

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

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

OMB No. 1545-0047

2025Open to Public
Inspection**A For the 2025 calendar year, or tax year beginning and ending****B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization**THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION, INC.**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

2 TOWER PLACE, EXECUTIVE PARK

Room/suite

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

ALBANY, NY 12203**F** Name and address of principal officer: **JOHN EBERLE****SAME AS C ABOVE****D** Employer identification number**14-1505623****E** Telephone number**518-446-9638****G** Gross receipts \$**64,775,774.****H(a)** Is this a group returnfor subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. See instructions

H(c) Group exemption number**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: **WWW.CFGCR.ORG****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other**L** Year of formation: **1968****M** State of legal domicile: **NY****Part I Summary**

Activities & Governance	1	Briefly describe the organization's mission or most significant activities:	SEE SCHEDULE O	
	2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	18
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	18
	5	Total number of individuals employed in calendar year 2025 (Part V, line 2a)	5	10
	6	Total number of volunteers (estimate if necessary)	6	50
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	-31,967.
7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	4,876,980.	27,275,110.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	149,179.	136,404.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	6,345,167.	6,520,561.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-16,336.	-14,556.
	12		11,354,990.	33,917,519.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	6,523,651.	9,686,855.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	1,115,526.	1,091,280.
	b	Total fundraising expenses (Part IX, column (D), line 25)	0.	0.
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	192,445.	
	17		1,067,632.	1,002,633.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	8,706,809.	11,780,768.	
19	Revenue less expenses. Subtract line 18 from line 12	2,648,181.	22,136,751.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	119,822,415.	153,802,702.
	22	Net assets or fund balances. Subtract line 21 from line 20	5,308,092.	5,997,947.
22		114,514,323.	147,804,755.	

Part II Signature Block

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

Sign Here	Signature of officer	Date		
	JOHN EBERLE, PRESIDENT & CEO			
Paid	Preparer's name	Preparer's signature	Date	Check if self-employed ☐ PTIN
	NICHOLAS MURABITO	NICHOLAS MURABITO	09/25/26	P02354743
Preparer Use Only	Firm's name	Firm's EIN		
	BST GALLAGHER FLYNN LLP	14-1442607		
	Firm's address	Phone no. (518) 459-6700		
	10 BRITISH AMERICAN BLVD			
	LATHAM, NY 12110			

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

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Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III ☒ **X**

1 Briefly describe the organization's mission:

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 10,319,034. including grants of \$ 9,686,855.) (Revenue \$ 136,404.)
SEE SCHEDULE O.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 10,319,034.

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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	X	
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I. See instructions</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

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Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22 X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23 X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	X
28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	29 X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33 X	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	38 X	

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a 15	
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c X	

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Part V **Statements Regarding Other IRS Filings and Tax Compliance** (continued)

		Yes	No
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 10		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	3b	X	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		X
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b		
15 Is the organization 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? If "Yes," see the instructions and file Form 4720, Schedule N.	15		X
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		X
17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17		

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Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI ☒ **X**

Section A. Governing Body and Management

		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	1a	18	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b Enter the number of voting members included on line 1a, above, who are independent	1b	18	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6 Did the organization have members or stockholders?	6		X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?	8a	X	
b Each committee with authority to act on behalf of the governing body?	8b	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a		X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	X	
13 Did the organization have a written whistleblower policy?	13	X	
14 Did the organization have a written document retention and destruction policy?	14	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a The organization's CEO, Executive Director, or top management official	15a	X	
b Other officers or key employees of the organization	15b		X
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed NY, CA

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☒ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records
TERRY D. MARIANO, CFO - 518-446-9638
2 TOWER PLACE, EXECUTIVE PARK, ALBANY, NY 12203

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII ☐

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JOHN G. EBERLE PRESIDENT & CEO	40.00			X				219,738.	0.	28,356.
(2) TERRY D. MARIANO CFO	40.00			X				163,582.	0.	17,490.
(3) MINDY DEROSIA VP, DEVELOPMENT	40.00				X			123,026.	0.	6,930.
(4) SHELLY CONNOLLY VP, COMMUNITY GRANTMAKING	40.00				X			121,647.	0.	6,887.
(5) DYLAN HALL DIRECTOR, STRATEGIC INITIATIVES	40.00				X			105,680.	0.	5,901.
(6) ALICIA LASCH IMMEDIATE PAST CHAIR	1.00	X		X				0.	0.	0.
(7) MARK R. HOLTZMAN, CPA DIRECTOR	1.00	X						0.	0.	0.
(8) BELINDA HILTON CHAIR	2.00	X		X				0.	0.	0.
(9) ROBERT S. REYNOLDS, ESQ. SECRETARY	1.00	X		X				0.	0.	0.
(10) CHRISTOPHER L. CIMIJOTTI, CPA CHAIR, AUDIT	1.00	X		X				0.	0.	0.
(11) JEAN BEDELL, CPA TREASURER/CHAIR ELECT	2.00	X		X				0.	0.	0.
(12) M. CHRISTIAN BENDER DIRECTOR	1.00	X						0.	0.	0.
(13) ELDON HARRIS DIRECTOR	1.00	X						0.	0.	0.
(14) EILEEN MCLOUGHLIN DIRECTOR	1.00	X						0.	0.	0.
(15) MEAGHAN E. MURPHY, ESQ. DIRECTOR	1.00	X						0.	0.	0.
(16) WALT KLISIWE CZ, CFP, MBA DIRECTOR	1.00	X						0.	0.	0.
(17) CHESTER OPALKA DIRECTOR	1.00	X						0.	0.	0.

**THE COMMUNITY FOUNDATION FOR THE GREATER
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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) AIMEE DAKE DIRECTOR	1.00	X						0.	0.	0.
(19) HEIDI KNOBLAUCH, PH.D. DIRECTOR	1.00	X						0.	0.	0.
(20) DAVID HOLLANDER DIRECTOR	1.00	X						0.	0.	0.
(21) ROBERT F. AUDI, CPA DIRECTOR	1.00	X						0.	0.	0.
(22) ALEX ZHANG, CPA DIRECTOR	1.00	X						0.	0.	0.
(23) WALTER THORNE DIRECTOR	1.00	X						0.	0.	0.
(24) CRICKETT THOMAS-O'DELL, MPA DIRECTOR	1.00	X						0.	0.	0.
(25) BRENDA OSORIO DIRECTOR	1.00	X						0.	0.	0.
1b Subtotal								733,673.	0.	65,564.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								733,673.	0.	65,564.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 5

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0

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Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	81,554.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	830,319.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	26,363,237.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 9,211,188.				
	h Total. Add lines 1a-1f						
Program Service Revenue	2 a FEES FOR SERVICE	Business Code	561000	136,404.	136,404.		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			136,404.			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			2,892,067.		-31,967.
4 Income from investment of tax-exempt bond proceeds							
5 Royalties							
6 a Gross rents		6a	(i) Real (ii) Personal				
b Less: rental expenses ...		6b					
c Rental income or (loss)		6c					
d Net rental income or (loss)							
7 a Gross amount from sales of assets other than inventory		7a	(i) Securities (ii) Other				
b Less: cost or other basis and sales expenses		7b	30,832,259.				
c Gain or (loss)		7c	3,628,494.				
d Net gain or (loss)			3,628,494.				
8 a Gross income from fundraising events (not including \$ 81,554. of contributions reported on line 1c). See Part IV, line 18		8a	11,440.				
b Less: direct expenses		8b	25,996.				
c Net income or (loss) from fundraising events			-14,556.				
9 a Gross income from gaming activities. See Part IV, line 19		9a					
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a	Business Code					
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d						
	12 Total revenue. See instructions			33,917,519.	136,404.	-31,967.	6537972.

**THE COMMUNITY FOUNDATION FOR THE GREATER
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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	8,993,531.	8,993,531.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	693,324.	693,324.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	429,167.	90,925.	276,218.	62,024.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	545,736.	318,180.	148,632.	78,924.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	29,215.	19,116.	7,008.	3,091.
9 Other employee benefits	17,523.	13,887.	2,317.	1,319.
10 Payroll taxes	69,639.	32,520.	28,470.	8,649.
11 Fees for services (nonemployees):				
a Management				
b Legal	16,327.		16,327.	
c Accounting	36,022.		36,022.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	519,837.		519,837.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	29,197.	18,683.	9,041.	1,473.
12 Advertising and promotion	69,990.		69,990.	
13 Office expenses	19,032.	6,667.	10,592.	1,773.
14 Information technology				
15 Royalties				
16 Occupancy	126,468.	59,058.	51,703.	15,707.
17 Travel	908.	424.	371.	113.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	14,141.	7,969.	4,017.	2,155.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	22,926.	10,706.	9,373.	2,847.
23 Insurance	28,778.	2,369.	25,779.	630.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a <u>EQUIPMENT LEASES/MAINT</u>	59,363.	27,721.	24,269.	7,373.
b <u>PROF. DEVELOPMENT</u>	51,292.	23,954.	20,971.	6,367.
c <u>FILING FEES</u>	5,852.		5,852.	
d <u>BAD DEBT (UNCOLLECTABLE</u>	2,500.		2,500.	
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	11,780,768.	10,319,034.	1,269,289.	192,445.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

**THE COMMUNITY FOUNDATION FOR THE GREATER
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Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	775,815.	1	1,496,303.
	2 Savings and temporary cash investments	770,014.	2	9,201,129.
	3 Pledges and grants receivable, net	219,692.	3	4,417,280.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	45,475.	9	40,065.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	221,559.		
	b Less: accumulated depreciation	173,191.		
		57,088.	10c	48,368.
	11 Investments - publicly traded securities	73,277,420.	11	92,155,998.
	12 Investments - other securities. See Part IV, line 11	42,993,306.	12	45,666,114.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11	1,683,605.	15	777,445.	
16 Total assets. Add lines 1 through 15 (must equal line 33)	119,822,415.	16	153,802,702.	
Liabilities	17 Accounts payable and accrued expenses	85,555.	17	56,060.
	18 Grants payable	164,209.	18	90,884.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	5,058,328.	25	5,851,003.
	26 Total liabilities. Add lines 17 through 25	5,308,092.	26	5,997,947.
	Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.		
27 Net assets without donor restrictions		44,478,949.	27	54,374,914.
28 Net assets with donor restrictions		70,035,374.	28	93,429,841.
Organizations that do not follow FASB ASC 958, check here ☐ and complete lines 29 through 33.				
29 Capital stock or trust principal, or current funds			29	
30 Paid-in or capital surplus, or land, building, or equipment fund			30	
31 Retained earnings, endowment, accumulated income, or other funds			31	
32 Total net assets or fund balances		114,514,323.	32	147,804,755.
33 Total liabilities and net assets/fund balances		119,822,415.	33	153,802,702.

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**THE COMMUNITY FOUNDATION FOR THE GREATER
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Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI ☒ **X**

1	Total revenue (must equal Part VIII, column (A), line 12)	1	33,917,519.
2	Total expenses (must equal Part IX, column (A), line 25)	2	11,780,768.
3	Revenue less expenses. Subtract line 2 from line 1	3	22,136,751.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	114,514,323.
5	Net unrealized gains (losses) on investments	5	11,219,838.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-66,157.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	147,804,755.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII ☒ **X**

		Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2a	X
b	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2b	X
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	2c	X
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____	3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____	3b	

Form **990** (2025)

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2025

Open to Public
Inspection

Name of the organization THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION, INC. Employer identification number 14-1505623

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)
- 3 ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 ☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 ☐ An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
- b ☐ Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
- c ☐ Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
- d ☐ Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations _____

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

**THE COMMUNITY FOUNDATION FOR THE GREATER
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Schedule A (Form 990) 2025

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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) 2025	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	18220903.	9584370.	5168387.	4876980.	27275110.	65125750.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	18220903.	9584370.	5168387.	4876980.	27275110.	65125750.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						14407848.
6 Public support. Subtract line 5 from line 4.						50717902.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) 2025	(f) Total
7 Amounts from line 4	18220903.	9584370.	5168387.	4876980.	27275110.	65125750.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1406076.	1630989.	1995005.	2398037.	2924034.	10354141.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	10,061.	128,196.	-41,706.	-12,777.	-31,967.	51,807.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	51,270.	46,915.	14,240.	17,600.	11,440.	141,465.
11 Total support. Add lines 7 through 10						75673163.
12 Gross receipts from related activities, etc. (see instructions)					12	714,731.

13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2025 (line 6, column (f), divided by line 11, column (f))	14	67.02 %
15 Public support percentage from 2024 Schedule A, Part II, line 14	15	75.10 %

16a 33 1/3% support test - 2025. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☒

b 33 1/3% support test - 2024. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

17a 10% -facts-and-circumstances test - 2025. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

b 10% -facts-and-circumstances test - 2024. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐

Schedule A (Form 990) 2025

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) 2025	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) 2025	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2025 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2024 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2025 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2024 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2025. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests - 2024. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**THE COMMUNITY FOUNDATION FOR THE GREATER
CAPITAL REGION, INC.**

Schedule A (Form 990) 2025

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Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described on line 11a above?		
11b		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a ☐ The organization satisfied the Activities Test. Complete line 2 below.			
b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
c ☐ The organization supported a governmental supported organization. Describe in Part VI how you supported a governmental supported organization (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of its supported organization(s)? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to each of its supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	Yes	No	
2a			
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
2b			
3 Parent of Supported Organizations. Answer lines 3a, 3b, and 3c below.			
a Are the organization and its supported organization(s) part of an integrated system (for example, a hospital system)? If "Yes," provide details in Part VI .			
3a			
b Did the organization direct the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
3b			
c Did the organization have the power to regularly appoint or elect (and remove) a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI .			
3c			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). **See instructions.**
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990) 2025

THE COMMUNITY FOUNDATION FOR THE GREATER
CAPITAL REGION, INC.

Schedule A (Form 990) 2025

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Total annual distributions. Add lines 1 through 5.	6
7	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	7
8	Distributable amount for 2025 from Section C, line 6	8
9	Line 7 amount divided by line 8 amount	9

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2025	(iii) Distributable Amount for 2025
1 Distributable amount for 2025 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2025 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2025			
a From 2020			
b From 2021			
c From 2022			
d From 2023			
e From 2024			
f Total of lines 3a through 3e			
g Applied to under distributions of prior years			
h Applied to 2025 distributable amount			
i Carryover from 2020 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2025 from Section D, line 6: \$			
a Applied to underdistributions of prior years			
b Applied to 2025 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2025, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2025. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2026. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2021			
b Excess from 2022			
c Excess from 2023			
d Excess from 2024			
e Excess from 2025			

Schedule A (Form 990) 2025

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, 3b, and 3c; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5 and 7; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

**Schedule B
(Form 990)**

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

Name of the organization

THE COMMUNITY FOUNDATION FOR THE GREATER
CAPITAL REGION, INC.

Employer identification number

14-1505623

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(3) (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), 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 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), 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).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (Rev. 12-2024)

Name of organization THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION, INC.	Employer identification number 14-1505623
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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
<u>1</u>		\$ <u>10,000,000.</u>	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
<u>2</u>		\$ <u>5,047,086.</u>	Person ☐ Payroll ☐ Noncash ☒ (Complete Part II for noncash contributions.)
<u>3</u>		\$ <u>1,947,506.</u>	Person ☒ Payroll ☐ Noncash ☒ (Complete Part II for noncash contributions.)
<u>4</u>		\$ <u>830,319.</u>	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
<u>5</u>		\$ <u>629,569.</u>	Person ☒ Payroll ☐ Noncash ☒ (Complete Part II for noncash contributions.)
		\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Name of organization

THE COMMUNITY FOUNDATION FOR THE GREATER
CAPITAL REGION, INC.

