



Form **990-PF**

Return of Private Foundation
Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

For calendar year 2019 or tax year beginning January 1, 2019, and ending December 31, 2019

Name of foundation: **The NYCM Foundation**

Number and street (or P O box number if mail is not delivered to street address): **1899 Central Plaza East**

Room/suite: _____

City or town, state or province, country, and ZIP or foreign postal code: **Edmeston, NY 13335**

A Employer identification number
46-1183132

B Telephone number (see instructions)
(607) 965-2578

C If exemption application is pending, check here

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

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

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

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

H Check type of organization Section 501(c)(3) exempt private foundation **04**
 Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 31,218 **J Accounting method.** Cash Accrual
 Other (specify) _____
(Part I, column (d), must be on cash basis)

3/4

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	317,031			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	17	17		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	317,048	17			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	1,590	1,590		
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)				
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	115	115		
	24 Total operating and administrative expenses. Add lines 13 through 23	1,705	1,705		
	25 Contributions, gifts, grants paid	355,058			355,058
26 Total expenses and disbursements. Add lines 24 and 25	356,763	1,705		355,058	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	(39,715)				
b Net investment income (if negative, enter -0-)					
c Adjusted net income (if negative, enter -0-)					

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Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	70,933	31,218	31,218
	3 Accounts receivable ▶			
	Less allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶			
	Less allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶			
Less accumulated depreciation (attach schedule) ▶				
12 Investments—mortgage loans				
13 Investments—other (attach schedule)				
14 Land, buildings, and equipment basis ▶				
Less accumulated depreciation (attach schedule) ▶				
15 Other assets (describe ▶)				
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item i)	70,933	31,218	31,218	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶)			
23 Total liabilities (add lines 17 through 22)				
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 24, 25, 29, and 30.			
	24 Net assets without donor restrictions	70,933	31,218	
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg, and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
29 Total net assets or fund balances (see instructions)	70,933	31,218		
30 Total liabilities and net assets/fund balances (see instructions)	70,933	31,218		

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	70,933
2	Enter amount from Part I, line 27a	2	(39,715)
3	Other increases not included in line 2 (itemize) ▶	3	0
4	Add lines 1, 2, and 3	4	31,218
5	Decreases not included in line 2 (itemize) ▶	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29	6	31,218

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a				
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		
a				
b				
c				
d				
e				
2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6). If gain, also enter in Part I, line 8, column (c) See instructions Part I, line 8	{ If (loss), enter -0- in }		3	

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

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

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

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2018			
2017			
2016			
2015			
2014			

2 Total of line 1, column (d)	2	
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years	3	
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	
5 Multiply line 4 by line 3	5	
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	
7 Add lines 5 and 6	7	
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions	8	

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

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary – see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	2	
3	Add lines 1 and 2	3	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	
b	Exempt foreign organizations – tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments Add lines 6a through 6d	7	
8	Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
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 2020 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		✓
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		✓
c Did the foundation file Form 1120-POL for this year?		✓
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ _____ (2) On foundation managers ▶ \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		✓
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		✓
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		✓
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i>		✓
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	✓	
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	✓	
8a Enter the states to which the foundation reports or with which it is registered See instructions ▶ NEW YORK		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation	✓	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Yes," complete Part XIV		✓ 2
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		✓

Part 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 the meaning of section 512(b)(13)? If "Yes," attach schedule See instructions		✓
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement See instructions		✓
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► Not applicable	✓	
14	The books are in care of ► John E. Holdorf Telephone no. ► (607) 965-2578 Located at ► 1899 Central Plaza East, Edmeston NY ZIP+4 ► 13335		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here and enter the amount of tax-exempt interest received or accrued during the year ► 15		<input type="checkbox"/>
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of the foreign country ►		✓

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		Yes	No
1a	During the year, did the foundation (either directly or indirectly)		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here ► <input type="checkbox"/>	1b	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?	1c	✓
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20____, 20____, 20____, 20____		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions)	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► 20____, 20____, 20____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019)	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	✓
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	✓

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

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

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

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Attached Schedule				

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

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

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

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

3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."

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

Total number of others receiving over \$50,000 for professional services ▶

Part IX-A Summary of Direct Charitable Activities

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

	Expenses
1	
.....	
2	
.....	
3	
.....	
4	
.....	

