
| | 5a | Gross rents | | | | | |
| _ 4 | b | Net rental income or (loss) | | F · Y | - C3 122 44 | | |
| 5 | 6a | Net gain or (loss) from sale of assets not on line 10 | 1 | }-< [- | Crr. | 1.5 | |
| 20 | _b | Gross sales price for all assets on line 6a | | | | 1/2 | |
| €۳ | 7 | Capital gain net income (from Part IV, line 2) | 101 | | T M 43 5 | [8] | |
| 0" | 8 | Net short-term capital gain | 1141 | UL | 1222 | | |
| ပ | 9 | Income modifications | 1121 | | | 10 | |
| Ë | 10a | Gross sales less returns and allowances | | | - F | | <u> </u> |
| | b | Less: Cost of goods sold | £ ,,,, ; | المدا الجيز | L'EIV. | 111 | |
| Ω | С | Gross profit or (loss) (attach schedule) | | | | A American Street | |
| " | 11 | Other income (attach schedule) | | | | | |
| <u>z</u> _ | 12 | Total. Add lines 1 through 11 | 2500000 | | | | |
| SCANNED Expenses | 13 | Compensation of officers, directors, trustees, etc | | | | | |
| Sec | 14 | Other employee salaries and wages | | | | | |
| Ğ. | 15 | Pension plans, employee benefits | | | | | |
| 홄 | 16a | Legal fees (attach schedule) | | | | | |
| П | b | Accounting fees (attach schedule) | | | | | |
| | С | Other professional fees (attach schedule) | | | | | |
| Operating and Administrativ | 17 | Interest | | | | | |
| is: | 18 | Taxes (attach schedule) (see instructions) | | | | | |
| Ę. | 19 | Depreciation (attach schedule) and depletion | | | | | |
| 퉏 | 20 | Occupancy | | | | | |
| ¥ | 21 | Travel, conferences, and meetings | | | | | |
| ĭ | 22 | Printing and publications | | | | | |
| <u> </u> | 23 | Other expenses (attach schedule) | 250 | | | | 250 |
| 럁 | 24 | Total operating and administrative expenses. | | | | | |
| ra | | Add lines 13 through 23 | 250 | | | | 250 |
| ۾ | 25 | Contributions, gifts, grants paid | 547000 | | | | 547000 |
| 0 | 26 | Total expenses and disbursements. Add lines 24 and 25 | 547250 | | | | 547250 |
| | 27 | Subtract line 26 from line 12: | 730 | | | | 1 |
| | a | Excess of revenue over expenses and disbursements | 1952750 | | | | |
| | l . | Net investment income (if negative, enter -0-) | 1002700 | | 0 | | |
| | | Adjusted net income (if negative, enter -0-) | | | | 0 | |
| For | | work Reduction Act Notice, see instructions. | Cat No | 11289 | <u> </u> | | orm 990-PF (2018) |
| | | | Out 110 | | - | | \ - / |

| Pa | art II | Balance Sheets Attached schedules and amounts in the description column | Beginning of year | End o | f year |
|-------------|----------|--|--------------------------|----------------|---------------------------|
| | | should be for end-of-year amounts only (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash—non-interest-bearing | 2577307 | 4530057 | 4530057 |
| | 2 | Savings and temporary cash investments | | | |
| | 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 | | | |
| ĺ | | disqualified persons (attach schedule) (see instructions) | | | |
| | 7 | Other notes and loans receivable (attach schedule) ▶ | | | i |
| | | Less: allowance for doubtful accounts ▶ | | <u> </u> | |
| S | 8 | Inventories for sale or use | | | |
| Assets | 9 | Prepaid expenses and deferred charges | | | |
| As | 10a | Investments—U.S. and state government obligations (attach schedule) | | | |
| • | ь | Investments—corporate stock (attach schedule) | | | |
| | c | Investments—corporate bonds (attach schedule) | | | |
| | 11 | Investments—land, buildings, and equipment. basis ▶ | | | i |
| | | Less accumulated depreciation (attach schedule) | | | |
| | 12 | Investments—mortgage loans | | | |
| | 13 | Investments—other (attach schedule) | | | |
| | 14 | Land, buildings, and equipment: basis ▶ | | | |
| | 17 | Less. accumulated depreciation (attach schedule) ▶ | | | |
| | 15 | Other assets (describe) | | | |
| | 16 | Total assets (to be completed by all filers—see the | | | |
| | 10 | instructions. Also, see page 1, item l) | | , | 4500057 |
| _ | 17 | Accounts payable and accrued expenses | 2577307 | 4530057 | 4530057 |
| | | Grants payable | <u>-</u> . | | |
| es | 18 | Deferred revenue | | | |
| Ξ | 19 | . | + | | |
| Liabilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| Ë | 21 | Mortgages and other notes payable (attach schedule) | | | |
| | 22 23 | Other liabilities (describe ►) | | | |
| _ | 23 | Total liabilities (add lines 17 through 22) | | | <u> </u> |
| S | | Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26, and lines 30 and 31. | | | |
| ပ္ | 24 | Unrestricted | 0577007 | 450005 | |
| Balances | | | 2577307 | 4530057 | |
| Ba | 25 26 | Temporarily restricted | | | |
| 밀 | 20 | Permanently restricted | | - · · - | |
| Fu | | Foundations that do not follow SFAS 117, check here ▶ □ | | | |
| o | 07 | and complete lines 27 through 31. | | | |
| S | 27 | Capital stock, trust principal, or current funds | | | |
| set | 28 | · · · · · · · · · · · · · · · · · · · | | | |
| AS: | 29 | Retained earnings, accumulated income, endowment, or other funds | | | |
| Net Assets | 30 | Total net assets or fund balances (see instructions) | 2577307 | 4530057 | |
| ž | 31 | Total liabilities and net assets/fund balances (see instructions) | 2577307 | 4530057 | |
| Pa | rt III | Analysis of Changes in Net Assets or Fund Balances | 2377307 | 4530037] | |
| 1 | Tota | I net assets or fund balances at beginning of year-Part II, colur | nn (a), line 30 (mus | t agree with | |
| | | of-year figure reported on prior year's return) | | | 2577307 |
| 2 | | r amount from Part I, line 27a | | | 1952750 |
| 3 | | er increases not included in line 2 (itemize) ▶ | | | |
| 4 | | lines 1, 2, and 3 | | 4 | 4530057 |
| 5 | _ | | | <u> </u> | |
| 6 | Tota | eases not included in line 2 (itemize) ► I net assets or fund balances at end of year (line 4 minus line 5)—F | Part II, column (b), lir | ne 30 6 | 4530057 |
| | | | | | Form 990-PF (2018) |