Employer identification number

14-1505623

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
2	1300 SHARES OF ASTRAZENECA PLC	\$ 117,813.	12/05/25
2	1500 SHARES OF APPLE INC	\$ 419,393.	12/05/25
2	300 SHARES OF LILLY ELI & CO	\$ 304,709.	12/05/25
2	7875 SHARES OF WALMART INC	\$ 909,366.	12/05/25
2	1500 SHARES OF AMAZON	\$ 342,818.	12/08/25
2	1876 SHARES OF ALPHABET INC	\$ 592,497.	12/08/25

Name of organization

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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
2	70 SHARES OF COSTCO WHOLESALE CORP	\$ 62,192.	12/08/25
2	3730 SHARES OF CAMECO CORP	\$ 341,948.	12/08/25
2	3700 SHARES OF NVIDIA CORP	\$ 685,222.	12/08/25
2	1049 SHARES OF BROADCOM INC	\$ 422,060.	12/08/25
2	3226 SHARES OF WELLS FARGO CO	\$ 290,613.	12/08/25
2	650 SHARES OF AMERICAN EXPRESS CO	\$ 237,470.	12/08/25

Name of organization THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION, INC.	Employer identification number 14-1505623
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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
<u>2</u>	1155 SHARES OF APPLE	\$ <u>320,985.</u>	<u>12/08/25</u>
<u>3</u>	1900 SAHRES OF BROOKFIELD CORP	\$ <u>117,297.</u>	<u>07/01/25</u>
<u>3</u>	225 SHARES OF BROOKFIELD ASSET MANAGEMENT LTD	\$ <u>12,326.</u>	<u>07/01/25</u>
<u>3</u>	1050 SHARES OF CDW CORP	\$ <u>189,903.</u>	<u>07/01/25</u>
<u>3</u>	700 SHARES GALLAGHER ARTHUR J & CO	\$ <u>223,815.</u>	<u>07/01/25</u>
<u>3</u>	1800 GRACO INC	\$ <u>156,771.</u>	<u>07/01/25</u>

Name of organization

THE COMMUNITY FOUNDATION FOR THE GREATER
CAPITAL REGION, INC.

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
3	600 SHARES OF PINNACLE FINANCIAL PARTNERS INC	\$ 67,581.	07/01/25
3	1200 SHARES OF ROSS STORES INC.	\$ 155,382.	07/01/25
3	190 SHARES OF ADVANCE MICRO DEVICES INC	\$ 25,739.	07/07/25
3	115 SHARES OF AMAZON	\$ 25,683.	07/07/25
3	90 SHARES OF BROADCOM INC	\$ 24,760.	07/07/25
3	100 SHARES CROWDSRIKE HOLDINGS INC	\$ 50,353.	07/07/25

Name of organization

THE COMMUNITY FOUNDATION FOR THE GREATER
CAPITAL REGION, INC.

Employer identification number

14-1505623

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
3	400 SHARES OF EXXON MOBIL CORP	\$ 44,454.	07/07/25
3	925 SHARES OF FREEPORT-MCMORAN COPPER & GOLD	\$ 41,620.	07/07/25
3	1750 SHARES OF HALLIBUTON CO	\$ 36,855.	07/07/25
3	80 SHARES OF MICROSOFT CORP	\$ 39,759.	07/07/25
3	390 SHARES OF NVIDIA CORP	\$ 61,747.	07/07/25
3	600 SHARES OF SHOPIFY INC	\$ 69,588.	07/07/25

Name of organization

THE COMMUNITY FOUNDATION FOR THE GREATER
CAPITAL REGION, INC.

Employer identification number

14-1505623

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
3	170 SHARES OF TJX XOS INC NEW	\$ 21,328.	07/07/25
3	345 SHARES OF TARGE RESOURCES CORP	\$ 59,019.	07/07/25
3	647 SHARES OF VANGUARD S&P 500	\$ 406,934.	12/12/25
3	1530 SHARES OF MICROCHIP TECHNOLOGY INC	\$ 108,492.	07/01/25
5	193 SHARES OF GE VERNOVA LLC	\$ 93,934.	06/05/25
5	257 SHARES OF GE HEALTHCARE TECHNOLOGIES	\$ 18,354.	06/05/25

Name of organization

THE COMMUNITY FOUNDATION FOR THE GREATER
CAPITAL REGION, INC.

Employer identification number

14-1505623

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
5	772 SHARES OF GE AEROSPACE	\$ 194,204.	06/05/25
5	2400 SHARES OF PPG INDS INC	\$ 268,200.	06/05/25
5	33 SHARES OF WABTEC CORP	\$ 6,736.	06/05/25
		\$	
		\$	
		\$	

Name of organization

**THE COMMUNITY FOUNDATION FOR THE GREATER
CAPITAL REGION, INC.**

Employer identification number

14-1505623**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 info. once.) \$ _____

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

SCHEDULE C
(Form 990)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527
Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2025

Open to Public
Inspection

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

- Section 501(c)(3) organizations: Complete Parts I-A and I-B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and I-C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions), or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization	THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION, INC.	Employer identification number (EIN)	14-1505623
----------------------	--	--------------------------------------	------------

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political campaign activity expenditures	\$	
3 Volunteer hours for political campaign activities		

Part I-B Complete if the organization is exempt under section 501(c)(3).

- | | | |
|---|--|--|
| 1 Enter the amount of any excise tax incurred by the organization under section 4955 | \$ | |
| 2 Enter the amount of any excise tax incurred by organization managers under section 4955 | \$ | |
| 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? | ☐ Yes ☐ No | |
| 4a Was a correction made? | ☐ Yes ☐ No | |
| b If "Yes," describe in Part IV. | | |

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- | | | |
|--|--|--|
| 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities | \$ | |
| 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities | \$ | |
| 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b | \$ | |
| 4 Did the filing organization file Form 1120-POL for this year? | ☐ Yes ☐ No | |
| 5 Enter the names, addresses, and EINs of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. | | |

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990) 2025 Created 7/1/25

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)			
b Total lobbying expenditures to influence a legislative body (direct lobbying)			
c Total lobbying expenditures (add lines 1a and 1b)			
d Other exempt purpose expenditures			
e Total exempt purpose expenditures (add lines 1c and 1d)			
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.			
IF the amount on line 1e, column (a) or (b), is:	THEN the lobbying nontaxable amount is:		
not over \$500,000	20% of the amount on line 1e.		
over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
over \$17,000,000	\$1,000,000.		
g Grassroots nontaxable amount (enter 25% of line 1f)			
h Subtract line 1g from line 1a. If zero or less, enter -0-			
i Subtract line 1f from line 1c. If zero or less, enter -0-			
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			

☐ Yes ☐ No
4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2022	(b) 2023	(c) 2024	(d) 2025	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2025

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?	X		2,250.
j Total. Add lines 1c through 1i			2,250.
2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments, and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid):		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?	4	
5 Taxable amount of lobbying and political expenditures. See instructions	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

PART II-B, LINE 1, LOBBYING ACTIVITIES:**PAYMENT TO A THIRD PARTY FOR LOBBYING SERVICES.**

SCHEDULE D

(Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization **THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION, INC.** Employer identification number **14-1505623**

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	217	
2 Aggregate value of contributions to (during year)	10,145,263.	
3 Aggregate value of grants from (during year)	7,462,206.	
4 Aggregate value at end of year	39,054,355.	
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☒ Yes ☐ No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☒ Yes ☐ No		

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
☐ Preservation of land for public use (for example, recreation or education) ☐ Preservation of a historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year

4 Number of states where property subject to conservation easement is located

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenue included on Form 990, Part VIII, line 1 \$

(ii) Assets included in Form 990, Part X \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 \$

b Assets included in Form 990, Part X \$

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) (Rev. 12-2024)

THE COMMUNITY FOUNDATION FOR THE GREATER

Schedule D (Form 990) (Rev. 12-2024) CAPITAL REGION, INC.

14-1505623 Page 2

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).

a ☐ Public exhibition

d ☐ Loan or exchange program

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐

Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	76,695,432.	70,604,415.	61,853,837.	71,284,850.	51,222,338.
b Contributions	15,211,662.	1,086,337.	1,031,529.	5,970,280.	13,062,621.
c Net investment earnings, gains, and losses	11,755,353.	7,880,956.	8,932,771.	-12,945,237.	8,911,821.
d Grants or scholarships					
e Other expenditures for facilities and programs	1,406,177.	2,876,276.	1,213,722.	2,456,056.	1,911,930.
f Administrative expenses					
g End of year balance	102,256,270.	76,695,432.	70,604,415.	61,853,837.	71,284,850.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment 8.8400 %

b Permanent endowment 67.9600 %

c Term endowment 23.2000 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) Unrelated organizations? _____

(ii) Related organizations? _____

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? _____

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		221,559.	173,191.	48,368.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				48,368.

Schedule D (Form 990) (Rev. 12-2024)

THE COMMUNITY FOUNDATION FOR THE GREATER

Schedule D (Form 990) (Rev. 12-2024) **CAPITAL REGION, INC.**

14-1505623 Page **3**

Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) COMMINGLED/OTHER		
(B) INVESTMENTS	45,666,114.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	45,666,114.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CHARITABLE GIFT ANNUITY LIABILITY	144,221.
(3) AGENCY ENDOWMENTS	5,551,366.
(4) OPERATING LEASE LIABILITY	155,416.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	5,851,003.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... ☒

Schedule D (Form 990) (Rev. 12-2024)

THE COMMUNITY FOUNDATION FOR THE GREATER

Schedule D (Form 990) (Rev. 12-2024) **CAPITAL REGION, INC.**

14-1505623 Page **4**

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	44,574,859.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	11,219,838.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	-68,657.
e	Add lines 2a through 2d	2e	11,151,181.
3	Subtract line 2e from line 1	3	33,423,678.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	519,837.
b	Other (Describe in Part XIII.)	4b	-25,996.
c	Add lines 4a and 4b	4c	493,841.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	33,917,519.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	11,284,427.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	25,996.
e	Add lines 2a through 2d	2e	25,996.
3	Subtract line 2e from line 1	3	11,258,431.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	519,837.
b	Other (Describe in Part XIII.)	4b	2,500.
c	Add lines 4a and 4b	4c	522,337.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	11,780,768.

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4:

THE COMMUNITY FOUNDATION'S ENDOWMENT CONSISTS OF VARIOUS FUNDS AND INVESTMENTS OVERSEEN BY THE FINANCE COMMITTEE OF THE BOARD OF DIRECTORS WITH ASSISTANCE BY AN INDEPENDENT ADVISOR. ENDOWMENT FUNDS ARE USED TO SUPPORT THE COMMUNITY FOUNDATION, AND ITS PROGRAM SERVICES, AS WELL AS TO SUPPORT OTHER ORGANIZATIONS AND SCHOLARS WITHIN THE GREATER CAPITAL REGION.

PART X, LINE 2:

THE COMMUNITY FOUNDATION FILES FORM 990 ANNUALLY WITH THE INTERNAL REVENUE SERVICE. WHEN ANNUAL RETURNS ARE FILED, SOME TAX POSITIONS TAKEN ARE HIGHLY CERTAIN TO BE SUSTAINED UPON EXAMINATION BY THE TAXING AUTHORITIES, WHILE OTHER TAX POSITIONS ARE SUBJECT TO UNCERTAINTY ABOUT THE TECHNICAL MERITS OF THE POSITION OR AMOUNT OF THE POSITION'S TAX BENEFIT THAT WOULD ULTIMATELY BE SUSTAINED. MANAGEMENT EVALUATED THE COMMUNITY FOUNDATION'S TAX POSITIONS AND CONCLUDED THAT THE COMMUNITY FOUNDATION HAS TAKEN NO TAX POSITIONS THAT REQUIRED ADJUSTMENT IN THEIR FINANCIAL STATEMENTS AS OF DECEMBER 31, 2025 OR 2024.

THE COMMUNITY FOUNDATION HAS TAXABLE UNRELATED BUSINESS INCOME RELATED TO INVESTMENT HOLDINGS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN VALUE OF SPLIT INTEREST FUNDS	-66,157.
BAD DEBT (UNCOLLECTABLE PLEDGES)	-2,500.

SCHEDULE F
(Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization

THE COMMUNITY FOUNDATION FOR THE GREATER
CAPITAL REGION, INC.

Employer identification number

14-1505623

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on
Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,	0	0	INVESTMENTS		8,005,398.
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	0	0	INVESTMENTS		1,369,203.
3 a Subtotal	0	0			9,374,601.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			9,374,601.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) (Rev. 12-2024)

THE COMMUNITY FOUNDATION FOR THE GREATER

Schedule F (Form 990) (Rev. 12-2024) **CAPITAL REGION, INC.**

14-1505623

Page **2**

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

Schedule F (Form 990) (Rev. 12-2024)

Part III

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

THE COMMUNITY FOUNDATION FOR THE GREATER

Schedule F (Form 990) (Rev. 12-2024) CAPITAL REGION, INC.

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Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)* ☒ Yes ☐ No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)* ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)* ☒ Yes ☐ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)* ☒ Yes ☐ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)* ☒ Yes ☐ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)* ☐ Yes ☒ No

Schedule F (Form 990) (Rev. 12-2024)

Part V	Supplemental Information
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Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

Open to Public Inspection

Employer identification number
14-1505623

Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

Total			
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- [illegible]

Schedule G (Form 990) (Rev. 12-2024)

THE COMMUNITY FOUNDATION FOR THE GREATER

Schedule G (Form 990) (Rev. 12-2024) **CAPITAL REGION, INC.**

14-1505623 Page **2**

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1 ANNUAL CELEBRATION	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts	92,994.			92,994.
	2 Less: Contributions	81,554.			81,554.
	3 Gross income (line 1 minus line 2)	11,440.			11,440.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages	13,998.			13,998.
	8 Entertainment	2,500.			2,500.
	9 Other direct expenses	9,498.			9,498.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				25,996.
	11 Net income summary. Subtract line 10 from line 3, column (d)				-14,556.

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
	2 Cash prizes				
Direct Expenses	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

THE COMMUNITY FOUNDATION FOR THE GREATER

Schedule G (Form 990) (Rev. 12-2024) CAPITAL REGION, INC.