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

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

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

Total. Add lines 1 through 3 ▶

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	163,906
c	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	163,906
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	163,906
4	Cash deemed held for charitable activities Enter 1½% of line 3 (for greater amount, see instructions)	4	2,459
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	161,447
6	Minimum investment return. Enter 5% of line 5	6	8,072

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

1	Minimum investment return from Part X, line 6	1	8,072
2a	Tax on investment income for 2019 from Part VI, line 5	2a	
b	Income tax for 2019 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	8,072
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	8,072
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	8,072

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1a	355,058
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	355,058
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	355,058

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				8,072
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only				
b Total for prior years 20 <u>17</u> , 20 <u>16</u> , 20 <u>15</u>				
3 Excess distributions carryover, if any, to 2019.				
a From 2014	192,921			
b From 2015	285,779			
c From 2016	318,405			
d From 2017	244,952			
e From 2018	330,342			
f Total of lines 3a through e	1,372,399			
4 Qualifying distributions for 2019 from Part XII, line 4 ▶ \$ <u>355,058</u>				
a Applied to 2018, 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)				
d Applied to 2019 distributable amount				8,072
e Remaining amount distributed out of corpus	348,691			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,721,090			
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount—see instructions				
e Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1 This amount must be distributed in 2020				
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 2014 not applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	1,721,090			
10 Analysis of line 9				
a Excess from 2015	285,779			
b Excess from 2016	318,405			
c Excess from 2017	244,952			
d Excess from 2018	330,342			
e Excess from 2019	348,691			

Part XV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i> Various - see attached schedule	No	Various	Various	355,058
Total				3a 355,058
b <i>Approved for future payment</i>				
Total				3b

Schedule B

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

Schedule of Contributors

OMB No 1545-0047

2019

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization
The NYCM Foundation

Employer identification number
46-1183132

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

Form 990-PF

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

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

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

Special Rules

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

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

Name of organization The NYCM Foundation	Employer identification number 46-1183132
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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
-----	New York Central Mutual Fire Insurance Company ----- 1899 Central Plaza East ----- Edmeston, NY 13335 -----	\$ ----- 301,460	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
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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
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----

Name of organization	Employer identification number
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Part III **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ _____

Use duplicate copies of Part III if additional space is needed.

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

The NYCM Foundation
FEIN # 46-1183132

2019 Federal Income Tax Return
Form 990-PF - Supporting Schedule

Page 1 - Part I - Line 1 - Contributions larger than \$5,000 (See Schedule B attached)

	Contributions Received
New York Central Mutual Fire Insurance Company	\$301,460
Other various cash donations received from individuals - none greater than \$5,000	\$15,571
Total Cash Contributed in 2019	\$317,031

Page 1 - Part I - Line 16b - Accounting Fees

Expense Amount
2018 Accounting Review
1,590
1,590

Page 1 - Part I - Line 23 - Other Expenses

Expense Amount
CHAR500 Tax Filing Fee
75
Bank Service Charge
40
115

Page 6 - Part VIII - Line 1 - Officers and Directors information

Name	Address	Title	Hours / week	Compensation	Contributions	Expenses
VanNess D Robinson	1899 Central Plaza East, Edmeston, NY 13335	Director & Secretary	0.25	0	0	0
V Daniel Robinson, II	1899 Central Plaza East, Edmeston, NY 13335	Director & President	0.25	0	0	0
Albert Pylinski, Jr	1899 Central Plaza East, Edmeston, NY 13335	Director & Treasurer	0.25	0	0	0
John E Holdorf	1899 Central Plaza East, Edmeston, NY 13335	Director	0.50	0	0	0
Jeremy J Robinson	1899 Central Plaza East, Edmeston, NY 13335	Director	0.50	0	0	0
Mike A Permo	1899 Central Plaza East, Edmeston, NY 13335	Director	0.25	0	0	0
Cheryl L Robinson	1899 Central Plaza East, Edmeston, NY 13335	Director & Vice President	0.25	0	0	0