| Part | (a) List and describe the kil | nd(s) of property sold (for example, real est use, 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 | | | - | | | |
| <u>b</u> | | | | | | |
| <u> </u> | | | <u>.</u> | | | |
| <u>d</u> | | | | | <u> </u> | |
| <u>е</u> | | | | | | L |
| | (e) Gross sales price | (f) Depreciation allowed (or allowable) | | other basis nse of sale | | n or (loss) (f) minus (g)) |
| <u>a</u> | | | | | | |
| <u> </u> | | | | | _ | |
| <u>c</u> | | | | - | | |
| <u>d</u> | - . | | | | | |
| <u>е</u> | Complete only for assets sho | | v the foundation | on 12/31/69 | | |
| | (i) FMV as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess | s of col (i) (j), if any | col (k), but no | I (h) gain minus t less than -0-) or rom col (h)) |
| a | | | | - | | |
| <u> </u> | | | | | | |
| <u>C</u> | | | | | | |
| <u>d</u> | | | | ··- | | |
| е | | | | | , | |
| 2 | Capital gain net income o | | ilso enter in Pai enter -0- in Par | | 2 | |
| 3 | If gain, also enter in Part | n or (loss) as defined in sections I, line 8, column (c). See instruc | tions. If (loss), | | 3 | |
| Part | V Qualification Und | ler Section 4940(e) for Reduc | ced Tax on N | et Investment | - | |
| Was t If "Ye: | s," the foundation doesn't o | section 4942 tax on the distributa | not complete th | nis part. | | ☐ Yes ☐ No |
| 1 | | ount in each column for each year | r; see the instru | ictions before ma | akıng any entries. | |
| Cale | (a) Base period years endar year (or tax year beginning in) | (b) Adjusted qualifying distributions | Net value of | (c) noncharitable-use a | | (d) tribution ratio divided by col (c)) |
| | 2017 | | | | | <u></u> |
| | 2016 | | | | | |
| | 2015 | | | | | |
| | 2014 | | | | | |
| | 2013 | | <u> </u> | | <u></u> | |
| _ | Total of line 4 and immedial | | | | | |
| 2 | Total of line 1, column (d) | | | | . 2 | |
| 3 | | for the 5-year base period—dividual coundation has been in existence in | | | . 3 | |
| 4 | Enter the net value of non | charitable-use assets for 2018 fro | om Part X, line | 5 | . 4 | |
| 5 | Multiply line 4 by line 3 | | | | . 5 | |
| 6 | Enter 1% of net investmen | nt income (1% of Part I, line 27b) | | | . 6 | |
| | | | | | 1 1 | |
| 7 | Add lines 5 and 6 | | | | . 7 | |

| Page | e 4 |
|------|-----|
| | |

| Part | Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see | <u>ınstr</u> ı | ictio | ns) | |
|------|---|----------------|-------|-----|---|
| 1a | Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. | | | | ĺ |
| | Date of ruling or determination letter: (attach copy of letter if necessary—see instructions) | | | | İ |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check | | | | 7 |
| | here ▶ ☐ and enter 1% of Part I, line 27b | | | | ĺ |
| С | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b). | | | | İ |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) | | | | |
| 3 | Add lines 1 and 2 | | | | |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) | | | | |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 | | | | ; |
| 6 | Credits/Payments: | | | | |
| а | 2018 estimated tax payments and 2017 overpayment credited to 2018 6a 6a | | | | ı |
| b | Exempt foreign organizations—tax withheld at source 6b | | | | |
| C | Tax paid with application for extension of time to file (Form 8868) . 6c 6c | | | | ĺ |
| _d | Backup withholding erroneously withheld | | | | ĺ |
| 7 | Total credits and payments. Add lines 6a through 6d | | | | |
| 8 | Enter any penalty for underpayment of estimated tax. Check here uf Form 2220 is attached 8 | | | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | | | |
| 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 | | | | |
| | VII-A Statements Regarding Activities | T | Yes | No | - |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | 1 | res | NO | - |
| b | participate or intervene in any political campaign? | 1a | | | • |
| | instructions for the definition | 1b | | ~ | i |
| | published or distributed by the foundation in connection with the activities. | | | | |
| С | Did the foundation file Form 1120-POL for this year? | 1c | | | i |
| d | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | | | ĺ |
| • | (1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$ | | | | ĺ |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | | | | ĺ |
| • | on foundation managers. ▶ \$ | | | | ĺ |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | ~ | 1 |
| | If "Yes," attach a detailed description of the activities. | | | | İ |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles | | | | ĺ |
| | of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes . | 3 | | ~ | |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a | | ~ | • |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | 4b | | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | | ٧ | • |
| | If "Yes," attach the statement required by General Instruction T. | | | | l |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | | | ĺ |
| | By language in the governing instrument, or | | | | |
| | • By state legislation that effectively amends the governing instrument so that no mandatory directions that | | | | į |
| _ | conflict with the state law remain in the governing instrument? | 6 | ~ | | - |
| 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 | ~ | | ī |
| 8a | Enter the states to which the foundation reports or with which it is registered. See instructions. ▶ | | | ' | İ |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | | 1 | | |
| • | (or designate) of each state as required by <i>General Instruction G?</i> If "No," attach explanation | 8b | ~ | | , |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or | | | | ĺ |
| • | 4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," | | | | |
| | complete Part XIV | 9 | | ~ | |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their | | | | • |
| | names and addresses | 10 | ~ | | |
| | | | 1 | | |

| Par | VII-A Statements Regarding Activities (continued) | | | | |
|---------|---|-------|-----------|----------|---------------|
| | | | · | Yes | No |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within t meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions | 1 | 11 | | |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualific person had advisory privileges? If "Yes," attach statement. See instructions | | 12 | | • |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption applicatio | n? 1 | 13 | ~ | |
| | Website address ► N/A | _ | | | |
| 14 | The books are in care of ▶ Paychex, Inc Telephone no. ▶ | 585-3 | 85-6 | 666 | |
| | Located at ► 911 Panorama Trail South, Rochester, New York ZIP+4 ► | 1462 | 25-23 | 96 | <u></u> |
| 15 | • | | • | . 1 | ▶ □ |
| | and enter the amount of tax-exempt interest received or accrued during the year | | | . 1 | |
| 16 | At any time during calendar year 2018, did the foundation have an interest in or a signature or other author | | - | /es | No V |
| | over a bank, securities, or other financial account in a foreign country? | | 6 | | |
| | the foreign country ► | 01 | | | |
| Part | VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | | ' |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Τ, | res | No |
| 1a | During the year, did the foundation (either directly or indirectly): | | \dashv | | $\overline{}$ |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes | | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes | 40 | 1 | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | | | | |
| 1 | (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.) | 40 | | | |
| b | If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions | | b | _ | |
| | Organizations relying on a current notice regarding disaster assistance, check here | | | | <u> </u> |
| С | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, the were not corrected before the first day of the tax year beginning in 2018? | | | _ | <u> </u> |
| 2 | Taxes on fallure to distribute income (section 4942) (does not apply for years the foundation was a priva operating foundation defined in section 4942(j)(3) or 4942(j)(5)): | te | | | |
| а | 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? | 10 | | | |
| | If "Yes," list the years ▶ 20, 20, 20, 20 | | | | ŀ |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a) (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.) | _2 | <u>:b</u> | | |
| С | 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? | 10 | | | |
| b | If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation | | | | |
| | 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.) | | | | |
| 4~ | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes | | b | | |
| 4a b | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize | | la | \dashv | - |
| | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 201. | | | | |