14-1505623 Page 3

- 11** Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12** Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity conducted in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name _____

Address _____

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____

c If "Yes," enter the name and address of the third party:

Name _____

Address _____

- 16** Gaming manager information:

Name _____

Gaming manager compensation \$ _____

Description of services provided _____

☐ Director/officer ☐ Employee ☐ Independent contractor

- 17** Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Part IV		Supplemental Information <i>(continued)</i>
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**SCHEDULE I
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization **THE COMMUNITY FOUNDATION FOR THE GREATER
CAPITAL REGION, INC.**

Employer identification number
14-1505623

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ **Yes** ☐ **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ADIRONDACK FILM PO BOX 489 LAKE PLACID, NY 12946	14-1816417	501(C)(3)	10,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR SUPPORT OF THE STUDENT SUMMIT
ADIRONDACK FOUNDATION P.O. BOX 288 LAKE PLACID, NY 12946	16-1535724	501(C)(3)	28,750.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:IN SUPPORT OF THE CAPITAL IMPROVEMENTS AT THE
ADVOCATES FOR THE SCHUYLERVILLE PUBLIC LIBRARY - 52 FERRY ST - SCHUYLERVILLE, NY 12871	26-0669734	501(C)(3)	50,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE BUILDING EXPANSION PROJECT
AGAPE APOSTOLIC CHURCH OF DELIVERANCE - 1010 MADISON AVE - TROY, NY 12180	80-0312279	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE BREAD OF LIFE FOOD PANTRY FOR THANKSGIVING
AGRICULTURAL STEWARDSHIP ASSOCIATION - 2531 STATE ROUTE 40 - GREENWICH, NY 12834	22-3084628	501(C)(3)	7,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR A BUSINESS SPONSORSHIP
ALBANY INSTITUTE OF HISTORY & ART 125 WASHINGTON AVENUE ALBANY, NY 12210	14-1343061	501(C)(3)	6,300.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **263.**

3 Enter total number of other organizations listed in the line 1 table **0.**

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (Rev. 12-2024)

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

**THE COMMUNITY FOUNDATION FOR THE GREATER
CAPITAL REGION, INC.**

Schedule I (Form 990)

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALBANY LAW SCHOOL 80 NEW SCOTLAND ALBANY, NY 12208	14-1338309	501(C)(3)	7,500.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:WOMEN'S LEADERSHIP INITIATIVE ENDOWED FUND &
ALBANY MEDICAL CENTER FOUNDATION 43 NEW SCOTLAND AVENUE ALBANY, NY 12208	14-6023119	501(C)(3)	164,250.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR LIGHT UP THE NIGHT
ALBANY SYMPHONY ORCHESTRA 19 CLINTON AVENUE ALBANY, NY 12207	14-6013010	501(C)(3)	71,650.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE MATCH CHALLENGE
ALZHEIMER'S ASSOCIATION OF NORTHEASTERN NEW YORK - 1003 NEW LOUDON RD. - COHOES, NY 12047	13-3039601	501(C)(3)	10,298.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:IN MEMORY OF COACH DON BLAHA
AMERICAN CANCER SOCIETY ONE PENNY LANE LATHAM, NY 12110	13-1788491	501(C)(3)	9,020.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
AMERICAN HEART ASSOCIATION, NATIONAL CENTER - 7272 GREENVILLE AVENUE - DALLAS, TX 75231	13-5613797	501(C)(3)	5,200.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
ANIMAL PROTECTIVE FOUNDATION OF SCHENECTADY, INC. - 53 MAPLE AVENUE - SCOTIA, NY 12302	14-0472728	501(C)(3)	81,500.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE CAPITAL PROJECT
AVERILL PARK EDUCATION FOUNDATION PO BOX 56 AVERILL PARK, NY 12018	31-1764167	501(C)(3)	10,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
BATTENKILL COMMUNITY SERVICES, INC. - 2549 STATE ROUTE 40 - GREENWICH, NY 12834	14-1810997	501(C)(3)	21,500.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR ASSISTANCE WITH THE BLESSING SHACK IN ORDER

Schedule I (Form 990)

**THE COMMUNITY FOUNDATION FOR THE GREATER
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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BETHLEHEM CENTRAL HIGH SCHOOL 700 DELAWARE AVENUE DELMAR, NY 12054	14-6001259	501(C)(3)	7,500.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR PROJECT LEAD THE WAY
BETHLEHEM CENTRAL SCHOOL DISTRICT 700 DELAWARE AVENUE DELMAR, NY 12054	14-6001259	501(C)(3)	6,500.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR SENIOR AWARDS NIGHT
BIG BROTHERS BIG SISTERS OF SOUTHERN ADIRONDACKS - 1 LAWRENCE STREET SUITE 1B - GLENS FALLS, NY 12801	14-1596697	501(C)(3)	10,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:IN CELEBRATION OF WOLBERG'S 100TH ANNIVERSARY.
BOSTON MODERN ORCHESTRA PROJECT 376 WASHINGTON STREET MALDEN, MA 02148	04-3238554	501(C)(3)	22,809.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE RECORDING OF THE SYMPHONY NUMBER ONE
BOYS & GIRLS CLUBS OF SCHENECTADY PO BOX 466 SCHENECTADY, NY 12301	14-1364595	501(C)(3)	210,200.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
BOYS & GIRLS CLUBS OF THE CAPITAL AREA - 21 DELAWARE AVENUE - ALBANY, NY 12210	14-1338574	501(C)(3)	21,431.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR HOLIDAY PROGRAMMING
BREAST CANCER RESEARCH FOUNDATION 28 W. 44TH STREET, SUITE 609 NEW YORK, NY 10036	13-3727250	501(C)(3)	125,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
BUILDING ON LOVE 244 NORTH MOHAWK STREET COHOES, NY 12047	27-0524296	501(C)(3)	10,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE CAPITAL CUP FOR KIDS
CALVARY TABERNACLE ASSEMBLY OF GOD 1840 ALBANY ST SCHENECTADY, NY 12304	14-1654341	501(C)(3)	10,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE

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CAPITAL REGION, INC.**

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMPAIGN FOR SARATOGA 250, INC 125 HIGH ROCK AVENUE SARATOGA SPRINGS, NY 12866	88-3918696	501(C)(3)	25,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR SUPPORT AT THE VICTORY CIRCLE
CAPITAL CITY GOSPEL/RESCUE MISSION 259 SOUTH PEARL STREET ALBANY, NY 12202	56-2663290	501(C)(3)	11,900.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
CAPITAL DISTRICT YMCA 465 NEW KARNER ROAD ALBANY, NY 12205	14-1726531	501(C)(3)	11,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE BASKET BRIGADE FOR BETHLEHEM AREA FAMILIES
CAPITAL REGION YOUTH TENNIS FOUNDATION - 785 WASHINGTON AVENUE - ALBANY, NY 12206	14-1733312	501(C)(3)	13,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE ANNUAL FUND
CAPITAL ROOTS 594 RIVER STREET TROY, NY 12180	14-1596291	501(C)(3)	35,550.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
CAPTAIN COMMUNITY HUMAN SERVICES 543 SARATOGA ROAD GLENVILLE, NY 12302	14-1637304	501(C)(3)	12,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR WHERE THE NEED IS GREATEST
CATHEDRAL OF ALL SAINTS 62 SOUTH SWAN STREET ALBANY, NY 12210	14-1338336	501(C)(3)	10,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
CATHOLIC CHARITIES TRI-COUNTY SERVICES - 50 HERRICK STREET - RENSSELAER, NY 12144	14-1340033	501(C)(3)	17,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:IN MEMORIES OF MARRIANE KELLY LACEY AND MURIEL
CITY MISSION OF SCHENECTADY P.O. BOX 760 SCHENECTADY, NY 12301	14-1403652	501(C)(3)	24,900.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLINTON COUNTY COMMUNITY COLLEGE FOUNDATION, INC. - 136 CLINTON POINT DRIVE - PLATTSBURGH, NY 12901	14-6097944	501(C)(3)	50,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:THE COLLEGE ADVANCEMENT PROGRAM FOR CLINTON
COLUMBIA MEMORIAL HEALTH FOUNDATION - 71 PROSPECT AVENUE - HUDSON, NY 12534	14-1761112	501(C)(3)	50,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:TO SUPPORT THE REIMAGINING OUR FUTURE CAMPAIGN
COMMUNITY LOAN FUND OF THE CAPITAL REGION, INC. - 255 ORANGE STREET - ALBANY, NY 12210	22-2706505	501(C)(3)	100,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE CIT PROGRAM
CONGREGATION BETH EMETH 100 ACADEMY ROAD ALBANY, NY 12208	14-1338377	501(C)(3)	14,008.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:UNDERWRITING HANUKAH FESTIVITIES
CONGREGATION GATES OF HEAVEN 852 ASHMORE AVENUE SCHENECTADY, NY 12309	14-1471473	501(C)(3)	125,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
CONNECT CENTER FOR YOUTH 49 JOHNSTON AVE COHOES, NY 12047	45-4737831	501(C)(3)	11,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
CORNELL UNIVERSITY P.O. BOX 752 ITHACA, NY 14851	15-0532082	501(C)(3)	11,500.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR CORNELL MEN'S LACROSSE
COTA- CHILDREN'S ORGAN TRANSPLANT ASSOCIATION, INC. - 2501 WEST COTA DR - BLOOMINGTON, IN 47403	35-1674365	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:DESIGNATED FOR ADDISON WALL
CULINARY INSTITUTE OF AMERICA 1946 CAMPUS DRIVE HYDE PARK, NY 12538	06-0653264	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE CULINARY INSTITUTE OF AMERICA

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DAKE FOUNDATION FOR CHILDREN PO BOX 3575 SARATOGA SPRINGS, NY 12866	14-1801175	501(C)(3)	50,400.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR CHILD'S PLAY 2025: BOOTS AND BOURBON
DOUBLE "H" HOLE IN THE WOODS RANCH 97 HIDDEN VALLEY ROAD LAKE LUZERNE, NY 12846	14-1752888	501(C)(3)	91,100.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
DWIGHT-ENGLEWOOD SCHOOL 315 PALISADE AVENUE ENGLEWOOD, NJ 07631	22-1487165	501(C)(3)	7,500.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
EAST GREENBUSH EDUCATION FOUNDATION - 29 ENGLEWOOD AVENUE - EAST GREENBUSH, NY 12061	41-1518616	501(C)(3)	6,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE CHRISTOPHER BASCOM MEMORIAL SCHOLARSHIPS
ELLIS HOSPITAL FOUNDATION, INC. 1101 NOTT STREET SCHENECTADY, NY 12308	14-1638957	501(C)(3)	103,650.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
EMMA WILLARD SCHOOL 285 PAWLING AVENUE TROY, NY 12180	14-1338390	501(C)(3)	13,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:TO SUPPORT THE WALLCE CENTER FOR THEIR PERFORMING ARTS
EMPIRE STATE UNIVERSITY FOUNDATION 28 UNION AVENUE SARATOGA SPRINGS, NY 12866	51-0193595	501(C)(3)	51,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
EMPIRE STATE YOUTH ORCHESTRA 45 MACARTHUR DR. SCHENECTADY, NY 12302	22-2317557	501(C)(3)	200,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
EQUINOX, INC. 500 CENTRAL AVENUE ALBANY, NY 12206	14-1437421	501(C)(3)	5,400.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ESSEX FOOD HUB PO BOX 369 WESTPORT, NY 12993	92-0845255	501(C)(3)	20,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE PURCHASE OF A REFRIGERATED VAN
FARM SANCTUARY PO BOX 150 WATKINS GLEN, NY 14891	51-0292919	501(C)(3)	6,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
FLOW CHART FOUNDATION, INC. 348 WARREN STREET HUDSON, NY 12534	91-6478619	501(C)(3)	28,202.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
FOOD PANTRIES FOR THE CAPITAL DISTRICT, INC. - 32 ESSEX STREET - ALBANY, NY 12206	32-0160439	501(C)(3)	31,300.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
FORDHAM UNIVERSITY 441 E FORDHAM ROAD BRONX, NY 10458	13-1740451	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
FRANKLIN COMMUNITY CENTER 95 WASHINGTON STREET SARATOGA SPRINGS, NY 12866	23-1352635	501(C)(3)	22,425.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
FREEDOM FORUM, INC. 610 WATER STREET STE 300 WASHINGTON, DC 20024	54-1604427	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE FIRST AMENDMENT SOCIETY
FRIENDS OF ALBANY RURAL CEMETERY CEMETERY AVENUE ALBANY, NY 12204	83-3544482	501(C)(3)	10,100.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
GRASSROOT GIVERS 522 WASHINGTON AVENUE ALBANY, NY 12203	27-4846966	501(C)(3)	5,500.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR MULTI-USE WORK TABLES

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GUILDERLAND FOOD PANTRY 4 CHARLES BOULEVARD GUILDERLAND, NY 12084	81-1112737	501(C)(3)	25,500.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
HANNAH'S HOPE FUND 70 RAILROAD PL. #305 SARATOGA SPRINGS, NY 12866	45-0593226	501(C)(3)	10,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:TO SUPPORT HANNAH'S HOPE MISSION
HELDERBERG REFORMED CHURCH 435 NY ROUTE 146 GUILDERLAND CENTER, NY 12085	14-6024281	501(C)(3)	20,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
HISTORIC ALBANY FOUNDATION 89 LEXINGTON AVENUE ALBANY, NY 12206	23-7380514	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE COMPLETION OF 48 HUDSON STREET RESTORATION
HISTORIC SARANAC LAKE 89 CHURCH STREET SARANAC LAKE, NY 12208	14-1635407	501(C)(3)	25,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR SUPPORT OF THE CHILDREN'S EXHIBITS
HISTORIC ST. AGNES CEMETERY 48 CEMETERY AVE. MENANDS, NY 12204	27-0246295	501(C)(3)	10,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
HIVE OF HOPE, INC. 161 CENTRAL AVENUE ALBANY, NY 12206	87-2438182	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
HOMELESS AND TRAVELERS AID SOCIETY (HATAS) - 138 CENTRAL AVENUE - ALBANY, NY 12206	14-1482188	501(C)(3)	27,500.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
HOMEWARD BOUND ADIRONDACKS PO BOX 1100 SARANAC LAKE, NY 12983	27-4892529	501(C)(3)	50,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE CABIN FOR VETERANS WITH DISABILITIES

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HUDSON MOHAWK INDUSTRIAL GATEWAY 1 EAST INDUSTRIAL WAY TROY, NY 12180	23-7269676	501(C)(3)	5,200.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE PURCHASE OF A DISPLAY STAND
HYDE COLLECTION 161 WARREN STREET GLENS FALLS, NY 12801	14-1401101	501(C)(3)	26,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
IBI SEMPER TRAINING, INC. 25 DUBLIN DRIVE NISKAYUNA, NY 12309	84-4282620	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
INNOVATION STATION INC 175 MAIN STREET RAVENA, NY 12143	14-1804364	501(C)(3)	10,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE CARVERA DESKTOP CNC MACHINE
IPHNY, INC. 176 SHERIDAN AVENUE ALBANY, NY 12210	13-5660870	501(C)(3)	141,296.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
JEWISH COMMUNITY CENTER OF SCHENECTADY, INC. - 2565 BALLTOWN ROAD - SCHENECTADY, NY 12309	22-2515091	501(C)(3)	140,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
JEWISH FAMILY SERVICES OF NORTHEASTERN NEW YORK - 184 WASHINGTON AVE EXT - ALBANY, NY 12203	14-1338308	501(C)(3)	7,830.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR GENERAL SUPPORT OF MISSION AND COMMUNITY
JEWISH FEDERATION OF NORTHEASTERN NEW YORK - 184 WASHINGTON AVENUE EXT. - ALBANY, NY 12203	22-2805163	501(C)(3)	351,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
JEWISH NATIONAL FUND-KEREN KAYEMETH LEISRAEL, INC. - 78 RANDALL AVENUE - ROCKVILLE CENTER, NY 11570	13-1659627	501(C)(3)	8,710.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE JEWISH NATIONAL FUND-USAJNF BREAKFAST

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JOHN'S ISLAND COMMUNITY SERVICE LEAGUE - 4445 N. HIGHWAY A1A, SUITE 234 - VERO BEACH, FL 32963	59-1978180	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
JOHN'S ISLAND FOUNDATION 6001 HIGHWAY A1A INDIAN RIVER SHORES, FL 32963	65-0916419	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
JUSTICE FOR ORPHANS, INC. 38 FARES RD. RAVENA, NY 12143	47-5472441	501(C)(3)	6,250.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
KINGSTON SELF-HELP CENTER, INC. 17 SAINT JAMES ST KINGSTON, NY 12401	14-1701360	501(C)(3)	10,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:A DONATION IN HONOR OF WOLBERG'S 100TH
KOINONIA PRIMARY CARE, INC. 553 CLINTON AVENUE ALBANY, NY 12206	45-3448794	501(C)(3)	10,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE PURCHASE OF A NEW BOILER
LA SALLE INSTITUTE 174 WILLIAMS ROAD TROY, NY 12180	14-1338447	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
LEWIS AND CLARK COLLEGE 615 S PALATINE HILL RD. PORTLAND, OR 97219	93-0386858	501(C)(3)	25,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:GIFT TO THE URQUHART FAMILY ENDOWED
LIBERTY FOUNDATION INC 43 LIBERTY DR AMSTERDAM, NY 12010	14-1759246	501(C)(3)	5,500.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE 2025 ANNUAL APPEAL DONATION
LIFEWORCS COMMUNITY ACTION 39 BATH STREET BALLSTON SPA, NY 12020	23-7438457	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THANKSGIVING BASKETS