There are no other Officers, Directors or employees

The NYCM Foundation
FEIN #46-1183132

2019 Federal Income Tax Return
Form 990-PF - Supporting Schedule

Page 11 - Part XV - Line 3a - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
4-H EARN-AN-ANIMAL CORNELL	No	CHAR	Donation	100 00
ABOVE & BEYOND ENGLISH SETTER RESCUE	No	CHAR	Donation	100 00
ALZHEIMER'S ASSOCIATION	No	CHAR	Donation	15,134 57
AMERICAN CANCER SOCIETY	No	CHAR	Donation	12,473 86
AMERICAN DIABETES ASSOCIATION	No	CHAR	Donation	5,000 00
AMERICAN HEART ASSOCIATION	No	CHAR	Donation	41,829 87
AMERICAN RED CROSS	No	CHAR	Donation	10,000 00
ANGEL NETWORK OF COOPERSTOWN	No	CHAR	Donation	100 00
BEGIN AGAIN TRANSITION SERVICES	No	CHAR	Donation	100 00
BOY SCOUTS OF AMERICA	No	CHAR	Donation	5,250 00
BRIDGEWATER FIRE COMPANY	No	CHAR	Donation	200 00
BROOKS HOUSE OF BAR-B-QUE	No	CHAR	Donation	1,667 25
BURLINGTON FLATS FISH & CANY FOOD DONATION PROGRAM	No	CHAR	Donation	1,000 00
CATHOLIC CHARITIES	No	CHAR	Donation	200 00
CATSKILL AREA HOSPICE	No	CHAR	Donation	500 00
CENTRAL VALLEY SCHOOL DISTRICT	No	CHAR	Donation	11,000 00
CHARITY FOR CHILDREN	No	CHAR	Donation	100 00
CHASE MEMORIAL NURSING HOME	No	CHAR	Donation	500 00
CHENANGO ARTS COUNCIL	No	CHAR	Donation	100 00
CHENANGO COUNTY LAW	No	CHAR	Donation	100 00
CHENANGO MEMORIAL HOSPITAL	No	CHAR	Donation	500 00
CHENANGO MEMORIAL HOSPITAL AUX	No	CHAR	Donation	21,000 00
COLUMBUS COMMUNITY CHURCH	No	CHAR	Donation	1,000 00
COOPERSTOWN FOUNDATION FOR DAKIN FUNERAL HOME	No	CHAR	Donation	100 00
ECS AWARDS COMMITTEE	No	CHAR	Donation	250 00
ECS PARP COMMITTEE	No	CHAR	Donation	250 00
EDMESTON MEMORIAL FUND	No	CHAR	Donation	500 00
EDMESTON CENTRAL SCHOOL SADD	No	CHAR	Donation	300 00
EDMESTON EDUCATION FOUNDATION INC	No	CHAR	Donation	500 00
EDMESTON EMERGENCY SQUAD	No	CHAR	Donation	200 00
EDMESTON FREE LIBRARY	No	CHAR	Donation	3,000 00
			Donation	100 00
			Donation	27,000 00

EDMESTON ROTARY CLUB	No	CHAR	Donation	500.00
EDMESTON VOL FIRE DEPT	No	CHAR	Donation	10,000.00
EVERGREEN CEMETERY ASSOCIATION	No	CHAR	Donation	200.00
FEDERATED CHURCH	No	CHAR	Donation	100.00
FENIMORE ART MUSEUM	No	CHAR	Donation	10,000.00
FIRST NIGHT ONEONTA	No	CHAR	Donation	200.00
FIRST UNITED METHODIST CHURCH	No	CHAR	Donation	100.00
FLY CREEK FIRE COMPANY	No	CHAR	Donation	100.00
FOOD BANK OF WESTERN NY	No	CHAR	Donation	90.00
FRIENDS OF BASSETT HEALTHCARE NETWORK	No	CHAR	Donation	37,500.00
FUND FOR WOMEN OF THE SOUTHERN TIER INC	No	CHAR	Donation	1,000.00
GARRATTSVILLE EMERGENCY SQUAD	No	CHAR	Donation	1,000.00
GILBERTSVILLE - MOUNT UPTON CENTRAL SCHOOL SADD	No	CHAR	Donation	150.00
GUERNSEY MEMORIAL LIBRARY	No	CHAR	Donation	200.00
H O R S E OF CONNECTICUT INC	No	CHAR	Donation	100.00
HABITAT FOR HUMANITY	No	CHAR	Donation	100.00
HARTWICK EMERGENCY SQUAD	No	CHAR	Donation	250.00
HERKIMER COUNTY HUMANE SOCIETY	No	CHAR	Donation	100.00
HERO FUND AMERICA	No	CHAR	Donation	300.00
HONOR FLIGHT SYRACUSE, INC	No	CHAR	Donation	104.00
HOSPICE & PALLIATIVE CARE OF CHENANGO COUNTY	No	CHAR	Donation	450.00
KELBERMAN CENTER INC	No	CHAR	Donation	1,000.00
LEUKEMIA AND LYMPHOMA SOCIETY	No	CHAR	Donation	200.00
LITTLE DELAWARE YOUTH ENSEMBLE	No	CHAR	Donation	100.00
MARY LOU PUSTAY	No	CHAR	Donation	50.00
MASON'S MISSION FOUNDATION	No	CHAR	Donation	1,000.00
MATRIX ENTERTAINMENT	No	CHAR	Donation	200.00
MORRIS CENTRAL SCHOOL	No	CHAR	Donation	100.00
MORRIS TROOP 3	No	CHAR	Donation	50.00
MT MARKHAM SADD	No	CHAR	Donation	200.00
NATIONAL MS SOCIETY	No	CHAR	Donation	5,100.00
NCMEC-NY/MOHAWK VALLEY	No	CHAR	Donation	3,000.00
NEW BERLIN VOLUNTEER FIRE DEPARTMENT	No	CHAR	Donation	100.00
NYCM HELPING HANDS	No	CHAR	Donation	2,754.00
NORTH BROOKFIELD VOLUNTEER FIRE DEPARTMENT	No	CHAR	Donation	100.00
NORTHEAST KIDNEY FOUNDATION	No	CHAR	Donation	100.00
NORWICH FAMILY YMCA	No	CHAR	Donation	76.00
OLMSTED CENTER FOR SIGHT	No	CHAR	Donation	200.00
ONEONTA COMMUNITY HEALTH CENTER	No	CHAR	Donation	1,500.00
OTSEGO COUNTY CONSERVATION ASSOCIATION	No	CHAR	Donation	5,000.00
PARKINSON'S FOUNDATION	No	CHAR	Donation	200.00
PATHFINDER VILLAGE FOUNDATION	No	CHAR	Donation	100.00
PIT RUN 2019	No	CHAR	Donation	10,046.00
PITTSFIELD EMERGENCY SQUAD	No	CHAR	Donation	7,500.00
PLYMOUTH VOLUNTEER FIRE	No	CHAR	Donation	1,000.00
RACHEL MURRAY	No	CHAR	Donation	100.00
RICHFIELD SPRINGS CENTRAL SCHOOL	No	CHAR	Donation	250.00
	No	CHAR	Donation	150.00