| Pa | ne. | ŧ |
|----|-----|---|
| | | |

| Par | VII-5 Statements Regarding Activities | s for V | Vhich Form | 4720 | May Be R | equire | ed (contil | nued) | | | |
|----------|--|-----------|-------------------------------|----------|------------------------|----------|----------------------------|-------------|------------|--------------------|--------|
| 5a | During the year, did the foundation pay or incur | any am | ount to: | | | | | - | | Yes | No |
| | (1) Carry on propaganda, or otherwise attempt | to influe | ence legislati | on (sect | tion 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? | | | | | | | | | | |
| | (3) Provide a grant to an individual for travel, stu | | other similar | nurnos | es? | | ☐Yes | ☑ No | - 1 | | |
| | (4) Provide a grant to an organization other tha | | | | | | _ | <u></u> | 1 | | |
| | | | | _ | | | _ | | | | |
| | (5) Provide for any purpose other than religious | | | | | | ∐ Yes | ✓ No | | | |
| | purposes, or for the prevention of cruelty to | childrer | n or animals? | | | | ☐Yes | ☑ No | | | |
| b | If any answer is "Yes" to 5a(1)–(5), did any of the in Regulations section 53.4945 or in a current not section 53.4945. | | | | | | | scribed | | | |
| | Organizations relying on a current notice regard | ing disa | ster assistar | ice, che | ck here . | | | ▶□ | | | |
| С | If the answer is "Yes" to question 5a(4), does | | | | | | | | | | |
| | because it maintained expenditure responsibility | | | | | | | ∏No | | | 1 |
| | If "Yes," attach the statement required by Regul | | - | | | | | | | | |
| 6a | Did the foundation, during the year, receive any | | | | | emiums | | | 1 | | i |
| | on a personal benefit contract? | | • | - | | | □Yes | ₽ No | | | |
| b | Did the foundation, during the year, pay premiur | | | | | henefit | | | 6b | | |
| | If "Yes" to 6b, file Form 8870. | iis, uiie | city of indire | ctiy, on | a personal | Denem | Contract | | 00 | | |
| 7a | At any time during the tax year, was the foundation | a party | to a prohibite | d tax sh | elter transac | tion? | □Yes | ₩ No | | | ì |
| b | If "Yes," did the foundation receive any proceed | | • | | | | | _ | 7b | _ | |
| 8 | Is the foundation subject to the section 4960 ta | | • | | | | | ••• | · | | - |
| Ū | remuneration or excess parachute payment(s) d | • | | | | • | | ₽ No | | | |
| Part | VIII Information About Officers, Direct | | • | | | | | | 1 | 200 | 1 |
| | and Contractors | | iiustees, i | ounda | tion mane | 1gc: 3, | ıngıny ı | aid L | прюу | cc3, | |
| 1 | List all officers, directors, trustees, and found | lation r | managere ar | nd their | compans | ation S | Loo inetri | ıctions | | | |
| <u> </u> | | | e, and average | | mpensation | | Contribution | | | | |
| | (a) Name and address | hou | rs per week ed to position | (If r | not paid, iter -0-) | emplo | yee benefit erred compe | plans | (e) Expe | nse acc allowan | |
| Martın | Mucci | | | | | | | | | | |
| 911 Pa | norama Trail south, Rochester NY 14625 | Pres./C | Dir. 1 | | 0 | | | 0 | | | 0 |
| Efrain | | | | | - | | | - | | | |
| | norama Trail south, Rochester NY 14625 | VP/Tre | as./Dır. 1 | | n | | | o | | | 0 |
| | inie Schaeffer | 117110 | <u> </u> | | | | | | | | |
| | norama Trail south, Rochester NY 14625 | VDISon | retary/Dir. 2 | | 0 | | | 0 | | | 0 |
| | Braithwaite | V1 7500 | ictar yron . z | | | | | | | - | |
| | norama Trail south, Rochester NY 14625 | | Necestra E | | • | | | _ | | | ^ |
| <u>2</u> | Compensation of five highest-paid employed | | Orector 5 | se incl | uded on li | ne 1 | saa instr | uctions | s\ If n | nna (| enter |
| - | "NONE." | 00 (01 | | JC 11101 | occa on m | | JCC 111511 | 40110111 | <i>3</i> , | J | Citto |
| | | | T | | 1 | | (d) Contribu | itions to | | | |
| | (a) Name and address of each employee paid more than \$50,00 | 10 | (b) Title, and a | | (c) Comper | eation | employee | benefit | (e) Expe | nse acc | count, |
| , | ay realist and address of sacrificing so paid more than 400,00 | | devoted to p | osition | (6, 55 | .00.10.1 | plans and compens | | other | allowan | ces |
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| | | | | | | | | | | | |
| Total | number of other employees paid over \$50,000 \ . | | | | | | <u> </u> | . ▶ | | | |
| | | | | | | | | | | ^ DE | |

| 3 | Five highest-paid independent contractors for professional services. See instructions. If none, enter "NON | E." |
|-----|---|------------------|
| | (a) Name and address of each person paid more than \$50,000 (b) Type of service | (c) Compensation |
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| ota | number of others receiving over \$50,000 for professional services | |
| | IX-A Summary of Direct Charitable Activities | |
| | | I |
| | the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of anizations and other beneficianes served, conferences convened, research papers produced, etc. | Expenses |
| 1 | | |
| | | |
| | | |
| 2 | | |
| | | |
| | | |
| 3 | | |
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| | | |
| 4 | | |
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| ar | IX-B Summary of Program-Related Investments (see instructions) | |
| De | scribe 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 | . • | |
| | | ŀ |
| _ | | l. |

Page 7

| Part | X Minimum Investment Return (All domestic foundations must complete this part. Fore | ign found | lations, |
|--------|--|-----------|----------|
| | see instructions.) | _ | |
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., | | |
| | purposes: | | |
| а | Average monthly fair market value of securities | 1a | |
| b | Average of monthly cash balances | 1b | 2488568 |
| С | Fair market value of all other assets (see instructions) | 1c | |
| d | Total (add lines 1a, b, and c) | 1d | 2488568 |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| _ | 1c (attach detailed explanation) | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | |
| ·3 | Subtract line 2 from line 1d | 3 | 2488568 |
| 4 | Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see | | |
| _ | instructions) | 4 | 37329 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 2451239 |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 122562 |
| Part | | oundatio | ns |
| | and certain foreign organizations, check here ▶ □ and do not complete this part.) | | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 122562 |
| 2a | Tax on investment income for 2018 from Part VI, line 5 | - | |
| b | Income tax for 2018. (This does not include the tax from Part VI.) | 20 | _ |
| с 3 | Add lines 2a and 2b | 2c 3 | 0 |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 122562 |
| 5 | Add lines 3 and 4 | 5 | 0 |
| 6 | Deduction from distributable amount (see instructions) | 6 | 122562 |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, | • | 0 |
| • | line 1 | 7 | 400500 |
| Part | XII Qualifying Distributions (see instructions) | 1 | 122562 |
| 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 | 547250 |
| b | Program-related investments—total from Part IX-B | 1b | 347230 |
| 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: | | |
| а | 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 | 547250 |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. | | 2200 |
| | Enter 1% of Part I, line 27b. See instructions | 5 | |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 547250 |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating | g whethe | |
| | qualifies for the section 4940(e) reduction of tax in those years. | | 000 DE |