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LITERACY VOLUNTEERS CAPITAL REGION 65 FIRST STREET TROY, NY 12180	23-7330119	501(C)(3)	7,178.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
LITERARY CLASSICS OF THE UNITED STATES, INC. - 14 EAST 60TH STREET - NEW YORK, NY 10022	13-2986916	501(C)(3)	25,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR SUBVENTION FOR WILLIAM KENNEDY: THE ALBANY
LUKEN DAILY BREAD FOOD PANTRY INC 1241 STATE STREET SCHENECTADY, NY 12304	93-2661674	501(C)(3)	25,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
LUZERNE MUSIC CENTER, INC. PO BOX 39 LAKE LUZERNE, NY 12846	22-2765869	501(C)(3)	25,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR ANNUAL SUPPORT
MAKE-A-WISH FOUNDATION OF NORTHEAST NEW YORK - 92 CONGRESS ST. - SARATOGA SPRINGS, NY 12866	14-1703503	501(C)(3)	6,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR USE TOWARDS A CHILD'S WISH
MARIA COLLEGE 700 NEW SCOTLAND AVENUE. ALBANY, NY 12208	14-1463151	501(C)(3)	30,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE EMERGENCE FOOD AND RESOURCES AT MARIA
MEDIA WORKING GROUP, INC. 1225 WEST NORTH BEND ROAD CINCINNATI, OH 45224	31-1241613	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR SUPPORT FOR THE TELECOM PROJECT
MKEEL CHRISTIAN ACADEMY 36-38 SACANDAGA RD SCOTIA, NY 12302	46-0861110	501(C)(3)	40,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
MOHAWK HUDSON HUMANE SOCIETY 3 OAKLAND AVENUE MENANDS, NY 12204	14-1338459	501(C)(3)	38,950.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE

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MORGAN STATE UNIVERSITY FOUNDATION, INC. - 1700 E. COLD SPRING LANE - BALTIMORE, MD 21251	23-7089143	501(C)(3)	25,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE SCHOOL OF GLOBAL JOURNALISM GENERAL FUND
MOSTLY MODERN PROJECTS 433 COUTY ROUTE 68 SARATOGA SPRINGS, NY 12866	20-3563472	501(C)(3)	10,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR SPONSORSHIP SUPPORT
MUSICIANS OF MA'ALWYCK 511 MOHAWK AVENUE SCOTIA, NY 12302	05-0532851	501(C)(3)	35,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE ZOELLNER STRING QUARTET PROJECT
NATIONAL WOMEN'S HISTORY MUSEUM 800 CONNECTICUT AVE NW 3RD FLOOR WASHINGTON, DC 20006	54-1801426	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
NEW ENGLAND HEMOPHILIA ASSOCIATION 347 WASHINGTON STREET, SUITE 401 DEDHAM, MA 02026	04-6111861	501(C)(3)	14,101.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR CAMP AND A MEMORIAL BRICK
NEW YORK ANIMAL AGRICULTURE COALITION - PO BOX 179 - PEN YAN, NY 14527	46-5077587	501(C)(3)	25,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR SUPPORT OF THE MOBILE DAIRY
NISKAYUNA REFORMED CHURCH 3041 TROY ROAD NISKAYUNA, NY 12309	14-1416685	501(C)(3)	8,700.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR A GENERAL FUND PLEDGE
NORTH COUNTRY COMMUNITY COLLEGE FOUNDATION - 23 SANTANONI AVENUE - SARANAC LAKE, NY 12983	23-7316021	501(C)(3)	10,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR OPPORTUNITY SCHOLARSHIPS
NORTH COUNTRY RURAL DEVELOPMENT PO BOX 348 TICONDEROGA, NY 12883	14-1666190	501(C)(3)	50,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE NEW TICONDEROGA ICE RINK REFRIGERATION SYSTEM

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NORTHERN RIVERS FAMILY SERVICES 60 ACADEMY ROAD ALBANY, NY 12208	14-1646198	501(C)(3)	14,500.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
NORTHLAND CARES 3188 N. WINDSONG DRIVE PRESCOTT VALLEY, AZ 86314	74-2665371	501(C)(3)	25,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
OPERA SARATOGA 19 ROOSEVELT DRIVE, SUITE 215 SARATOGA SPRINGS, NY 12866	13-2505803	501(C)(3)	16,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
OPERATION AT EASE 1231 FERRY ROAD NISKAYUNA, NY 12309	81-0866429	501(C)(3)	10,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:A DONATION IN HONOR OF WOLBERG'S 100TH
OSWEGO HEALTH FOUNDATION, INC. 110 WEST SIXTH STREET OSWEGO, NY 13126	80-0822020	501(C)(3)	25,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR SUPPORT OF THE RENOVATION OF THE EMERGENCY
PALACE THEATRE 19 CLINTON AVENUE ALBANY, NY 12207	14-1708151	501(C)(3)	25,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE COMMUNITY ENGAGEMENT INITIATIVE AND 2026
PARK CITY COMMUNITY FOUNDATION PO BOX 681499 PARK CITY, UT 84068	30-0171971	501(C)(3)	138,276.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
PITNEY MEADOWS COMMUNITY FARM 223 WEST AVE SARATOGA SPRINGS, NY 12866	81-2724904	501(C)(3)	6,125.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
PLAYHOUSE STAGE COMPANY 58 REMSEN STREET COHOES, NY 12047	23-1352509	501(C)(3)	6,250.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE

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PRISONERS LEGAL SERVICES OF NEW YORK - 41 STATE ST STE M112 - ALBANY, NY 12207	14-1605106	501(C)(3)	100,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
PROCTORS, ARTS CENTER & THEATRE OF SCHENECTADY, INC. - 432 STATE STREET - SCHENECTADY, NY 12305	14-1602083	501(C)(3)	161,250.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE ANNUAL APPEAL
RADIX ECOLOGICAL SUSTAINABILITY CENTER - 59 ELM STREET - ALBANY, NY 12202	27-1216514	501(C)(3)	5,318.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
REFUGEE AND IMMIGRANT SUPPORT SERVICES OF EMMAUS, INC. - 240 W LAWRENCE STREET - ALBANY, NY 12208	27-4809744	501(C)(3)	26,950.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
REGIONAL FOOD BANK OF NORTHEASTERN NEW YORK, INC. - 965 ALBANY SHAKER ROAD - LATHAM, NY 12110	22-2470885	501(C)(3)	299,486.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
RIVERSIDE THEATRE 3250 RIVERSIDE PARK DRIVE VERO BEACH, FL 32963	59-1764305	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
RONALD MCDONALD HOUSE CHARITIES OF THE CAPITAL REGION, INC. - 139 SOUTH LAKE AVENUE - ALBANY, NY 12208	22-2356004	501(C)(3)	7,700.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR VOLUNTEER APPRECIATION PARTNERSHIP
ROOTS AND ACTION PO BOX 366252 SAN JUAN, PR 00936	66-0931439	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
RUSSELL SAGE COLLEGE 65 1ST STREET TROY, NY 12180	14-1338488	501(C)(3)	56,600.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE

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SALVATION ARMY OF WATERTOWN 723 STATE STREET WATERTOWN, NY 13601	13-5562351	501(C)(3)	10,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE PURCHASE OF A VAN
SARATOGA HOSPITAL FOUNDATION 211 CHURCH STREET SARATOGA SPRINGS, NY 12866	14-1775218	501(C)(3)	6,500.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE FLOWER AND FRUIT MISSION
SARATOGA INSTITUTE, INC. 110 SPRING STREET SARATOGA SPRINGS, NY 12866	14-1664693	501(C)(3)	25,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:THE ASSOCIATION FOR THE ADVANCEMENT OF SCIENCE
SARATOGA PERFORMING ARTS CENTER, INC. - 108 AVENUE OF THE PINES - SARATOGA SPRINGS, NY 12866	14-1466353	501(C)(3)	22,500.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE ANNUAL FUND
SARATOGA REGIONAL YMCA 290 WEST AVENUE SARATOGA SPRINGS, NY 12866	14-1706013	501(C)(3)	7,025.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR YOUTH AND GOVERNMENT GROUP
SARATOGA SPRINGS HIGH SCHOOL 1 BLUE STREAK BLVD. SARATOGA SPRINGS, NY 12866	14-6004187	501(C)(3)	20,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:THE ANNUAL PULVER SCHOLARSHIP AWARD
SCHENECTADY COUNTY COMMUNITY COLLEGE FOUNDATION, INC. - 78 WASHINGTON AVENUE - SCHENECTADY, NY 12305	23-7194187	501(C)(3)	20,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR SUPPORT OF THE HIGH SCHOOL SCHOLARSHIP FUND
SCHENECTADY DAY NURSERY 25 LAFAYETTE STREET SCHENECTADY, NY 12305	14-1364596	501(C)(3)	50,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
SCHENECTADY HINDU TEMPLE AND COMMUNITY SERVICES - PO BOX 4555 - SCHENECTADY, NY 12304	14-1834153	501(C)(3)	10,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR SUPPORT OF THE FOOD PANTRY

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SERVANTS OF THE WORD, DBA THE OPEN DOOR - 226 WARREN STREET - GLENS FALLS, NY 12801	22-2212538	501(C)(3)	25,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR SUPPORT OF THE WOMEN'S INITIATIVE
SHALOM FOOD PANTRY 393 DELAWARE AVENUE DELMAR, NY 12054	82-1306418	501(C)(3)	15,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR A COMMERCIAL OVEN
SHRINERS HOSPITALS FOR CHILDREN 2900 ROCKY POINT DRIVE TAMPA, FL 33607	36-2193608	501(C)(3)	5,500.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
SIDEWALK WARRIORS - TROY 35 STATE STREET TROY, NY 12180	14-1768128	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR EQUIPMENT FOR THE WEEKLY DISTRIBUTIONS
SIENA COLLEGE 515 LOUDON ROAD LOUDONVILLE, NY 12211	14-1338498	501(C)(3)	48,380.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
SKIDMORE COLLEGE 815 N BROADWAY SARATOGA SPRINGS, NY 12866	14-1338562	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR SCHOLARSHIPS AND FINANCIAL AID
SOUTH END CHILDREN'S CAFE, INC PO BOX 10581 ALBANY, NY 12201	82-3434643	501(C)(3)	32,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
SOUTH END NEIGHBORHOOD TUTORS, INC. D/B/A THE WIZARD'S WARDROBE - 20 RENSSELAER STREET - ALBANY, NY 12202	47-5260073	501(C)(3)	10,500.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
ST. ANNE INSTITUTE 160 NORTH MAIN AVENUE ALBANY, NY 12206	14-1340098	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE CAPITAL CAMPAIGN

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST. CATHERINE'S CENTER FOR CHILDREN - 40 NORTH MAIN AVENUE - ALBANY, NY 12203	14-1338455	501(C)(3)	36,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
ST. JOHN'S UNIVERSITY SCHOOL OF LAW - 8000 UTOPIA PARKWAY - QUEENS, NY 11439	11-1630830	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE HUGH CAREY DISPUTE MEDIATION PROGRAM
ST. JUDE CHILDREN'S RESEARCH HOSPITAL - 501 ST. JUDE PLACE - MEMPHIS, TN 38101	62-0646012	501(C)(3)	23,200.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
ST. LAWRENCE UNIVERSITY 23 ROMODA DRIVE CANTON, NY 13617	15-0532239	501(C)(3)	63,334.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR SUPPORT OF THE EXPENDABLE INTERNSHIP AND NATURE UP
ST. PETER'S CHURCH 107 STATE STREET ALBANY, NY 12207	14-1341173	501(C)(3)	18,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
ST. PETER'S HEALTH PARTNERS - SUNNYVIEW HOSPITAL AND REHABILITATION CENTER FOUND - 1270 BELMONT AVENUE - SCHENECTADY, NY	22-2505127	501(C)(3)	207,750.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR LYMPHEDEMA BANDAGING FOR PATIENTS
ST. PETER'S HOSPITAL FOUNDATION, INC. - 310 S. MANNING BOULEVARD - ALBANY, NY 12208	22-2262982	501(C)(3)	41,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE ANNUAL FUND
ST. PIUS X CHURCH 23 CRUMITIE ROAD LOUDONVILLE, NY 12211	14-1387288	501(C)(3)	6,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
ST. STEPHEN'S EPISCOPAL CHURCH 16 ELSMERE AVENUE DELMAR, NY 12054	14-1338350	501(C)(3)	10,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE WINDOWS OVER THE FRONT DOOR IN HONOR OF

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TEXAS WOMEN'S UNIVERSITY PO BOX 425618 DENTON, TX 76204	75-1292762	501(C)(3)	25,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR CHANCELLOR'S CIRCLE
THE ALBANY ACADEMIES 135 ACADEMY ROAD ALBANY, NY 12208	14-1338579	501(C)(3)	13,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE ANNUAL FUND
THE COMMUNITY HOSPICE FOUNDATION 310 S. MANNING BOULEVARD ALBANY, NY 12208	14-1608921	501(C)(3)	15,650.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
THE CORPORATION OF YADDO 312 UNION AVENUE SARATOGA SPRINGS, NY 12866	14-1343055	501(C)(3)	15,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE MARTHA WALSH PULVER POET IN RESIDENCE
THE ELLEN SINOPOLI DANCE COMPANY, INC. - PO BOX 775 - TROY, NY 12181	14-1744836	501(C)(3)	6,500.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
THE FIRST REFORMED CHURCH OF SCHENECTADY - 8 NORTH CHURCH STREET - SCHENECTADY, NY 12305	14-1364528	501(C)(3)	8,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
THE HUMANE FARMING ASSOCIATION PO BOX 3577 SAN RAFAEL, CA 94912	68-0087989	501(C)(3)	5,500.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
THE LAMPLIGHTER FOUNDATION, INC. 110 WASHINGTON AVENUE ALBANY, NY 12210	26-2199680	501(C)(3)	7,500.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
THE OLEY FOUNDATION, INC. 43 NEW SCOTLAND AVENUE ALBANY, NY 12208	13-3194182	501(C)(3)	7,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR TRAVEL GRANTS FOR THE 2025 CONFERENCE

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THE RED BOOKSHELF, INC. 1 STEUBEN PLACE ALBANY, NY 12207	26-1815321	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR HOLIDAY PROGRAMMING
THE TOWN OF LAKE LUZERNE 539 LAKE AVE LAKE LUZERNE, NY 12846	63-0598743	501(C)(3)	25,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR SUPPORT OF THE DESTINATION PLAYGROUND
THE VERO BEACH MUSEUM OF ART 3001 RIVERSIDE PARK DRIVE VERO BEACH, FL 32963	59-1867408	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
THE WORKING WORLD, INC. DBA SEED COMMONS - 228 PARK AVENUE SOUTH - NEW YORK, NY 10003	20-2264584	501(C)(3)	10,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
THINGS OF MY VERY OWN, INC. 243-249 GREEN STREET SCHENECTADY, NY 12305	05-0493369	501(C)(3)	6,100.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
TIVERTON LAND TRUST PO BOX 167 TIVERTON, RI 02878	20-0677815	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE CONSERVATION EASEMENT FOR HICKS FARM.
TRINITY ALLIANCE OF THE CAPITAL REGION - 15 TRINITY PLACE - ALBANY, NY 12202	14-1340122	501(C)(3)	11,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
TRU HEART, INC. 201 PARK AVENUE ALBANY, NY 12202	47-1454179	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
TUPPER ARTS 106 PARK STREET TUPPER LAKE, NY 12986	82-4186197	501(C)(3)	35,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR SUPPORT OF THE RENOVATIONS TO THE