RONALD MCDONALD HOUSE	No	CHAR	Donation	250 00
SECOND BAPTIST CHURCH	No	CHAR	Donation	2,000 00
SERVICE CLUB	No	CHAR	Donation	100 00
SHERBURNE-EARLVILLE SCHOOL	No	CHAR	Donation	10,200 00
SITRIN FOUNDATION	No	CHAR	Donation	1,500 00
SMITHY ARTS	No	CHAR	Donation	2,500 00
SOROPTIMIST INTERNATIONAL OF THE ADIRONDACKS (SIA)	No	CHAR	Donation	200 00
SPECIAL OLYMPICS OF NEW YORK	No	CHAR	Donation	100 00
SPRINGBROOK	No	CHAR	Donation	20,000 00
SPRINGFIELD CENTER FIRE DEPT	No	CHAR	Donation	100 00
STAR LEGACY FOUNDATION	No	CHAR	Donation	342 00
SUSQUEHANNA ANIMAL SHELTER	No	CHAR	Donation	5,000 00
TEAM NEW CHAPTERS	No	CHAR	Donation	590 00
THE FAMILY SERVICE ASSOCIATION	No	CHAR	Donation	200 00
THE KEYS PROGRAM	No	CHAR	Donation	250 00
TRI-TOWN YOUTH COMMISSION	No	CHAR	Donation	2,000 00
TROOP 9	No	CHAR	Donation	250 00
UNADILLA VALLEY CENTRAL SCHOOL	No	CHAR	Donation	200 00
UNITED METHODIST CHURCH	No	CHAR	Donation	2,000 00
UVCSF	No	CHAR	Donation	250 00
WEST KORTRIGHT CENTRE	No	CHAR	Donation	500 00
ALBANY COLLEGE OF PHARMACY	No	I-Paid College on behalf of student awarded	Educational Scholarship	500 00
AUSTIN PEAY STATE UNIVERSITY	No	I-Paid College on behalf of student awarded	Educational Scholarship	1,000 00
BINGHAMTON UNIVERSITY	No	I-Paid College on behalf of student awarded	Educational Scholarship	2,750 00
CANISIUS COLLEGE	No	I-Paid College on behalf of student awarded	Educational Scholarship	250 00
CAZENOVIA COLLEGE	No	I-Paid College on behalf of student awarded	Educational Scholarship	1,500 00
CLARKSON UNIVERSITY	No	I-Paid College on behalf of student awarded	Educational Scholarship	2,500 00
COKER COLLEGE	No	I-Paid College on behalf of student awarded	Educational Scholarship	500 00
CONISIUS COLLEGE	No	I-Paid College on behalf of student awarded	Educational Scholarship	500 00
CORNELL UNIVERSITY	No	I-Paid College on behalf of student awarded	Educational Scholarship	2,000 00
ELMIRA COLLEGE	No	I-Paid College on behalf of student awarded	Educational Scholarship	250 00
GRAND CANYON UNIVERSITY	No	I-Paid College on behalf of student awarded	Educational Scholarship	250 00
HARTWICK COLLEGE	No	I-Paid College on behalf of student awarded	Educational Scholarship	1,250 00
HERKIMER COUNTY	No	I-Paid College on behalf of student awarded	Educational Scholarship	250 00
HIGH POINT UNIVERSITY	No	I-Paid College on behalf of student awarded	Educational Scholarship	1,000 00
HOUGHTON COLLEGE	No	I-Paid College on behalf of student awarded	Educational Scholarship	1,000 00
KINGS COLLEGE	No	I-Paid College on behalf of student awarded	Educational Scholarship	250 00
LEMOYNE COLLEGE	No	I-Paid College on behalf of student awarded	Educational Scholarship	1,000 00
MARIST COLLEGE	No	I-Paid College on behalf of student awarded	Educational Scholarship	500 00
MASSACHUSETTS INSTITUTE OF TECHNOLOGY	No	I-Paid College on behalf of student awarded	Educational Scholarship	1,000 00
MOHAWK VALLEY COMMUNITY	No	I-Paid College on behalf of student awarded	Educational Scholarship	1,000 00
PURCHASE COLLEGE	No	I-Paid College on behalf of student awarded	Educational Scholarship	500 00
RUSSELL SAGE COLLEGE	No	I-Paid College on behalf of student awarded	Educational Scholarship	2,000 00
ST JOSEPH'S COLLEGE	No	I-Paid College on behalf of student awarded	Educational Scholarship	250 00
ST LAWRENCE UNIVERSITY	No	I-Paid College on behalf of student awarded	Educational Scholarship	250 00
SUNY DELHI	No	I-Paid College on behalf of student awarded	Educational Scholarship	750 00
SUNY AT CANTON	No	I-Paid College on behalf of student awarded	Educational Scholarship	250 00