| Part | Vill Undistributed Income | (see instructio | ns) | | | |
|--------|--|-----------------------------|---------------------------------------|----------------------------|--------------------|--------------|
| | | | (a) Corpus | (b) Years prior to 2017 | (c) 2017 | (d) 2018 |
| 1 | Distributable amount for 2018 f | | | | | |
| 2 | line 7 | | | | | 122562 |
| a | Enter amount for 2017 only | | | | | |
| b | Total for prior years: 20 , 20 | | · · · · · · · · · · · · · · · · · · · | | | |
| 3 | Excess distributions carryover, if | | | | | |
| a | From 2013 | 2,, 10 20 10. | | | | |
| b | From 2014 | 26531 | | | | |
| С | From 2015 | 373055 | | | | |
| d | From 2016 | 463096 | | | | |
| е | From 2017 | 591456 | | | | |
| f | Total of lines 3a through e | [| 1454138 | | | |
| 4 | Qualifying distributions for 2018 | from Part XII, | | | | |
| | line 4: ► \$ 547250 | | | | | |
| a | Applied to 2017, but not more that | F | | | | - |
| b | (Election required—see instruction | ns) | | | | |
| | Treated as distributions out of correquired—see instructions) | · · · [| | | | |
| | Applied to 2018 distributable amo | | | | | 122562 |
| | Remaining amount distributed ou | · | 424688 | | | |
| 5 | Excess distributions carryover ap (If an amount appears in column amount must be shown in column | (d), the same | | | | |
| 6 | Enter the net total of each indicated below: | column as | | | | |
| а | Corpus. Add lines 3f, 4c, and 4e. S | ubtract line 5 | 1878826 | | | |
| b | Prior years' undistributed incor line 4b from line 2b | | | | | |
| С | Enter the amount of prior years' income for which a notice of dobeen issued, or on which the se tax has been previously assessed | eficiency has ction 4942(a) | | | | |
| d | Subtract line 6c from line amount—see instructions | 6b. Taxable | | | | |
| e | Undistributed income for 2017. 4a from line 2a. Taxable instructions | | | | | |
| f | Undistributed income for 2018. § 4d and 5 from line 1. This amo distributed in 2019 | unt must be | | | | |
| 7 | Amounts treated as distributions to satisfy requirements imposed 170(b)(1)(F) or 4942(g)(3) (Elect required—see instructions) | by section on may be | 0 | | | |
| 8 | Excess distributions carryover from applied on line 5 or line 7 (see instance) | | 0 | | | |
| 9 | Excess distributions carryove | er to 2019. | | | | |
| 40 | Subtract lines 7 and 8 from line 6a | • • • | 1878826 | | | |
| 10 | Analysis of line 9: Excess from 2014 | 25531 | | | | } |
| a b | Excess from 2015 | 373055 | | | | |
| C | Excess from 2016 | 463096 | | | | |
| d | Excess from 2017 | 591456 | | | | |
| | Excess from 2018 | 424688 | } | | | |

| Form 99 | 90-PF (2018) | | | | | Page 10 |
|---------|--|----------------------|---------------------|--|---------------------|----------------------|
| Part | XIV Private Operating Founda | ations (see instru | uctions and Part | t VII-A, question 9 | 9) | |
| 1a | If the foundation has received a rulin | g or determination | letter that it is a | private operating | | |
| _ | foundation, and the ruling is effective for | | | | | <u></u> |
| b | Check box to indicate whether the fou | | e operating founda | | ection |)(3) or 4942(j)(5) |
| 2a | Enter the lesser of the adjusted net income from Part I or the minimum | Tax year | | Prior 3 years | | (e) Total |
| | investment return from Part X for | (a) 2018 | (b) 2017 | (c) 2016 | (d)/2015 | |
| | each year listed | | | | / | |
| | 85% of line 2a | _ | <u> </u> | | | |
| С | Qualifying distributions from Part XII, line 4 for each year listed . | | | / | 1 | |
| d | Amounts included in line 2c not used directly | | | | | |
| _ | for active conduct of exempt activities . | | | | İ | |
| е | 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 | | |
| а | "Assets" alternative test-enter | | / | | | |
| | (1) Value of all assets . | | | | | |
| | (2) Value of assets qualifying under | | | | | |
| _ | section 4942(j)(3)(B)(i) | | | | | |
| b | of minimum investment return shown in | | | | | |
| С | Part X, line 6 for each year listed | | / | + | | |
| | (1) Total support other than gross | | | | | |
| | investment income (interest, | / | 4 | | | |
| | dividends, rents, payments on securities loans (section | | | | | |
| | 512(a)(5)), or royalties) . | | | | ŀ | |
| | (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 | | | | the foundation h | iad \$5,000 or m | iore in assets at |
| 1 | any time during the year- Information Regarding Foundation | | ns.) | | - | |
| ' a | List any managers of the foundation | _ | uted more than 2 | % of the total cont | ributions received | I by the foundation |
| _ | before the close of any tax year (but | | | | | . 5, |
| None | | | | | | |
| b | List any managers of the foundation | who own 10% o | r more of the sto | ock of a corporatio | n (or an equally la | arge portion of the |
| | ownership of a partnership or other e | entity) of which the | foundation has a | 10% or greater int | erest. | |
| None | | | | | | · |
| 2 | Information Regarding Contributio | | | | | |
| | Check here ▶ ☐ if the foundation unsolicited requests for funds. If the | | | | | |
| | complete items 2a, b, c, and d. See i | | yins, grains, etc. | , to individuals of d | rganizations unde | er other conditions, |
| а | The name, address, and telephone n | | dress of the perso | on to whom applica | ations should be a | ddressed: |
| | , | | , | | | |
| | Braithwaite, c/o Paychex, Inc , 911 Panor | | | | | |
| b | The form in which applications should | d be submitted an | d information and | I materials they sho | ould include: | |
| Audite | d financial statements, proof of 501(c)(3) |) status, current on | eratıng budget | | | |
| | Any submission deadlines: | | | _ | • | |
| None | • | | | | | |
| d | Any restrictions or limitations on a | wards, such as b | y geographical a | areas, charitable fi | elds, kinds of ins | stitutions, or other |
| | factors: | | | | | |

| Par 3 | Supplementary Information (con Grants and Contributions Paid During | tinued) | ad for Eut | ura Daymant | - Tage I |
|----------|---|---|----------------------|----------------------------------|-------------|
| | | If recipient is an individual | | ure Payment | |
| | Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of | Purpose of grant or contribution | Amount |
| | Name and address (home or business) | or substantial contributor | recipient | | |
| а | Paid during the year | | | | , |
| See a | tached. | | | | |
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| | | | · | | <u> </u> |
| | Total | <u> </u> | · · · · · · | ▶ 3a | 54700 |
| b | Approved for future payment | | , , | | |
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| | Total | | | ▶ 3b | , |