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U.S.S - SLATER DESTROYER ESCORT HISTORICAL MUSEUM - PO BOX 1926 - ALBANY, NY 12201	14-1836568	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE FRANK J LASCH FOUNDATION
UNDERGROUND RAILROAD HISTORY PROJECT OF THE CAPITAL REGION - 194 LIVINGSTON AVENUE - ALBANY, NY 12210	77-0664331	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE 2025 YOUNG ABOLITIONIST LEADERSHIP
UNION COLLEGE 807 UNION STREET SCHENECTADY, NY 12308	14-1338580	501(C)(3)	260,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE ROY M. HERSHEY '68 ENDOWED LEGACY
UNITARIAN UNIVERSALIST ROWE CAMP & CONFERENCE CENTER - PO BOX 273 - ROWE, MA 01367	04-2162408	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
UNITED AGAINST POVERTY 1400 27TH ST. VERO BEACH, FL 32960	11-3697936	501(C)(3)	25,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
UNITED METHODIST CHURCH OF SARATOGA SPRINGS - 175 5TH AVENUE - SARATOGA SPRINGS, NY 12866	14-1364523	501(C)(3)	6,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:OPERATING BUDGET AND THE BUILDING FUND
UNITED TENANTS OF ALBANY 255 ORANGE STREET SUITE 104 ALBANY, NY 12210	14-1340033	501(C)(3)	6,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
UNITED WAY OF THE GREATER CAPITAL REGION, INC. - 1 STEUBEN PL. - ALBANY, NY 12207	14-1364505	501(C)(3)	54,250.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
UNITY HOUSE OF TROY, INC. 2431 6TH AVENUE TROY, NY 12180	23-2378930	501(C)(3)	30,770.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE

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UNIVERSAL PRESERVATION HALL 432 STATE STREET SCHENECTADY, NY 12305	32-0033321	501(C)(3)	15,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
UNIVERSITY OF MICHIGAN 610 E. UNIVERSITY AVENUE ANN ARBOR, MI 48109	38-6006309	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE CENTER FOR THE STUDY OF HIGHER AND
UPPER HUDSON PLANNED PARENTHOOD, INC. - 855 CENTRAL AVENUE FLOOR 3 - ALBANY, NY 12206	14-6000805	501(C)(3)	16,250.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE LEADERSHIP CIRCLE
VANDERHEYDEN HALL, INC. PO BOX 219 WYNANTSILL, NY 12198	14-1338575	501(C)(3)	16,960.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE SYLVAN TUTORING PROGRAM
WAMC FM 318 CENTRAL AVENUE ALBANY, NY 12206	27-1595793	501(C)(3)	6,800.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
WARRIORS ON WHEELS INC. 32 MARWOOD STREET ALBANY, NY 12209	14-1759164	501(C)(3)	10,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
WILD ANIMAL SANCTUARY 1946 COUNTY ROAD 53 KEENESBURG, CO 80643	84-1351483	501(C)(3)	7,500.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
WILDWOOD FOUNDATION 1190 TROY SCHENECTADY ROAD LATHAM, NY 12110	22-2132752	501(C)(3)	15,960.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR THE ANNUAL FUND
WMHT EDUCATIONAL TELECOMMUNICATIONS, INC. - 4 GLOBAL VIEW - TROY, NY 12180	14-1400177	501(C)(3)	30,750.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE

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WOMEN'S CENTER 8230 OLD COURTHOUSE RD, STE. 500 VIENNA, VA 22182	23-7423496	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
WOMEN'S MEDIA CENTER PO BOX 70967 WASHINGTON, DC 20024	38-3727585	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
WOODLAND HILL MONTESSORI SCHOOL 100 MONTESSORI PLACE RENSSELAER, NY 12144	14-1495852	501(C)(3)	5,000.	0.			GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR UNRESTRICTED USE
ADAPTIVE SPORTS FOUNDATION 100 SILVERMAN WAY WINDHAM, NY 12496	14-1823155	501(C)(3)	7,500.	0.			GRANTS DIRECTED BY CFGCR:GENERAL OPERATING
AFRICAN REFLECTIONS FOUNDATION, INC. - 87 CHANCELLOR DRIVE - GUILDERLAND, NY 12871	20-1621143	501(C)(3)	34,900.	0.			GRANTS DIRECTED BY CFGCR:FOR 2 WELLS, 1 GREENHOUSE AND SOCCER SUPPORT
AGRICULTURAL STEWARDSHIP ASSOCIATION - 2531 STATE ROUTE 40 - GREENWICH, NY 12834	22-3084628	501(C)(3)	21,000.	0.			GRANTS DIRECTED BY CFGCR:PREPARING FOR PUBLIC ACCESS AT THE ARGYLE COMMUNITY FOREST
ALBANY BARN INC 56 SECOND STREET ALBANY, NY 12866	74-3186476	501(C)(3)	6,500.	0.			GRANTS DIRECTED BY CFGCR:FOR GIFTED WINTER MARKET 2025 FOR REFRESHMENTS AND STIPENDS
ALBANY COLLEGE OF PHARMACY 48 NORTH PEARL STREET ALBANY, NY 12866	14-1423161	501(C)(3)	107,060.	0.			GRANTS DIRECTED BY CFGCR:FOR SUMMER ART FEST 2025 FOR STIPENDS AND PROMOTION
ALBANY COUNTY HISTORICAL ASSOCIATION TEN BROECK MANSION - 9 TEN BROECK PLACE - ALBANY, NY 12866	14-6048668	501(C)(3)	73,655.	0.			GRANTS DIRECTED BY CFGCR:FOR ALBANY COUNTY, ROAD TO REVOLUTION 1775/2025: TEN BROECK

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ALBANY INSTITUTE OF HISTORY & ART 125 WASHINGTON AVENUE ALBANY, NY 12210	14-1343061	501(C)(3)	48,558.	0.			GRANTS DIRECTED BY CFGCR:FOR 2025 EXHIBITION SEASON COMMUNICATIONS SPONSORSHIP
ALBANY MEDICAL CENTER FOUNDATION 43 NEW SCOTLAND AVENUE ALBANY, NY 12208	14-6023119	501(C)(3)	60,111.	0.			GRANTS DIRECTED BY CFGCR:FOR UNRESTRICTED USE
ALBANY SYMPHONY ORCHESTRA 19 CLINTON AVENUE ALBANY, NY 12207	14-6013010	501(C)(3)	6,654.	0.			GRANTS DIRECTED BY CFGCR:FOR UNRESTRICTED USE
AVILLAGE..., INC. PO BOX 10152 ALBANY, NY 12018	30-0631023	501(C)(3)	25,000.	0.			GRANTS DIRECTED BY CFGCR:FOR THE INNOVATION BLOCKS PROGRAM
BETHESDA HOUSE OF SCHENECTADY, INC. - 834 STATE STREET - SCHENECTADY, NY 12307	31-1645415	501(C)(3)	60,000.	0.			GRANTS DIRECTED BY CFGCR:FOR EXPANDING HOUSING STABILITY AND INTEGRATED HEALTH
BETHLEHEM SENIOR PROJECTS, INC. 445 DELAWARE AVENUE DELMAR, NY 12054	22-2906480	501(C)(3)	20,723.	0.			GRANTS DIRECTED BY CFGCR:FOR UNRESTRICTED USE
BOYS & GIRLS CLUBS OF THE CAPITAL AREA - 21 DELAWARE AVENUE - ALBANY, NY 12210	14-1338574	501(C)(3)	12,500.	0.			GRANTS DIRECTED BY CFGCR:2025 LAWSON LAKE DAY CAMP
BRING ON THE SPECTRUM, INC. 71 FULLER ROAD #6 ALBANY, NY 12205	84-5002321	501(C)(3)	12,400.	0.			GRANTS DIRECTED BY CFGCR:FOR BOTS FAMILY GETAWAY TO ALBANY COUNTY FOR HOTELS AND
CAFFE LENA 47 PHILA STREET SARATOGA SPRINGS, NY 12866	14-1726194	501(C)(3)	36,917.	0.			GRANTS DIRECTED BY CFGCR:FOR UNRESTRICTED USE

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CAMP STOMPING GROUND 3430 BOYHAVEN RD MIDDLE GROVE, NY 12304	81-4475489	501(C)(3)	42,628.	0.			GRANTS DIRECTED BY CFGCR:FOR YOUTH2 - YOUTH HELPING YOUTH
CAPITAL AREA URBAN LEAGUE 45 COLVIN AVENUE ALBANY, NY 12206	27-0209459	501(C)(3)	76,000.	0.			GRANTS DIRECTED BY CFGCR:FOR SPONSORSHIP OF THE 8TH ANNUAL VALUES-VOICE-VIGILANCE
CAPITAL CITY RESCUE MISSION 259 SOUTH PEARL STREET ALBANY, NY 12202	56-2663290	501(C)(3)	31,372.	0.			GRANTS DIRECTED BY CFGCR:FOR UNRESTRICTED USE
CAPITAL DISTRICT LATINOS, INC. 160 CENTRAL AVENUE ALBANY, NY 12202	45-3647494	501(C)(3)	80,000.	0.			GRANTS DIRECTED BY CFGCR:FOR WELLBEING360: COMPREHENSIVE DISEASE PREVENTION PROGRAM
CAPITAL ROOTS 594 RIVER STREET TROY, NY 12180	14-1596291	501(C)(3)	47,034.	0.			GRANTS DIRECTED BY CFGCR:FOR YEAR TWO FUNDING FOR EMPOWERING UNDERSERVED COMMUNITIES:
CAPTAIN COMMUNITY HUMAN SERVICES 543 SARATOGA ROAD GLENNVILLE, NY 12302	14-1637304	501(C)(3)	10,000.	0.			GRANTS DIRECTED BY CFGCR:STREET OUTREACH PROJECT
CATHOLIC CHARITIES TRI-COUNTY SERVICES - 50 HERRICK STREET - RENSSELAER, NY 12144	14-1340033	501(C)(3)	7,500.	0.			GRANTS DIRECTED BY CFGCR:CATHOLIC CHARITIES TRI-COUNTY SERVICES EMERGENCY ASSISTANCE FOR
CENTER FOR LAW AND JUSTICE PINE WEST PLAZA, BUILDING 2 ALBANY, NY 12208	22-3078866	501(C)(3)	5,000.	0.			GRANTS DIRECTED BY CFGCR:FOR MISSISSIPPI DAY
CHASING HEALTH, INC. 33 HAMPSHIRE WAY NISKAYUNA, NY 33637	81-2737937	501(C)(3)	26,860.	0.			GRANTS DIRECTED BY CFGCR:FOR THE STOP HYPERTENSION COMMUNITY PROGRAM

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CITY SCHOOL DISTRICT OF ALBANY 1 ACADEMY PARK ALBANY, NY 12309	14-1537912	501(C)(3)	12,018.	0.			GRANTS DIRECTED BY CFGCR:CSDA MIDDLE SCHOOL SCIENCE: 2025-26 SCIENCE SYMPOSIUM AND STUDENT
COLUMBIA COUNTY SANCTUARY MOVEMENT PO BOX 785 HUDSON, NY 12534	82-1804199	501(C)(3)	15,000.	0.			GRANTS DIRECTED BY CFGCR:DEPORTATION DEFENSE: KNOW YOUR RIGHTS, FAMILY
COMFORT FOOD COMMUNITY PO BOX 86 GREENWICH, NY 12534	46-4583890	501(C)(3)	73,000.	0.			GRANTS DIRECTED BY CFGCR:FOR YEAR TWO FUNDING FOR COMFORT FOOD AS MEDICINE: ENHANCING
COMMUNITY CAREGIVERS 2021 WESTERN AVENUE ALBANY, NY 12534	14-1778951	501(C)(3)	61,000.	0.			GRANTS DIRECTED BY CFGCR:FOR SENIORS CONNECT WEBSITE PROJECT
CONNECT CENTER FOR YOUTH 49 JOHNSTON AVE COHOES, NY 12047	45-4737831	501(C)(3)	15,000.	0.			GRANTS DIRECTED BY CFGCR:FOR YEAR TWO FUNDING FOR THE CONNECT PANTRY
CONSERVATION ALLIES 1630 CONNECTICUT AVE, NW, SUITE 300 WASHINGTON, DC 12047	84-3985727	501(C)(3)	25,000.	0.			GRANTS DIRECTED BY CFGCR:FOR 5 BOREHOLES IN SENEGAL, AFRICA
DOUBLE "H" HOLE IN THE WOODS RANCH 97 HIDDEN VALLEY ROAD LAKE LUZERNE, NY 12846	14-1752888	501(C)(3)	17,000.	0.			GRANTS DIRECTED BY CFGCR:FOR UNRESTRICTED USE
EMPIRE STATE YOUTH ORCHESTRA 45 MACARTHUR DR. SCHENECTADY, NY 12302	22-2317557	501(C)(3)	5,926.	0.			GRANTS DIRECTED BY CFGCR:ESYO CHIME: AMPLIFY OUR VOICE PROJECT
EPILEPSY FOUNDATION OF NORTHEASTERN NEW YORK - 3 WASHINGTON SQUARE - ALBANY, NY 20090	14-1637156	501(C)(3)	11,000.	0.			GRANTS DIRECTED BY CFGCR:FOR THE NATIONAL EPILEPSY FOUNDATION DEVELOPMENT TRAINING

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EQUINOX, INC. 500 CENTRAL AVENUE ALBANY, NY 12206	14-1437421	501(C)(3)	10,210.	0.			GRANTS DIRECTED BY CFGCR:TRANSITIONAL LIVING PROGRAM FOR HOMELESS YOUTH
ERIE CANALWAY HERITAGE FUND, INC. 1 DELAWARE AVENUE COHOES, NY 12206	26-0372982	501(C)(3)	5,000.	0.			GRANTS DIRECTED BY CFGCR:THE ERIE CANAL: AMERICA'S GATEWAY MARKETING CAMPAIGN
FAMILIES IN NEED OF ASSISTANCE 69 BROOKLINE AVE ALBANY, NY 12203	14-1755079	501(C)(3)	7,500.	0.			GRANTS DIRECTED BY CFGCR:FOR UNRESTRICTED USE
FAMILY PROMISE OF THE CAPITAL REGION - 738 NEW SCOTLAND AVENUE - ALBANY, NY 12208	46-2683239	501(C)(3)	8,500.	0.			GRANTS DIRECTED BY CFGCR:FOR UNRESTRICTED USE
FOOD PANTRIES FOR THE CAPITAL DISTRICT, INC. - 32 ESSEX STREET - ALBANY, NY 12206	14-1752164	501(C)(3)	45,000.	0.			GRANTS DIRECTED BY CFGCR:HEALTHY PANTRY INITIATIVE
FRIENDS OF FIVE RIVERS 56 GAME FARM ROAD DELMAR, NY 20854	23-7309978	501(C)(3)	5,500.	0.			GRANTS DIRECTED BY CFGCR:OBSERVING NATURE'S DETAILS: LENSES, PELTS & SKULLS, AND ANIMAL MODELS
FRIENDS OF THACHER STATE PARK 87 NATURE CENTER WAY VOORHEESVILLE, NY 12186	14-1809264	501(C)(3)	20,000.	0.			GRANTS DIRECTED BY CFGCR:FOR REIMAGINING THE EMMA TREADWELL THACHER NATURE CENTER
FRIENDS OF TIVOLI LAKE PRESERVE AND FARM, INC. - 817 LIVINGSTON AVE - ALBANY, NY 12831	14-1747814	501(C)(3)	5,000.	0.			GRANTS DIRECTED BY CFGCR:FLAX-TO-LINEN PROJECT 2025
GRASSLAND BIRD TRUST 12 SPRING STREET SCHUYLERVILLE, NY 12309	27-4846966	501(C)(3)	12,000.	0.			GRANTS DIRECTED BY CFGCR:GENERAL OPERATING