SUNY AT COBLESKILL	No	I-Paid College on behalf of student awarded	Educational Scholarship	500 00
SUNY BROOME	No	I-Paid College on behalf of student awarded	Educational Scholarship	1,250 00
SUNY COLLEGE AT BROCKPORT	No	I-Paid College on behalf of student awarded	Educational Scholarship	250 00
SUNY COLLEGE AT BUFFALO	No	I-Paid College on behalf of student awarded	Educational Scholarship	1,250 00
SUNY COLLEGE AT CORTLAND	No	I-Paid College on behalf of student awarded	Educational Scholarship	2,000 00
SUNY COLLEGE AT FREDONIA	No	I-Paid College on behalf of student awarded	Educational Scholarship	750 00
SUNY COLLEGE AT MORRISVILLE	No	I-Paid College on behalf of student awarded	Educational Scholarship	3,000 00
SUNY COLLEGE AT ONEONTA	No	I-Paid College on behalf of student awarded	Educational Scholarship	2,750 00
SUNY COLLEGE AT OSWEGO	No	I-Paid College on behalf of student awarded	Educational Scholarship	1,000 00
SUNY COLLEGE AT PLATTSBURGH	No	I-Paid College on behalf of student awarded	Educational Scholarship	500 00
SUNY COLLEGE OF ENVIRONMENTAL	No	I-Paid College on behalf of student awarded	Educational Scholarship	1,000 00
SUNY EMPIRE STATE COLLEGE	No	I-Paid College on behalf of student awarded	Educational Scholarship	250 00
SUNY GENESEO	No	I-Paid College on behalf of student awarded	Educational Scholarship	250 00
SUNY NEW PALTZ	No	I-Paid College on behalf of student awarded	Educational Scholarship	500 00
SUNY POTSDAM	No	I-Paid College on behalf of student awarded	Educational Scholarship	250 00
SYRACUSE UNIVERSITY	No	I-Paid College on behalf of student awarded	Educational Scholarship	500 00
THE UNIVERSITY OF RICHMOND	No	I-Paid College on behalf of student awarded	Educational Scholarship	1,000 00
UNIVERSITY AT ALBANY	No	I-Paid College on behalf of student awarded	Educational Scholarship	250 00
UNIVERSITY OF NEW HAVEN	No	I-Paid College on behalf of student awarded	Educational Scholarship	500 00
UNIVERSITY OF PITTSBURGH	No	I-Paid College on behalf of student awarded	Educational Scholarship	500 00
UTICA COLLEGE	No	I-Paid College on behalf of student awarded	Educational Scholarship	1,750 00
WORCESTER POLYTECHNIC	No	I-Paid College on behalf of student awarded	Educational Scholarship	500 00

355,057.55