| | r gross | s amounts unless otherwise indicated. | Unrelated bu | isiness income | Excluded by secti | on 512, 513, or 514 | (e) |
|--------------------|--------------------------|---|----------------------------|----------------------|--|--|--|
| | Drogr | | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | Related or exempt function income (See instructions) |
| , | a a | am service revenue: | | | | | |
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| | g Fe | ees and contracts from government agencies | | | † | | |
| 2 | - | bership dues and assessments | | | | | |
| 3 | | st on savings and temporary cash investments | | *** | · · · · · · · · · · · · · · · · · · · | | |
| 4 | | ends and interest from securities | | | | | |
| 5 | | ental income or (loss) from real estate: | | | † | | |
| | | ebt-financed property | | | | | , |
| | | ot debt-financed property | | | | | |
| 6 | | ental income or (loss) from personal property | | | | | |
| 7 | | investment income | | | | | |
| 8 | | or (loss) from sales of assets other than inventory | | | 1 | | |
| | | ncome or (loss) from special events | | | | | |
| | | s profit or (loss) from sales of inventory | | | | | |
| | | revenue: a | | | | | |
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| | е _ | | | · | | | |
| 12 | Subto | otal. Add columns (b), (d), and (e) | | | | | |
| 12 | Total. | . Add line 12, columns (b), (d), and (e) | | | | 13 | |
| 13 | | · · · · · · · · · · · · · · · · · · · | | | | | |
| (See | works | heet in line 13 instructions to verify calculation | ıs.) | | | | |
| (See Par | works t XVI- | heet in line 13 instructions to verify calculation Relationship of Activities to the A | ıs.) .ccomplishm | ent of Exemp | ot Purposes | | |
| See Par Line | works | heet in line 13 instructions to verify calculation | ıs.) .ccomplishm | ent of Exemp | ot Purposes | | mportantly to the ctions) |
| See Par Line | works t XVI- e No. | heet in line 13 instructions to verify calculation Relationship of Activities to the A | ıs.) .ccomplishm | ent of Exemp | ot Purposes | | mportantly to the ctions) |
| See Par Line | works t XVI- e No. | heet in line 13 instructions to verify calculation Relationship of Activities to the A | ıs.) .ccomplishm | ent of Exemp | ot Purposes | | mportantly to the ctions) |
| See Par Line | works t XVI- e No. | heet in line 13 instructions to verify calculation Relationship of Activities to the A | ıs.) .ccomplishm | ent of Exemp | ot Purposes (e) of Part XVI- nds for such purpo | -A contributed i oses). (See instru | mportantly to the ctions) |
| See Par Line | works t XVI- e No. | heet in line 13 instructions to verify calculation Relationship of Activities to the A | ıs.) .ccomplishm | ent of Exemp | ot Purposes | -A contributed i oses). (See instru | mportantly to the ctions) |
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| See Par Line | works t XVI- e No. | heet in line 13 instructions to verify calculation Relationship of Activities to the A | ıs.) .ccomplishm | ent of Exemp | ot Purposes (e) of Part XVI- nds for such purpo | -A contributed i oses). (See instru | mportantly to the ctions) |
| See Par Line | works t XVI- e No. | heet in line 13 instructions to verify calculation Relationship of Activities to the A | ıs.) .ccomplishm | ent of Exemp | ot Purposes (e) of Part XVI- nds for such purpo | -A contributed i oses). (See instru | mportantly to the ctions) |
| See Par Line | works t XVI- e No. | heet in line 13 instructions to verify calculation Relationship of Activities to the A | ıs.) .ccomplishm | ent of Exemp | ot Purposes (e) of Part XVI- nds for such purpo | -A contributed i oses). (See instru | mportantly to the |
| See Par Line | works t XVI- e No. | heet in line 13 instructions to verify calculation Relationship of Activities to the A | ıs.) .ccomplishm | ent of Exemp | ot Purposes (e) of Part XVI- nds for such purpo | -A contributed i oses). (See instru | mportantly to the |
| See Par Line | works t XVI- e No. | heet in line 13 instructions to verify calculation Relationship of Activities to the A | ıs.) .ccomplishm | ent of Exemp | ot Purposes (e) of Part XVI- nds for such purpo | -A contributed i oses). (See instru | mportantly to the |
| See Par Line | works t XVI- e No. | heet in line 13 instructions to verify calculation Relationship of Activities to the A | ıs.) .ccomplishm | ent of Exemp | ot Purposes (e) of Part XVI- nds for such purpo | -A contributed i oses). (See instru | mportantly to the |
| See Par Line | works t XVI- e No. | heet in line 13 instructions to verify calculation Relationship of Activities to the A | ıs.) .ccomplishm | ent of Exemp | ot Purposes (e) of Part XVI- nds for such purpo | -A contributed i oses). (See instru | mportantly to the |
| See Par Line | works t XVI- e No. | heet in line 13 instructions to verify calculation Relationship of Activities to the A | ıs.) .ccomplishm | ent of Exemp | ot Purposes (e) of Part XVI- nds for such purpo | -A contributed i oses). (See instru | mportantly to the ctions) |
| See Par Line | works t XVI- e No. | heet in line 13 instructions to verify calculation Relationship of Activities to the A | ıs.) .ccomplishm | ent of Exemp | ot Purposes (e) of Part XVI- nds for such purpo | -A contributed i oses). (See instru | mportantly to the ctions) |
| See Par Line | works t XVI- e No. | heet in line 13 instructions to verify calculation Relationship of Activities to the A | ıs.) .ccomplishm | ent of Exemp | ot Purposes (e) of Part XVI- nds for such purpo | -A contributed i oses). (See instru | mportantly to the |
| See Par Line | works t XVI- e No. | heet in line 13 instructions to verify calculation Relationship of Activities to the A | ıs.) .ccomplishm | ent of Exemp | ot Purposes (e) of Part XVI- nds for such purpo | -A contributed i oses). (See instru | mportantly to the |
| See Par Line | works t XVI- e No. | heet in line 13 instructions to verify calculation Relationship of Activities to the A | ıs.) .ccomplishm | ent of Exemp | ot Purposes (e) of Part XVI- nds for such purpo | -A contributed i oses). (See instru | mportantly to the |
| See Par Line | works t XVI- e No. | heet in line 13 instructions to verify calculation Relationship of Activities to the A | ıs.) .ccomplishm | ent of Exemp | ot Purposes (e) of Part XVI- nds for such purpo | -A contributed i oses). (See instru | mportantly to the |
| See Par Line | works t XVI- e No. | heet in line 13 instructions to verify calculation Relationship of Activities to the A | ıs.) .ccomplishm | ent of Exemp | ot Purposes (e) of Part XVI- nds for such purpo | -A contributed i oses). (See instru | mportantly to the ctions) |
| See Par Line | works t XVI- e No. | heet in line 13 instructions to verify calculation Relationship of Activities to the A | ıs.) .ccomplishm | ent of Exemp | ot Purposes (e) of Part XVI- nds for such purpo | -A contributed i oses). (See instru | mportantly to the ctions) |
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| See Par Line | works t XVI- e No. | heet in line 13 instructions to verify calculation Relationship of Activities to the A | ıs.) .ccomplishm | ent of Exemp | ot Purposes (e) of Part XVI- nds for such purpo | -A contributed i oses). (See instru | mportantly to the ctions) |