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GRASSROOT GIVERS 522 WASHINGTON AVENUE ALBANY, NY 12203	80-0267317	501(C)(3)	6,000.	0.			GRANTS DIRECTED BY CFGCR:GRASSROOT GIVERS HOME ESSENTIALS PROGRAM EXPANSION
GREATER JOHNSTOWN SCHOOL DISTRICT 400 SOUTH PERRY STREET JOHNSTOWN, NY 12095	20-4846675	501(C)(3)	5,000.	0.			GRANTS DIRECTED BY CFGCR:DISTRICT EDIBLE LEARNING GARDEN
GREENVILLE CENTRAL SCHOOL PO BOX 129 GREENVILLE, NY 12083	57-6000234	501(C)(3)	46,751.	0.			GRANTS DIRECTED BY CFGCR:FOR THE AMOUNT AGREED UPON BY THE TRUSTEES TO SUPPORT THE
HABITAT FOR HUMANITY CAPITAL DISTRICT, INC. - 207 SHERIDAN AVENUE - ALBANY, NY 12210	14-1708404	501(C)(3)	6,681.	0.			GRANTS DIRECTED BY CFGCR:FOR UNRESTRICTED USE
HISTORIC ALBANY FOUNDATION 89 LEXINGTON AVENUE ALBANY, NY 12206	23-7380514	501(C)(3)	21,079.	0.			GRANTS DIRECTED BY CFGCR:FOR UNRESTRICTED USE
HISTORIC CHERRY HILL 523 1/2 SOUTH PEARL STREET ALBANY, NY 12202	14-1482741	501(C)(3)	5,000.	0.			GRANTS DIRECTED BY CFGCR:FOR AUTUMN AT THE HILL: A PROGRAM SERIES PROMOTING REGIONAL
HOMELESS AND TRAVELERS AID SOCIETY (HATAS) - 138 CENTRAL AVENUE - ALBANY, NY 12206	14-1482188	501(C)(3)	5,000.	0.			GRANTS DIRECTED BY CFGCR:CAPITAL REGION FURNITURE BANK
HUDSON HEADWATERS HEALTH NETWORK 9 CAREY ROAD QUEENSBURY, NY 12804	14-1628237	501(C)(3)	40,000.	0.			GRANTS DIRECTED BY CFGCR:FOR YEAR TWO FUNDING FOR FOOD AS MEDICINE
HUDSON TACONIC LANDS PO BOX 790 AVERILL PARK, NY 12018	94-3444825	501(C)(3)	23,000.	0.			GRANTS DIRECTED BY CFGCR:FOREST CONSERVATION CORPS- TEENS EXPLORING AND SERVING RENSSELAER

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INDEPENDENT LIVING CENTER OF THE HUDSON VALLEY, INC. - 15-17 THIRD STREET - TROY, NY 12180	22-2875911	501(C)(3)	10,000.	0.			GRANTS DIRECTED BY CFGCR:GENERAL OPERATING
INNOVATION STATION INC 175 MAIN STREET RAVENA, NY 12143	32-0733921	501(C)(3)	9,550.	0.			GRANTS DIRECTED BY CFGCR:FACILITY EXPANSION TO ACCOMMODATE GROWTH AND ENRICH STEM LEARNING
IPHNY, INC. 176 SHERIDAN AVENUE ALBANY, NY 12210	87-4475140	501(C)(3)	11,000.	0.			GRANTS DIRECTED BY CFGCR:IPH DANIELLE'S HOUSE & EXPANDED SERVICES IN MONTGOMERY COUNTY
JERUSALEM REFORMED CHURCH PO BOX 70 FEURA BUSH, NY 12093	22-2515091	501(C)(3)	8,411.	0.			GRANTS DIRECTED BY CFGCR:FOR UNRESTRICTED USE
JEWISH COMMUNITY CENTER OF SCHENECTADY, INC. - 2565 BALLTOWN ROAD - SCHENECTADY, NY 12309	14-1343041	501(C)(3)	5,000.	0.			GRANTS DIRECTED BY CFGCR:FOR FOUR (4) NEW GLASS BACKBOARDS AND FOUR (4) NEW BASKETBALL POWER
JOSEPH'S HOUSE AND SHELTER 74 FERRY STREET TROY, NY 12180	14-1636163	501(C)(3)	12,034.	0.			GRANTS DIRECTED BY CFGCR:2025 ADMINISTRATIVE EXPENSES FOR HOMELESSNESS PREVENTION
JUNIOR LEAGUE OF ALBANY, INC. P.O. BOX 5533 ALBANY, NY 12205	14-1431718	501(C)(3)	5,623.	0.			GRANTS DIRECTED BY CFGCR:FOR UNRESTRICTED USE
KUPONA FOUNDATION 26 F CONGRESS ST. #352 SARATOGA SPRINGS, NY 12206	26-4371825	501(C)(3)	10,000.	0.			GRANTS DIRECTED BY CFGCR:FOR FISTULA OPERATIONS AT CCBRT IN DER ES SALAAM, TANZANIA
LITERACY VOLUNTEERS CAPITAL REGION 65 FIRST STREET TROY, NY 12180	23-7330119	501(C)(3)	8,822.	0.			GRANTS DIRECTED BY CFGCR:FOR THE CAPITAL REGION CHAMBER LEADERSHIP PROGRAM

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MARIA COLLEGE 700 NEW SCOTLAND AVENUE. ALBANY, NY 12208	14-1463151	501(C)(3)	13,956.	0.			GRANTS DIRECTED BY CFGCR:MARIA COLLEGE'S SURGICAL TECHNOLOGY PROGRAM
MOHAWK HUDSON HUMANE SOCIETY 3 OAKLAND AVENUE MENANDS, NY 12204	14-1338459	501(C)(3)	5,281.	0.			GRANTS DIRECTED BY CFGCR:HIGH SCHOOL VETERINARY INTENSIVES
NEW YORK COUNCIL OF NONPROFITS, INC. - 272 BROADWAY - ALBANY, NY 12204	14-1343047	501(C)(3)	16,500.	0.			GRANTS DIRECTED BY CFGCR:TO SUPPORT SCHOLARSHIPS FOR CAPITAL REGION NONPROFITS TO
NEW YORK FUNDERS ALLIANCE 431 E. FAYETTE STREET SYRACUSE, NY 13202	16-1332634	501(C)(3)	5,000.	0.			GRANTS DIRECTED BY CFGCR:FOR A PARTNER SPONSORSHIP OF THE 2025 CONFERENCE IN ALBANY
NISKAYUNA CENTRAL SCHOOL DISTRICT 1626 BALLTOWN ROAD NISKAYUNA, NY 12309	14-6009381	501(C)(3)	6,956.	0.			GRANTS DIRECTED BY CFGCR:FOR NISKAYUNA HIGH SCHOOL AED TRAINING DEVICES
NISKAYUNA-SCHENECTADY GIRLS WRESTLING BOOSTER CLUB INC. - 2314 BROOKSHIRE DR - NISKAYUNA, NY 12309	92-3619030	501(C)(3)	7,500.	0.			GRANTS DIRECTED BY CFGCR:FOR FREESTYLE WRESTLING MAT
NORTHEASTERN ASSOCIATION OF THE BLIND AT ALBANY, INC. - 301 WASHINGTON AVENUE - ALBANY, NY 12883	14-1338302	501(C)(3)	10,852.	0.			GRANTS DIRECTED BY CFGCR:FOR UNRESTRICTED USE
NORTHERN RIVERS FAMILY OF SERVICES 60 ACADEMY RD ALBANY, NY 12883	14-1646198	501(C)(3)	8,183.	0.			GRANTS DIRECTED BY CFGCR:SCHENECTADY SHORT-TERM SERVICES PROGRAM
OLD SONGS, INC. 37 S MAIN STREET VOORHEESVILLE, NY 12180	22-2173973	501(C)(3)	5,000.	0.			GRANTS DIRECTED BY CFGCR:FOR THE OLD SONGS FESTIVAL OF TRADITIONAL MUSIC AND DANCE

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ORGANIZATION OF ADIRONDACK ROWERS AND SCULLERS, INC. DBA ALBANY ROWING CENTER - P.O. BOX 857 (HUDSON AVENUE) - ALBANY, NY 12309	14-1670428	501(C)(3)	5,000.	0.			GRANTS DIRECTED BY CFGCR:TO SUPPORT THE 2025 HEAD OF THE HUDSON REGATTA
PITNEY MEADOWS COMMUNITY FARM 223 WEST AVE SARATOGA SPRINGS, NY 12866	81-2724904	501(C)(3)	25,000.	0.			GRANTS DIRECTED BY CFGCR:GENERAL OPERATING
PLAYHOUSE STAGE COMPANY 58 REMSEN STREET COHOES, NY 12047	14-1717464	501(C)(3)	15,000.	0.			GRANTS DIRECTED BY CFGCR:FOR THE FREE OUTDOOR SUMMER THEATRE AT PARK PLAYHOUSE
PROFESSOR EDOUARD TITE ALLIANCE FOR LANGUAGE AND LEARNING INC - 357 DELAWARE AVE #11 - DELMAR, NY 12305	14-1602083	501(C)(3)	7,500.	0.			GRANTS DIRECTED BY CFGCR:LANGUAGE LEGACY INITIATIVE
RADIX ECOLOGICAL SUSTAINABILITY CENTER - 59 ELM STREET - ALBANY, NY 12202	27-1216514	501(C)(3)	60,250.	0.			GRANTS DIRECTED BY CFGCR:FOR THE 15TH ANNUAL SOUTH END EARTH DAY
REFUGEE AND IMMIGRANT SUPPORT SERVICES OF EMMAUS, INC. - 240 W LAWRENCE STREET - ALBANY, NY 12208	52-1696721	501(C)(3)	12,750.	0.			GRANTS DIRECTED BY CFGCR:IN HONOR OF GENTILE FURAHA'S PARTICIPATION IN THE
REFUGEE WELCOME CORPORATION 488 ELK STREET ALBANY, NY 12208	81-2233661	501(C)(3)	7,500.	0.			GRANTS DIRECTED BY CFGCR:GENERAL OPERATING
REGIONAL FOOD BANK OF NORTHEASTERN NEW YORK, INC. - 965 ALBANY SHAKER ROAD - LATHAM, NY 12110	22-2470885	501(C)(3)	175,000.	0.			GRANTS DIRECTED BY CFGCR:TO SUPPORT THE NEEDS OF CAPITAL REGION RESIDENTS
RENSSELAER POLYTECHNIC INSTITUTE 110 8TH STREET TROY, NY 12180	14-1340095	501(C)(3)	12,500.	0.			GRANTS DIRECTED BY CFGCR:RPI ENGINEERING AMBASSADORS 2025-2026

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RONALD MCDONALD HOUSE CHARITIES OF THE CAPITAL REGION, INC. - 139 SOUTH LAKE AVENUE - ALBANY, NY 12208	22-2356004	501(C)(3)	10,000.	0.			GRANTS DIRECTED BY CFGCR:HELPING OUR PREEMIES EXCEL (HOPE)
SAFE INC. OF SCHENECTADY 1344 ALBANY STREET SCHENECTADY, NY 12304	14-1794075	501(C)(3)	11,000.	0.			GRANTS DIRECTED BY CFGCR:TO PROVIDE SERVICES FOR HOMELESS NISKAYUNA YOUTH THROUGH THE
SARATOGA P.L.A.N. 112 SPRING STREET SARATOGA SPRINGS, NY 12866	14-1706013	501(C)(3)	27,750.	0.			GRANTS DIRECTED BY CFGCR:FOR LEADERSHIP SARATOGA (\$2,750) AND SUMMER INTERN SUPPORT
SARATOGA REGIONAL YMCA 290 WEST AVENUE SARATOGA SPRINGS, NY 12866	14-1427442	501(C)(3)	5,461.	0.			GRANTS DIRECTED BY CFGCR:FOR YMCA CHILDREN PROGRAMING
SARATOGA SPRINGS RECREATION DEPARTMENT - 15 VANDERBILT AVENUE - SARATOGA SPRINGS, NY 12866	82-5330036	501(C)(3)	21,025.	0.			GRANTS DIRECTED BY CFGCR:FOR THE NEW LED SIGN FOR SARATOGA SPRINGS ICE RINK
SCHENECTADY COMMUNITY ACTION PROGRAM - 913 ALBANY STREET - SCHENECTADY, NY 12866	14-1459277	501(C)(3)	10,000.	0.			GRANTS DIRECTED BY CFGCR:PROJECT LAUNCH
SENIOR CITIZENS CENTER OF SARATOGA SPRINGS, INC. - 290 WEST AVE. SUITE 1 - SARATOGA SPRINGS, NY 12020	14-1458762	501(C)(3)	25,000.	0.			GRANTS DIRECTED BY CFGCR:BUILDING A HEALTHIER SENIOR COMMUNITY
SERVANTS OF THE WORD, DBA THE OPEN DOOR - 226 WARREN STREET - GLENS FALLS, NY 12801	22-2212538	501(C)(3)	7,500.	0.			GRANTS DIRECTED BY CFGCR:A LIFE PATH FOR PEOPLE EXPERIENCING HOMELESSNESS
SERVING CHRIST MINISTRIES, INC. PO BOX 1195 TUTTLE, OK 12801	45-3792761	501(C)(3)	70,450.	0.			GRANTS DIRECTED BY CFGCR:FOR THE NURSES/MIDWIVES/EDUCATION FUND IN GHANA

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SHAKER HERITAGE SOCIETY 25 MEETING HOUSE ROAD ALBANY, NY 12801	22-2186087	501(C)(3)	12,107.	0.			GRANTS DIRECTED BY CFGCR:FOR UNRESTRICTED USE
SIDEWALK WARRIORS - TROY 35 STATE STREET TROY, NY 12180	87-4729754	501(C)(3)	10,000.	0.			GRANTS DIRECTED BY CFGCR:2025 SIDEWALK WARRIORS - TROY THURSDAY DISTRIBUTIONS
SIENA COLLEGE 515 LOUDON ROAD LOUDONVILLE, NY 12211	14-1338498	501(C)(3)	12,500.	0.			GRANTS DIRECTED BY CFGCR:COMMUNITY ENGAGED SUMMER RESEARCH IN FLOOD RESILIENCY AND FLOATING
SOCIAL ENTERPRISE AND TRAINING CENTER - 131 STATE STREET - SCHENECTADY, NY 12305	47-3946521	501(C)(3)	5,000.	0.			GRANTS DIRECTED BY CFGCR:FOR PAYROLL AND STUDENT STIPENDS
SPECIAL OLYMPICS NEW YORK, INC. 94 KARNER ROAD ALBANY, NY 12203	23-7061382	501(C)(3)	10,000.	0.			GRANTS DIRECTED BY CFGCR:GENERAL OPERATING
ST. ANNE INSTITUTE 160 NORTH MAIN AVENUE ALBANY, NY 12206	14-1340098	501(C)(3)	8,688.	0.			GRANTS DIRECTED BY CFGCR:UPDATING STEM AND SCIENCE CURRICULUM FOR TRAUMATIZED YOUTH
ST. MARY'S HEALTHCARE 427 GUY PARK AVE AMSTERDAM, NY 12188	15-0532239	501(C)(3)	15,000.	0.			GRANTS DIRECTED BY CFGCR:ENHANCING THE DELIVERY OF CARE PROVIDED TO BARIATRIC PATIENTS
SUNHEE'S COMMUNITY PLACE, INC. 173 4TH ST TROY, NY 12196	82-5261516	501(C)(3)	10,000.	0.			GRANTS DIRECTED BY CFGCR:RIGHTS AND RESOURCES
THE ALBANY ACADEMIES 135 ACADEMY ROAD ALBANY, NY 12208	14-1338579	501(C)(3)	10,870.	0.			GRANTS DIRECTED BY CFGCR:FOR UNRESTRICTED USE