| | • | | | | | | | | | | -3- |
|----------|----------------|----------------------------|--|-------------------------|---------------|-----------------|--------------------|-----------------|----------------|------------------|------------|
| Part | XVII | | n Regarding Tra | nsfers to and Tr | ansaction | s and R | elationship | os With N | onchari | table Exc | ∍mpt |
| | | Organization | <u>ons</u> | | | | | | | | |
| 1 | ın se orgai | ection 501(c) (onizations? | directly or indirectly other than section | 501(c)(3) organiz | ations) or | in secti | on 527, rel | | | Yes | No |
| а | | | porting foundation to | o a noncharitable e | exempt orga | anization | ot: | | | | ا |
| | (1) C | ash | · · · · · · · | · · · · · · | | | | | , | 1a(1) | |
| | . , | ther assets . | | | | | | | | 1a(2) | ~ |
| b | Othe | r transactions: | | | | | | | | | |
| | (1) S | ales of assets to | a noncharitable exe | empt organization | | | | | | 1b(1) | ~ |
| | (2) P | urchases of asse | ets from a noncharit | able exempt organ | nization . | | | | | 1b(2) | ~ |
| | (3) R | ental of facilities, | , equipment, or othe | er assets | | | | | [| 1b(3) | ~ |
| | (4) R | eimbursement ai | rrangements | | | | | | ` [| 1b(4) | ~ |
| | (5) L | oans or loan gua | rantees | | | | | | [| 1b(5) | ~ |
| | (6) P | erformance of se | ervices or members! | nip or fundraising s | solicitations | | | | | 1b(6) | ~ |
| С | | | quipment, mailing li | | | | | | | 1c | ~ |
| d | | - | of the above is "Ye | | | - | | | | the fair n | narket |
| _ | | | ther assets, or servi | | | | | | | | |
| | | - | on or sharing arrang | • | | | | | | | |
| (a) Line | | (b) Amount involved | | haritable exempt organi | | | ption of transfer | | | | |
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| | desci | ribed in section 5 | ectly or indirectly a 501(c) (other than se | ction 501(c)(3)) or | | | | | | ☐ Yes ☐ |] No |
| U | 11 16 | | following schedule | | | 1 | | (a) Danamata | | - b | |
| | | (a) Name or organ | ization | (b) Type of | organization | | | (c) Description | n or relation: | snip | |
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| o: | | | declare that I have examine aration of preparer (other th | | | | | | my knowledg | je and belief, r | t is true, |
| Sign | | | - Topado (outor an | | A L | · ·····or· prop | arci rias ary idio | cage | | S discuss this | |
| Here | | techan | e Achaet | 20 10/2/1 | | etary | | | | parer shown lons | |
| | Sign | ature of officer or trus | stee | Date / | Title | | | | 302 3.00 301 | | |
| Paid | | Print/Type preparer | 's name | Preparer's signature | | | Date | Check | , I P | TIN | |
| Prep | arer | | | | | | | | mployed | | |
| Use (| | Firm's name ▶ | | - | | | | Firm's EIN ▶ | | | |
| JJC (| Jilly | Firm's address ▶ | | | | | | Phone no | | | |

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

2018

Name of the organization **Employer Identification number** 46-5691719 Paychex Charitable Foundation, Inc. Organization type (check one): Section: Filers of: Form 990 or 990-EZ ☐ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1, Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor. during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address). II. and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990.

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Employer identification number

| Part I | Contributors (see instructions). Use duplicate copies | of Part I if additional space is | needed. |
|------------|---|----------------------------------|---|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | Paychex, Inc. 911 Panorama Trail South Rochester, NY 14625-2396 | \$ 2500000 | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person |

Employer identification number

| Part II | Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. | | | | | |
|---------------------------|---|---|------------------------|--|--|--|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received | | | |
| | | \$ | , | | | |
| (a) No. from Part i | (b) Description of noncash property given | (c) FMV (or estimate) (See Instructions.) | (d) Date received | | | |
| | | \$ | | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | . (d) Date received | | | |
| | | \$ | | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See Instructions) | (d) Date received | | | |
| | | \$ | | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received | | | |
| | | \$ | | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See Instructions.) | (d) Date received | | | |
| | | s | | | | |

Employer Identification number

| | | ations completing Pa | rt III, enter the to | r. Complete columns (a) through (e) and that of exclusively religious, charitable, etc., | | | |
|---------------------------|--|----------------------|--|--|--|--|--|
| | Use duplicate copies of Part III if ad | • | | See Instructions., | | | |
| (a) No. from | (b) Purpose of gift | (c) Use | | (d) Description of how gift is held | | | |
| Part I | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| - | | L | | | | | |
| - 1 | | (e) Trans | fer of gift | | | | |
| L | Transferee's name, address, a | and ZIP + 4 | Relat | ionship of transferor to transferee | | | |
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| ľ | | | | | | | |
| | | | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use | of gift | (d) Description of how gift is held | | | |
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| 1 | | | | | | | |
| ţ | | (a) Trans | for of aift | | | | |
| | (e) Transfer of gift | | | | | | |
| ŀ | Transferee's name, address, | and ZIP + 4 | Helat | ionship of transferor to transferee | | | |
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| į | | | | | | | |
| (a) No | | т | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use | of gift | (d) Description of how gift is held | | | |
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| i | (e) Transfer of gift | | | | | | |
| ì | Transferee's name, address, a | and ZIP + 4 | Relationship of transferor to transferee | | | | |
| ŀ | | | | | | | |
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| | | | - | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use | of gift | (d) Description of how gift is held | | | |
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| ţ | | In Trans | for of citt | | | | |
| | Transferee's name, address, a | | sfer of gift Relationship of transferor to transferee | | | | |
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or

| 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 |
|--|---|--------------------------------------|----------------------------------|----------|
| Paid during the year FY19 | | · | | |
| National MS Society of Upstate NY 1000 Elmwood Avenue Rochester, NY 14620 | None | PC | Operating Support | \$5,000 |
| CP Rochester 3399 Winton Road South Rochester, NY 14623 | None | PC | Operating Support | \$2,500 |
| American Cancer Society 250 Williams Street NW Atlanta, GA 30303 | None | PC | Operating Support | \$2,500 |
| Mary Carıola Children's Center 1000 Elmwood Ave, Ste 100 Rochester, NY 14620-3093 | None | PC | Operating Support | \$2,500 |
| Childhelp Children's Center of AZ 2120 North Central Ave., Ste 130 Phoenix, AZ 85004 | None | PC | Operating Support | \$2,500 |
| Veterans Outreach Center, Inc. 447 South Avenue Rochester, NY 14620 | None | PC | Operating Support | \$1,500 |
| YMCA of Greater Rochester 444 East Main Street Rochester, NY 14604 | None | PC | Operating Support | \$10,000 |
| Hillside Work-Scholarship Connection 1 Mustard St. 1 st FL Rochester, NY 14609 | None | PC | Operating Support | \$5,000 |
| Maplewood Family YMCA 25 Driving Park Avenue Rochester, NY 14613 | None | PC | Operating Support | \$3,500 |
| Rochester Education Foundation 250 Mill Street Rochester, NY 14614 | None | PC | Operating Support | \$3,000 |
| Pathstone 400 East Avenue Rochester, NY 14607 | None | PC | Operating Support | \$2,500 |
| Open Door Mission 156 N. Plymouth Avenue Rochester, NY 14608 | None | PC | Operating Support | \$2,500 |
| The Children's Agenda 1 South Washington Street, Ste 120 Rochester, NY 14614 | None | PC | Operating Support | \$1,500 |
| The Penfield Fire Company 1838 Penfield Road Penfield, NY 14526 | None | PC | Operating Support | \$1,500 |