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THE CHILDREN'S MUSEUM AT SARATOGA 65 SOUTH BROADWAY SARATOGA SPRINGS, NY 12027	14-1739210	501(C)(3)	11,346.	0.			GRANTS DIRECTED BY CFGCR:INSPIRE INNOVATIONS
THE COMMUNITY BUILDERS 33 ARCH STREET BOSTON, MA 02891	04-2324773	501(C)(3)	40,000.	0.			GRANTS DIRECTED BY CFGCR:FOR YEAR TWO FUNDING FOR HEALTH-FULL HOMES: A HOUSING-BASED
THE CORPORATION OF YADDO 312 UNION AVENUE SARATOGA SPRINGS, NY 12866	14-1343055	501(C)(3)	23,618.	0.			GRANTS DIRECTED BY CFGCR:YADDO UNBOUND: RAMP TO CREATIVITY
THE PINE HOLLOW ARBORETUM 34 PINE HOLLOW RD. SLINGERLANDS, NY 12159	26-1815321	501(C)(3)	6,920.	0.			GRANTS DIRECTED BY CFGCR:FOR HORTICULTURAL COLLECTION TREE LABELS
THE RED BOOKSHELF, INC. 1 STEUBEN PLACE ALBANY, NY 12207	81-1450799	501(C)(3)	13,500.	0.			GRANTS DIRECTED BY CFGCR:TO SUPPORT YOUR YEAR-END EFFORTS
THE UNIVERSITY AT ALBANY FOUNDATION - 1400 WASHINGTON AVENUE - ALBANY, NY 12222	14-1503972	501(C)(3)	16,123.	0.			GRANTS DIRECTED BY CFGCR:FOR THE RNA INSTITUTE
THERAPEUTIC HORSES OF SARATOGA 683 RT 29 SARATOGA SPRINGS, NY 12866	82-5164821	501(C)(3)	9,500.	0.			GRANTS DIRECTED BY CFGCR:FOR HARNESSING HOPE: EQUINE ASSISTED LEARNING FOR AT-RISK
TOWN OF BALLSTON 323 CHARLTON ROAD BALLSTON SPA, NY 12029	14-6002074	501(C)(3)	102,072.	0.			GRANTS DIRECTED BY CFGCR:FOR OPERATIONS AND MAINTENANCE EXPENSES INCURRED AT ANCHOR
TOWN OF NISKAYUNA ONE NISKAYUNA CIRCLE NISKAYUNA, NY 12029	14-6002340	501(C)(3)	7,544.	0.			GRANTS DIRECTED BY CFGCR:BASKETBALL HOOPS FOR AVON CREST AND RIVER ROAD PARK

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TRINITY ALLIANCE OF THE CAPITAL REGION - 15 TRINITY PLACE - ALBANY, NY 12202	14-1340122	501(C)(3)	185,851.	0.			GRANTS DIRECTED BY CFGCR: PARTICIPATION AS A PANELIST IN THE CATALYST FOR CHANGE LEADERSHIP
TRINITY LUTHERAN CHURCH 42 GUY PARK AVENUE AMSTERDAM, NY 12202	23-7179485	501(C)(3)	6,500.	0.			GRANTS DIRECTED BY CFGCR: COMFORT ZONE MISSION
TROY PUBLIC LIBRARY FOUNDATION 258 HOOSICK ST., SUITE 201 TROY, NY 12180	22-3118742	501(C)(3)	38,034.	0.			GRANTS DIRECTED BY CFGCR: FOR OPERATING EXPENSES
UNITY HOUSE OF TROY, INC. 2431 6TH AVENUE TROY, NY 12180	23-2378930	501(C)(3)	138,751.	0.			GRANTS DIRECTED BY CFGCR: PARTICIPATION IN THE CATALYSTS FOR CHANGE LEADERSHIP PROGRAM
UPPER HUDSON PLANNED PARENTHOOD 855 CENRAL AVE, FLOOR 3 ALBANY, NY 12206	14-6000805	501(C)(3)	13,623.	0.			GRANTS DIRECTED BY CFGCR: TO PROVIDE HUMANITARIAN SERVICES EDUCATION, HEALTH CARE,
WARRIORS ON WHEELS INC. 32 MARWOOD STREET ALBANY, NY 12209	14-1759164	501(C)(3)	5,000.	0.			GRANTS DIRECTED BY CFGCR: GENERAL OPERATING
WATERVLIET CIVIC CHEST, INC. POST OFFICE BOX 164 WATERVLIET, NY 12189	14-1387856	501(C)(3)	12,500.	0.			GRANTS DIRECTED BY CFGCR: FOR SUMMER FUN IN THE 12189
WHITNEY M. YOUNG, JR. HEALTH CENTER - 920 LARK DRIVE - ALBANY, NY 12207	13-2922147	501(C)(3)	150,000.	0.			GRANTS DIRECTED BY CFGCR: FOR THE HEART SMART HEALTH COLLECTIVE
WILDWOOD FOUNDATION 1190 TROY SCHENECTADY ROAD LATHAM, NY 12110	22-2132752	501(C)(3)	10,000.	0.			GRANTS DIRECTED BY CFGCR: WILDWOOD ADULT EDUCATION PROGRAM

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Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
COLLEGE SCHOLARSHIPS	173	693,324.	0.	APPLIED TUITION	

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION (CFGCR) AWARDS GRANTS FROM ITS DISCRETIONARY COMMUNITY IMPACT FUNDS BASED ON LOCALLY IDENTIFIED NEEDS AND A COMPETITIVE REVIEW PROCESS. GRANTS FROM DONOR ADVISED AND DESIGNATED FUNDS ARE RECOMMENDED BY FUND ADVISORS OR THROUGH GIFT INSTRUMENTS, AND THEN ARE APPROVED BY THE CFGCR BOARD OF DIRECTORS. SUCH RECOMMENDATIONS MAY BE ACCEPTED OR REJECTED, IN WHOLE OR IN PART, BY THE FOUNDATION'S BOARD OF DIRECTORS IN ITS SOLE AND ABSOLUTE DISCRETION.

ALL GRANT RECIPIENTS MUST QUALIFY UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AS A NON-PROFIT ORGANIZATION OR OPERATE UNDER THE FISCAL SPONSORSHIP OF AN ORGANIZATION THAT DOES.

ALL GRANT FUNDS MUST BE USED FOR CHARITABLE, EDUCATIONAL, SCIENTIFIC, LITERARY, CULTURAL, OR OTHER PURPOSES PERMITTED OF A PUBLIC CHARITY (INCLUDING ANY COMBINATION OF SUCH PURPOSES AND ADMINISTRATIVE SUPPORT).

CFGCR REQUIRES ALL GRANT RECIPIENTS TO ACKNOWLEDGE RECEIPT OF THE GRANT

Part IV Supplemental Information

PAYMENT.

FOR GRANTS MADE FROM CFGCR'S COMMUNITY IMPACT FUNDS, ALL GRANT RECIPIENTS MUST SERVE RESIDENTS OF AND BE LOCATED WITHIN THE 11 COUNTY CAPITAL REGION OF NEW YORK STATE. FOR THESE GRANTS, CFGCR REQUESTS A FINAL REPORT FROM EACH GRANT RECIPIENT. THIS REPORT INCLUDES A FINANCIAL ACCOUNTING OF ALL FUNDS RECEIVED AND EXPENDED FOR THE PROGRAMS COVERED BY THE GRANT, AND A NARRATIVE REPORT ON THE PROJECT AND ITS SIGNIFICANCE AND SUCCESS. IN ADDITION, A SITE VISIT MAY BE REQUESTED BY CFGCR DURING THE GRANT PERIOD. THE GRANTEEES ARE GIVEN ADVANCE NOTICE OF SUCH A REQUEST.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: ADIRONDACK FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:IN SUPPORT OF THE CAPITAL IMPROVEMENTS AT THE ELIZABETHTOWN SOCIAL CENTER

NAME OF ORGANIZATION OR GOVERNMENT: ALBANY LAW SCHOOL

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:WOMEN'S LEADERSHIP INITIATIVE ENDOWED FUND & THE WOMEN'S LEADERSHIP OPERATING FUND

NAME OF ORGANIZATION OR GOVERNMENT: BATTENKILL COMMUNITY SERVICES, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR ASSISTANCE WITH THE BLESSING SHACK IN ORDER TO PROVIDE FOOD TO OUR COMMUNITY

NAME OF ORGANIZATION OR GOVERNMENT:

CATHOLIC CHARITIES TRI-COUNTY SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:IN MEMORIES OF MARRIANE KELLY LACEY AND MURIEL ASCHEN TO SUPPORT SENIOR SERVICES ACTIVITIES

NAME OF ORGANIZATION OR GOVERNMENT:

CLINTON COUNTY COMMUNITY COLLEGE FOUNDATION, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:THE COLLEGE ADVANCEMENT PROGRAM FOR CLINTON COUNTY HIGH SCHOOL

NAME OF ORGANIZATION OR GOVERNMENT:

JEWISH FAMILY SERVICES OF NORTHEASTERN NEW YORK

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:FOR GENERAL SUPPORT OF MISSION AND COMMUNITY WORK.

NAME OF ORGANIZATION OR GOVERNMENT: KINGSTON SELF-HELP CENTER, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:A DONATION IN HONOR OF WOLBERG'S 100TH ANNIVERSARY

NAME OF ORGANIZATION OR GOVERNMENT: LEWIS AND CLARK COLLEGE

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS REQUESTED BY DONOR AND APPROVED BY CFGCR:GIFT TO THE URQUHART FAMILY ENDOWED FUND AT LEWIS AND CLARK COLLEGE

NAME OF ORGANIZATION OR GOVERNMENT:

LITERARY CLASSICS OF THE UNITED STATES, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS REQUESTED BY DONOR AND

Part IV Supplemental Information

APPROVED BY CFGCR:FOR SUBVENTION FOR WILLIAM KENNEDY: THE ALBANY TRILOGY

NAME OF ORGANIZATION OR GOVERNMENT: MARIA COLLEGE

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS REQUESTED BY DONOR AND
APPROVED BY CFGCR:FOR THE EMERGENCE FOOD AND RESOURCES AT MARIA
INITIATIVE

NAME OF ORGANIZATION OR GOVERNMENT: OPERATION AT EASE

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS REQUESTED BY DONOR AND
APPROVED BY CFGCR:A DONATION IN HONOR OF WOLBERG'S 100TH ANNIVERSARY

NAME OF ORGANIZATION OR GOVERNMENT: OSWEGO HEALTH FOUNDATION, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS REQUESTED BY DONOR AND
APPROVED BY CFGCR:FOR SUPPORT OF THE RENOVATION OF THE EMERGENCY
DEPARTMENT

NAME OF ORGANIZATION OR GOVERNMENT: PALACE THEATRE

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS REQUESTED BY DONOR AND
APPROVED BY CFGCR:FOR THE COMMUNITY ENGAGEMENT INITIATIVE AND 2026 SEASON

NAME OF ORGANIZATION OR GOVERNMENT: SARATOGA INSTITUTE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS REQUESTED BY DONOR AND
APPROVED BY CFGCR:THE ASSOCIATION FOR THE ADVANCEMENT OF SCIENCE AND
EDUCATION

NAME OF ORGANIZATION OR GOVERNMENT: ST. LAWRENCE UNIVERSITY

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS REQUESTED BY DONOR AND
APPROVED BY CFGCR:FOR SUPPORT OF THE EXPENDABLE INTERNSHIP AND NATURE UP
NORTH PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: ST. STEPHEN'S EPISCOPAL CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS REQUESTED BY DONOR AND
APPROVED BY CFGCR:FOR THE WINDOWS OVER THE FRONT DOOR IN HONOR OF KAREN
KERMANI

NAME OF ORGANIZATION OR GOVERNMENT: TUPPER ARTS

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS REQUESTED BY DONOR AND
APPROVED BY CFGCR:FOR SUPPORT OF THE RENOVATIONS TO THE ADIRONDACK STATE
THEATER

NAME OF ORGANIZATION OR GOVERNMENT:

UNDERGROUND RAILROAD HISTORY PROJECT OF THE CAPITAL REGION

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS REQUESTED BY DONOR AND
APPROVED BY CFGCR:FOR THE 2025 YOUNG ABOLITIONIST LEADERSHIP INSTITUTE

NAME OF ORGANIZATION OR GOVERNMENT: UNION COLLEGE

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS REQUESTED BY DONOR AND
APPROVED BY CFGCR:FOR THE ROY M. HERSHEY '68 ENDOWED LEGACY SCHOLARSHIP

NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF MICHIGAN

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS REQUESTED BY DONOR AND
APPROVED BY CFGCR:FOR THE CENTER FOR THE STUDY OF HIGHER AND PROFESSIONAL
EDUCATION

NAME OF ORGANIZATION OR GOVERNMENT:

ALBANY COUNTY HISTORICAL ASSOCIATION | TEN BROECK MANSION

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS DIRECTED BY CFGCR:FOR ALBANY COUNTY, ROAD TO REVOLUTION 1775/2025: TEN BROECK MANSION JUNETEENTH/OCT PATH THROUGH HISTORY

NAME OF ORGANIZATION OR GOVERNMENT: BETHESDA HOUSE OF SCHENECTADY, INC.
(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS DIRECTED BY CFGCR:FOR EXPANDING HOUSING STABILITY AND INTEGRATED HEALTH SERVICES

NAME OF ORGANIZATION OR GOVERNMENT: BRING ON THE SPECTRUM, INC.
(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS DIRECTED BY CFGCR:FOR BOTS FAMILY GETAWAY TO ALBANY COUNTY FOR HOTELS AND ADVERTISING

NAME OF ORGANIZATION OR GOVERNMENT: CAPITAL AREA URBAN LEAGUE
(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS DIRECTED BY CFGCR:FOR SPONSORSHIP OF THE 8TH ANNUAL VALUES-VOICE-VIGILANCE CONFERENCE ON 8/23/25

NAME OF ORGANIZATION OR GOVERNMENT: CAPITAL ROOTS
(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS DIRECTED BY CFGCR:FOR YEAR TWO FUNDING FOR EMPOWERING UNDERSERVED COMMUNITIES: INCREASING HEALTHY FOOD ACCESS THROUGH MOBILE PRODUCE MARKETS

NAME OF ORGANIZATION OR GOVERNMENT:
CATHOLIC CHARITIES TRI-COUNTY SERVICES
(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS DIRECTED BY CFGCR:CATHOLIC CHARITIES TRI-COUNTY SERVICES EMERGENCY ASSISTANCE FOR THE CAPITAL REGION