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|--|---|--------------------------------------|----------------------------------|----------|
| 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 |
| Brighton Volunteer Ambulance 1551 South Winton Road Rochester, NY 14618-3909 | None | PC | Operating Support | \$1,500 |
| Saint's Place 46South Main Street Pittsford, NY 14534 | None | PC | Operating Support | \$1,000 |
| Volunteers of America 214 Lake Avenue Rochester, NY 14608 | None | PC | Operating Support | \$1,000 |
| American Foundation for Suicide Prevention PO Box 1445 Buffalo, NY 14226 | None | PC | Operating Support | \$1,000 |
| Autism Speaks 114 Blackmore Road Camillus, NY 13031 | None | PC · | Operating Support | \$1,000 |
| Epilepsy-Pralid, Inc. 2 Townline Circle Rochester, NY 14623 | None | PC | Operating Support | \$1,000 |
| Bethany House 111 Joseph Ave Rochester, NY 14621 | None | PC | Operating Support | \$1,000 |
| Arc Foundation of Monroe 2060 Brighton-Henrietta Townline Rd. Rochester, NY 14623 | None | PC | Operating Support | \$1,000 |
| Writers & Books 740 University Avenue Rochester, NY 14607 | None | PC | Operating Support | \$1,000 |
| Michael J. Fox Foundation PO Box 5014 Hagerstown, MD 21741 | None | PC | Operating Support | \$750 |
| Hire Heroes USA 1360 Union Hill Rd., Bldg. 2 Ste A Alpharetta, GA 30004 | None | PC | Operating Support (| \$10,000 |
| The GIGO Fund PO Box 96786 Washington, DC 20090 | None | PC | Operating Support | \$5,000 |
| American Foundation for Suicide Prevention 120 Wall Street, 22 nd FL New York, NY 10005 | None | PC | Operating Support | \$1,500 |
| University of Rochester Gifts & Donor Records PO Box 270032 Rochester, New York 14627-0032 | None | PC | Operating Support | \$20,000 |

| Recipient | If recipient is an individual, show any relationship to any foundation manager or | | Purpose of grant or | |
|---|---|-----------|---------------------|-----------|
| Name and address (home or business) | substantial contributor | recipient | contribution | Amount |
| Venture Jobs Foundation 1221 Pittsford Victor Road Pittsford, NY 14534 | None | PC | Operating Support | \$12,500 |
| Veterans Outreach Center, Inc. 459 South Ave Rochester, New York 14620 | None | PC | Operating Support | \$3,000 |
| Cameron Community Ministries 48 Cameron Street Rochester, New York 14606 | None | PC | Operating Support | \$3,000 |
| Dimitri House Inc 102 N. Union St. Rochester, New York 14607 | None | PC | Operating Support | \$2,500 |
| Lifetime Assistance Foundation, Inc. 425 Paul Road Rochester, New York 14624 | None | PC | Operating Support | \$2,500 |
| Starbridge 1650 South Avenue, Suite 200 Rochester, New York 14620 | None . | PC | Operating Support | \$2,500 |
| Children Awaiting Parents 274 N. Goodman St., Suite D-103 Rochester, New York 14607 | None | PC | Operating Support | \$2,000 |
| Heritage Christian Services 275 Kenneth Drive, Suite 100 Rochester, New York 14623 | None | PC | Operating Support | , \$2,000 |
| CDS Wolf Foundation 860 Hard Road Webster, New York 14580 | None | PC | Operating Support | \$2,000 |
| RESOLVE of Greater Rochester PO Box 21 Fairport, New York 14450 | None | PC | Operating Support | \$2,000 |
| Goodwill of the Finger Lakes 422 S. Clinton Avenue Rochester, New York 14620 | None | PC | Operating Support | ÷ \$1,000 |
| Samaritan Center of Excellence 232 South Plymouth Ave Rochester, New York 14608 | None | PC | Operating Support | · \$1,000 |
| Bivona Child Advocacy Center 1 Mt. Hope Avenue Rochester, New York 12620 | None | PC | Operating Support | \$1,000 |
| Operation Food Basket 41 Rolling Meadows Way Penfield, NY 14526 | None | PC | Operating Support | \$1,000 |

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|---|---|--------------------------------|----------------------------------|-----------|
| 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 |
| Genesee Country Village & Museum PO Box 310 1410 Flint Hill Road Mumford, NY 14511-0310 | None | PC | Operating Support | \$1,000 |
| Rochester Philharmonic Orchestra 106 East Avenue Rochester, New York 14604 | None | PC | Operating Support | \$1,000 |
| Artist Unlimited PO Box 26766 Rochester, New York 14626 | None | PC | Operating Support | \$500 |
| CURE Childhood Cancer 200 Westfall Road Rochester, New York 14620 | None | PC | Operating Support | \$4,500 |
| Table to Table PO Box 1051 Englewood Cliffs, NJ 07632 | None | PC | Operating Support | \$2,500 |
| 6 th Street Shelter 219 N 6 th Street Allentown, PA 18102 | None | PC | Operating Support | \$2,500 |
| Mental Health Association of Rochester 320 N. Goodman Street Rochester, New York 14607 | None | PC | Operating Support | \$1,000 |
| Happiness House 731 Pre Emption Road Geneva, NY 14456 | None | PC | Operating Support | \$1,000 |
| House of Mercy 285 Ormond Street Rochester, New York 14605 | None | PC | Operating Support | \$1,000 |
| Rochester Industries Educational Fund, Inc. 150 State Street Rochester, New York 14614 | None | PC ' | Operating Support | \$100,000 |
| Nazareth College Office of Development 4245 East Avenue Rochester, New York 14618-9922 | None | PC | Operating Support | \$30,000 |
| Center for Governmental Research 1 South Washington Street, Suite 400 Rochester, New York 14614 | None | PC | Operating Support | \$5,000 |
| The Community Place of Greater Rochester 57 Central Park Rochester, New York 14605 | None | PC | Operating Support | \$2,500 |
| Causewave Community Partners 274 N. Goodman Street, Suite B269 Rochester, New York 14607 | None , | PC | Operating Support | \$2,500 |

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|--|---|----------------------|---------------------|--------------|
| Recipient | If recipient is an individual, show any relationship to any foundation manager or | Foundation status of | Purpose of grant or | |
| Name and address (home or business) | substantial contributor | recipient | contribution | Amount |
| The state of the s | Substantial contributor | recipient | Contribution | Amount |
| Boys and Girls Club of Rochester 500 Genesee Street | None | PC | Operating Support | \$2,500 |
| Rochester, New York 14611 | | | - <u> </u> | |
| Volunteers of America 214 Lake Avenue | None | PC | Operating Support | \$1,750 |
| Rochester, New York 14608 | | | | <u> </u> |
| Association for the Encouragement of Children's | | | | · |
| Creativity | None | PC | Operating Support | \$1,000 |
| PO Box 687 | | ` | operating support | 1 72,000 |
| Webster, New York 14580 | | | 1 | |
| Webster, New York 14380 | ·· | - | | |
| Baby Cafe Class Cooking | Nana | nc. | | 64 000 |
| Baby Safe Sleep Coalition | None | PC | Operating Support | \$1,000 |
| 441 East Avenue | | | | |
| Rochester, New York 14607 | | | | |
| l | 1 | | | 4 |
| Urban League of Rochester N.Y., Inc. | None | PC | Operating Support | \$1,000 |
| 265 North Clinton Avenue | | | | |
| Rochester, New York 14605-1857 | | | | |
| | | | |] |
| George Eastman Museum | None | PC | Operating Support | \$1,000 |
| 900 East Avenue | | | | |
| Rochester, New York 14607-2298 | | | | |
| | 1 | | | |
| Rochester City Ballet | None | PC | Operating Support | \$1,000 |
| 1326 University Avenue | | | | |
| Rochester, New York 14607-1622 | · · | | | |
| | | | | |
| Rochester Police Foundation, Inc. | None | PC | Operating Support | \$1,000 |
| 115 Liberty Pole Way | | | | |
| Rochester, New York 14604 | | | | |
| | | | | |
| Blackfriars Theatre | None | PC | Operating Support | \$1,000 |
| 795 E. Main Street | | | | |
| Rochester, New York 14605 | | | | |
| | | | | |
| Big Brothers Big Sisters of Greater Rochester | None | PC | Operating Support | \$1,000 |
| 37 South Washington Street | | | | |
| Rochester, New York 14608 | | | | |
| , | | | | |
| Boys and Girls Club | None | PC | Operating Support | \$2,500 |
| 500 Genesee Street | | | | |
| Rochester, New York 14611 | | | | |
| | | | 1 | |
| Center for Youth | None | PC | Operating Support | \$2,500 |
| 905 Monroe Avenue | | | | , |
| Rochester, New York 14620 | | | | |
| <u></u> | - | | | \vdash |
| The Salvation Army | None | PC | Operating Support | \$2,500 |
| 70 Liberty Pole Way | | . • | pperating support | 72,300 |
| PO Box 41210 | | | Ì | |
| Rochester, NY 14604 | | | | |
| Modification 141 14004 | | | ···- | \vdash |
| Willow Domestic Violence Center | None | PC | Operating Support | \$500 |
| PO Box 39601 | inone | F C | Operating Support | الالاج |
| | | | | |
| Rochester, New York 14604 | | L | <u> </u> | L |

| Recipient Name and address (home or business) Foodlink 1999 Mt. Read Blvd | If recipient is an individual, show any relationship to any foundation manager or substantial contributor None | Foundation status of recipient | Purpose of grant or contribution Operating Support | Amount \$500 |
|---|---|--------------------------------|---|-----------------|
| Rochester, New York 14615 United Way of Greater Rochester 75 College Ave Rochester, NY 14607 | None | PC • | Operating Support | \$160,000 |
| United Way of Greater Toledo 424 Jackson Street Toledo, OH 43604 | None | PC | Operating Support | \$5,000 |
| United Way of Greater Twin Cities 404 South Eighth Street Minneapolis, MN 55404-1084 | None | PC | Operating Support | \$5,000 |
| United Way of Metro Chicago 333 South Wabash Avenue, 30th Floor Chicago, IL 60604 | None | PC | Operating Support | \$5,000 |
| United Way of Salt Lake 257 East 200 Street, Suite 300 Salt Lake, UT 84111 | None | PC | Operating Support | \$5,000 |
| Camp Good Days & Special Times 1332 Pittsford-Mendon Rd Mendon, NY 14506 | None | PC | Operating Support | \$5,000 |
| Seneca park Zoo Society 2222 St. Paul Bivd Rochester, NY 14621 | None | PC | Operating Support | \$2,500 |
| Literacy Volunteers of Rochester, Inc 1600 South Ave., Ste 100 Rochester, New York 14620 | None | PC | Operating Support | \$2,500 |
| The Friendly Home 3156 East Ave Rochester, New York 14618 | None | PC | Operating Support | \$2,500 |
| Rochester Rehabilitation Center, Inc. 1000 Elmwood Ave., Ste 600 New York, New York 14620 | None | PC | Operating Support | \$2,500 |
| The Strong One Manhattan Square Rochester, New York 14607 | None | PC | Operating Support | \$2,500 |
| Quad A for Kids 500 East Ave Rochester, NY 14607 | None | PC | Operating Support | \$2,000 |
| The Nature Conservancy 274 Goodman St. North, Ste B261 Rochester, New York 14607 | None | PC | Operating Support | \$1,500 |

| 1 ' | If recipient is an individual, show any | Foundation | | |
|---|---|------------|---------------------|---------|
| Recipient | relationship to any foundation manager or | status of | Purpose of grant or | |
| Name and address (home or business) | substantial contributor | recipient | contribution | Amount |
| The Hochstein School 50 N Plymouth Ave Rochester, New York 14614 | None | PC | Operating Support | \$1,000 |
| Rochester Institute of Technology 116 Lomb Memorial Drive Rochester, New York 14623 | None | РС | Operating Support | \$1,000 |
| Spiritus Christi Prison Outreach 934 Culver Road Rochester, New York 14609 | None | PC | Operating Support | \$1,000 |
| Healthy Baby Network 693 East Ave., Suite 200 Rochester, New York 14607 | None | PC | Operating Support | \$1,000 |
| Rochester Broadway Theatre League 885 East Main Street Rochester, New York 14605 | None | PC | Operating Support | \$1,000 |
| Scott Spino Foundation 42 Kimbrook Drive Rochester, New York 14612 | None | PC | Operating Support | \$1,000 |
| Teen Empowerment 392 Genesee Street Rochester, New York 14611 | None | PC | Operating Support | \$1,000 |
| Rochester St, Martin Boxing Club, Inc. 17 Crawford Street Rochester, New York 14620 | None | PC | Operating Support | \$1,000 |
| Catholic Charities Community Services 1099 Jay Street, Bldg. J Rochester, NY 14611 | None . | PC | Operating Support | \$1,000 |
| Volunteers of America 214 Lake Ave Rochester, New York 14608 | None | PC | Operating Support | \$1,000 |
| UR Medicine Home Care Foundation 2180 Empire Blvd. Webster, New York 14580 | None | PC | Operating Support | \$1,000 |
| YWCA of Rochester & Monroe County 175 North Clinton Ave. Rochester, New York 14604 | None | PC | Operating Support | \$1,000 |
| Mercy Bridges 1437 Blossom Road Rochester, New York 14610 | None | PC | Operating Support | \$1,000 |
| Penfield Public Library 1985 Baird Road Penfield, New York 14526 | None | PC | Operating Support | \$1,000 |

| 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 |
|--|---|--------------------------------|----------------------------------|----------|
| Geva Theatre Center 75 Woodbury Boulevard Rochester, New York 14607 | None | PC | Operating Support | \$1,000 |
| Downstairs Cabaret Theatre 20 Windsor Street Rochester, New York 14605 | None | PC | Operating Support | \$1,000 |
| American Diabetes Association 1160 Allens Creek Road Rochester, NY 14618 | None | PC | Operating Support | \$5,000 |
| American Heart Association 25 Circle Street Suite 102 Rochester, NY 14607 | None | PC | Operating Support | \$15,000 |
| The Gathering Place 23300 Commerce Park Beachwood, OH 44122 | None | PC | Operating Support | \$2,500 |
| Open Door 3910 Rahn Road Eagan, MN 55122 | None | PC | Operating Support | \$1,000 |

Total \$547,000.00