NAME OF ORGANIZATION OR GOVERNMENT: CITY SCHOOL DISTRICT OF ALBANY
(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS DIRECTED BY CFGCR:CSDA MIDDLE SCHOOL SCIENCE: 2025-26 SCIENCE SYMPOSIUM AND STUDENT SPACEFLIGHT EXPERIMENTS SUPPLIES

NAME OF ORGANIZATION OR GOVERNMENT: COLUMBIA COUNTY SANCTUARY MOVEMENT
(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS DIRECTED BY CFGCR:DEPORTATION DEFENSE: KNOW YOUR RIGHTS, FAMILY PREPAREDNESS AND RAPID RESPONSE

NAME OF ORGANIZATION OR GOVERNMENT: COMFORT FOOD COMMUNITY
(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS DIRECTED BY CFGCR:FOR YEAR TWO FUNDING FOR COMFORT FOOD AS MEDICINE: ENHANCING COMMUNITY HEALTH AND FOOD SECURITY IN SOUTHERN ADIRONDACKS

NAME OF ORGANIZATION OR GOVERNMENT: GREENVILLE CENTRAL SCHOOL
(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS DIRECTED BY CFGCR:FOR THE AMOUNT AGREED UPON BY THE TRUSTEES TO SUPPORT THE IB FOREIGN LANGUAGE TRIP TO THE METROPOLITAN MUSEUM OF ART

NAME OF ORGANIZATION OR GOVERNMENT: HISTORIC CHERRY HILL
(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS DIRECTED BY CFGCR:FOR AUTUMN AT THE HILL: A PROGRAM SERIES PROMOTING REGIONAL TOURISM AT CHERRY HILL

NAME OF ORGANIZATION OR GOVERNMENT: HUDSON TACONIC LANDS
(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS DIRECTED BY CFGCR:FOREST CONSERVATION CORPS- TEENS EXPLORING AND SERVING RENSSELAER COUNTY PUBLIC LANDS

NAME OF ORGANIZATION OR GOVERNMENT:

Part IV Supplemental Information

JEWISH COMMUNITY CENTER OF SCHENECTADY, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS DIRECTED BY CFGCR:FOR FOUR
(4) NEW GLASS BACKBOARDS AND FOUR (4) NEW BASKETBALL POWER DRIVE SHAFT
HEIGHT ADJUSTERS

NAME OF ORGANIZATION OR GOVERNMENT: KUPONA FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS DIRECTED BY CFGCR:FOR FISTULA
OPERATIONS AT CCBRT IN DER ES SALAAM, TANZANIA (\$7,000) AND THE MABINTI
CENTER IN DAR ES SALAAM, TANZANIA (\$3,000)

NAME OF ORGANIZATION OR GOVERNMENT: NEW YORK COUNCIL OF NONPROFITS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS DIRECTED BY CFGCR:TO SUPPORT
SCHOLARSHIPS FOR CAPITAL REGION NONPROFITS TO ATTEND NYCON'S MAY 21
SUMMIT

NAME OF ORGANIZATION OR GOVERNMENT:

REFUGEE AND IMMIGRANT SUPPORT SERVICES OF EMMAUS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS DIRECTED BY CFGCR:IN HONOR OF
GENTILE FURAHA'S PARTICIPATION IN THE CATALYSTS FOR CHANGE LEADERSHIP
PROGRAM

NAME OF ORGANIZATION OR GOVERNMENT: SAFE INC. OF SCHENECTADY

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS DIRECTED BY CFGCR:TO PROVIDE
SERVICES FOR HOMELESS NISKAYUNA YOUTH THROUGH THE MCINTOSH HOUSE
EMERGENCY SHELTER

NAME OF ORGANIZATION OR GOVERNMENT: SARATOGA P.L.A.N.

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS DIRECTED BY CFGCR:FOR
LEADERSHIP SARATOGA (\$2,750) AND SUMMER INTERN SUPPORT (\$10,000)

NAME OF ORGANIZATION OR GOVERNMENT: SIENA COLLEGE

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS DIRECTED BY CFGCR:COMMUNITY
ENGAGED SUMMER RESEARCH IN FLOOD RESILIENCY AND FLOATING WETLANDS

NAME OF ORGANIZATION OR GOVERNMENT: ST. MARY'S HEALTHCARE

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS DIRECTED BY CFGCR:ENHANCING
THE DELIVERY OF CARE PROVIDED TO BARIATRIC PATIENTS RECEIVING EMERGENCY
SERVICES

NAME OF ORGANIZATION OR GOVERNMENT: THE COMMUNITY BUILDERS

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS DIRECTED BY CFGCR:FOR YEAR
TWO FUNDING FOR HEALTH-FULL HOMES: A HOUSING-BASED INITIATIVE FOR
STABILITY, WELLNESS, AND FOOD SECURITY

NAME OF ORGANIZATION OR GOVERNMENT: THERAPEUTIC HORSES OF SARATOGA

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS DIRECTED BY CFGCR:FOR
HARNESSING HOPE: EQUINE ASSISTED LEARNING FOR AT-RISK YOUTH AND UNIQUE
LEARNERS

NAME OF ORGANIZATION OR GOVERNMENT: TOWN OF BALLSTON

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS DIRECTED BY CFGCR:FOR
OPERATIONS AND MAINTENANCE EXPENSES INCURRED AT ANCHOR DIAMOND PARK
THROUGH OCTOBER 7, 2025

NAME OF ORGANIZATION OR GOVERNMENT:

TRINITY ALLIANCE OF THE CAPITAL REGION

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS DIRECTED BY
CFGCR:PARTICIPATION AS A PANELIST IN THE CATALYST FOR CHANGE LEADERSHIP
PROGRAM

NAME OF ORGANIZATION OR GOVERNMENT: UPPER HUDSON PLANNED PARENTHOOD

(H) PURPOSE OF GRANT OR ASSISTANCE: GRANTS DIRECTED BY CFGCR:TO PROVIDE
HUMANITARIAN SERVICES EDUCATION, HEALTH CARE, EMERGENCY ASSISTANCE,
SOCIAL SERVICES, TO PALESTINE REFUGEES AT THE RECOMMENDATION OF MAGDALENE
MACIAG

SCHEDULE I, PART III:

SCHOLARSHIP PAYMENTS ARE MADE DIRECTLY TO THE SCHOOL AND REQUIRE DUAL
ENDORSEMENT BY THE SCHOOL AND THE ENROLLED STUDENT.

SCHEDULE J
(Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization	THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION, INC.	Employer identification number	14-1505623
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Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| ☐ First-class or charter travel | ☐ Housing allowance or residence for personal use |
| ☐ Travel for companions | ☐ Payments for business use of personal residence |
| ☐ Tax indemnification and gross-up payments | ☐ Health or social club dues or initiation fees |
| ☐ Discretionary spending account | ☐ Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| ☒ Compensation committee | ☐ Written employment contract |
| ☐ Independent compensation consultant | ☒ Compensation survey or study |
| ☒ Form 990 of other organizations | ☒ Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a Receive a severance payment or change-of-control payment?
- b Participate in or receive payment from a supplemental nonqualified retirement plan?
- c Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a The organization?
- b Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a The organization?
- b Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) (Rev. 12-2024)

Part III	Supplemental Information
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Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, line 29 or 30.
Attach to Form 990.

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

OMB No. 1545-0047

2025

Open to Public
Inspection

Name of the organization **THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION, INC.** Employer identification number **14-1505623**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	65	8,811,188.	FAIR MARKET VALUE
10 Securities - Closely held stock	X	1	400,000.	FAIR MARKET VALUE
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other ...				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (.....)				
26 Other (.....)				
27 Other (.....)				
28 Other (.....)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgment 29

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2025 Created 12/29/25

Part II

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also, complete this part for any additional information.

**SCHEDULE O
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization	THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION, INC.	Employer identification number 14-1505623
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FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE COMMUNITY FOUNDATION'S MISSION IS TO STRENGTHEN THE COMMUNITY
THROUGH PHILANTHROPY. THE FOUNDATION DOES THIS IN COLLABORATION WITH
DONORS AND COMMUNITY PARTNERS WHO SHARE ITS VISION FOR COMMUNITY
TRANSFORMATION THROUGH STEWARDSHIP OF CHARITABLE ENDOWMENTS, SUPERIOR
DONOR SERVICES, EFFECTIVE GRANT MAKING, AND LEADERSHIP TO ADDRESS
COMMUNITY NEEDS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE COMMUNITY FOUNDATION'S MISSION IS TO STRENGTHEN THE COMMUNITY
THROUGH PHILANTHROPY. THE FOUNDATION DOES THIS IN COLLABORATION WITH
DONORS AND COMMUNITY PARTNERS WHO SHARE ITS VISION FOR COMMUNITY
TRANSFORMATION THROUGH STEWARDSHIP OF CHARITABLE ENDOWMENTS, SUPERIOR
DONOR SERVICES, EFFECTIVE GRANT MAKING, AND LEADERSHIP TO ADDRESS
COMMUNITY NEEDS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
THE FOUNDATION ADMINISTERS MORE THAN 482 CHARITABLE FUNDS, AND IN
PARTNERSHIP WITH OUR DONORS, PROVIDES LEADERSHIP AND SUPPORT FOR SOME
OF THE CAPITAL REGION'S MOST IMPORTANT HUMAN SERVICE, EDUCATION,
ARTS/CULTURE, COMMUNITY IMPROVEMENT AND HOUSING/SHELTER INITIATIVES.

SINCE OUR FOUNDING IN 1968, THE FOUNDATION HAS AWARDED MORE THAN \$144
MILLION TO SUPPORT THE CAPITAL REGION AND BEYOND. IN 2025, THE
FOUNDATION GRANTED AND FACILITATED OVER \$10.4 MILLION IN 1,720 GRANTS.
OF THESE GRANTS, 264 NONPROFIT PROGRAMS RECEIVED UP TO \$5,000 EACH. THE
TOP FOCUS AREAS TO WHICH GRANTS WERE AWARDED IN 2025 WERE HUMAN
SERVICES, EDUCATION, ARTS/CULTURE/HUMANITIES, HOUSING AND SHELTER, AND
COMMUNITY IMPROVEMENT/CAPACITY BUILDING.

THE FOUNDATION MAINTAINS A FOCUS ON INVESTING IN THE CAPACITY OF LOCAL
NONPROFITS, IN ORDER TO HELP THEM OPERATE AND SERVE THEIR POPULATIONS
MORE EFFECTIVELY. WE ACCOMPLISH THIS THROUGH MODEST GRANT AWARDS TO
SUPPORT INFRASTRUCTURE, HUMAN RESOURCES, AND MANAGEMENT/BOARD TRAINING
UPGRADES, AS WELL AS OUR SUPPORT FOR, AND COORDINATION OF, THE CAPACITY
BUILDING MINI-GRANT PROGRAM. THIS PROGRAM, OFFERED FREE EACH YEAR,
CONSISTS OF A SERIES OF HALF-DAY WORKSHOPS FOR NONPROFIT LEADERS AND
THEIR BOARD MEMBERS ON A WIDE RANGE OF TOPICS, SUCH AS PERSONNEL RISK
MANAGEMENT, REGULATORY CHANGES AFFECTING THE NONPROFIT FIELD,
DEVELOPMENT AND COMMUNICATIONS, AND TECHNOLOGY SOLUTIONS.

THE FOUNDATION AWARDS GRADE SCHOOL, COLLEGE, AND CONTINUING EDUCATION
SCHOLARSHIPS TO HUNDREDS OF LOCAL SCHOLARS EACH YEAR. THE FOUNDATION'S
LARGEST SCHOLARSHIP FUND IS THE PHYLLIS E. DAKE "MAKE YOUR OWN"
SCHOLARSHIP FUND (PED), WHICH PROVIDES COLLEGE FUNDING FOR CHILDREN OF
STEWART'S SHOPS EMPLOYEES. IN 2025, THE PED SCHOLARSHIP GRANTED MORE
THAN \$527,000, COMBINED WITH THE FOUNDATION'S OTHER SCHOLARSHIP FUNDS,
RESULTED IN DISTRIBUTING MORE THAN \$690,000 GRANTED THROUGH 234
SCHOLARSHIPS.

FORM 990, PART VI, SECTION B, LINE 11B:
THE AUDIT COMMITTEE REVIEWED THE DRAFT FORM 990 AND SUGGESTED CHANGES WERE

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) (Rev. 12-2024)

LHA 532211 04-01-25

Name of the organization	THE COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION, INC.	Employer identification number	14-1505623
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MADE. THE FORM 990 WAS PRESENTED TO ALL BOARD MEMBERS ELECTRONICALLY BEFORE FILING. THE IRS FORM 990 IS PREPARED BY CFGCR'S AUDITING FIRM.

FORM 990, PART VI, SECTION B, LINE 12C:

ALL BOARD, COMMITTEE VOLUNTEERS AND STAFF ARE REQUIRED TO COMPLETE THE CODE OF ETHICAL CONDUCT & ANNUAL POTENTIAL CONFLICTS DISCLOSURE STATEMENT ANNUALLY. THE DOCUMENTS ARE DISTRIBUTED PRIOR TO THE FIRST MEETING OF THE BOARD TERM AND ARE KEPT ON FILE AT THE CFGCR OFFICES. CFGCR STAFF MONITOR COMPLIANCE WITH THIS REQUIREMENT.

FORM 990, PART VI, SECTION B, LINE 15A:

THE ORGANIZATION'S CEO IS EVALUATED ANNUALLY BY THE CFGCR EXECUTIVE COMMITTEE. THE CEO COMPLETES A SELF-EVALUATION AND PROVIDES THE COMMITTEE WITH THE CEO JOB DESCRIPTION AND A CHART OF PROGRESS ON STATED GOALS. THE COMMITTEE ALSO RECEIVES COMPARATIVE INFORMATION ON SALARIES OF COMMUNITY FOUNDATION CEOS FROM THE COUNCIL ON FOUNDATION'S COMPENSATION SUMMARY. THE COMMITTEE REVIEWS THE INFORMATION PROVIDED AND COMPLETES A REVIEW OF THE CEO, INCLUDING ANY CHANGES TO SALARY AND BENEFITS BASED ON THE EVALUATION AND BUDGET CONSIDERATIONS. THE EVALUATION IS SHARED WITH THE CEO.

FORM 990, PART VI, SECTION C, LINE 19:

CFGCR MAKES ITS AUDITED FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC ON ITS WEBSITE AND UPON REQUEST. OTHER GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN VALUE OF SPLIT INTEREST FUNDS	-66,157.
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FORM 990, PART XII, LINE 2C:

THE OVERSIGHT AND SELECTION PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

**SCHEDULE R
(Form 990)**

(Rev. January 2025)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

**THE COMMUNITY FOUNDATION FOR THE GREATER
CAPITAL REGION, INC.**

Employer identification number

14-1505623

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
CFCR REAL PROPERTY TRANSACTIONS, LLC - 14-1505623, 2 TOWER PLACE/EXECUTIVE PARK DRIVE, ALBANY, NY 12203	TO MANAGE REAL PROPERTY INTENDED TO BE DONATED TO COMMUNITY FOUNDATION.	NEW YORK			COMMUNITY FOUNDATION FOR THE GREATER CAPITAL REGION, INC.

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) (Rev. 1-2025)

THE COMMUNITY FOUNDATION FOR THE GREATER

Schedule R (Form 990) (Rev. 1-2025) **CAPITAL REGION, INC.**

14-1505623 Page **3**

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	
b Gift, grant, or capital contribution to related organization(s)	1b	
c Gift, grant, or capital contribution from related organization(s)	1c	
d Loans or loan guarantees to or for related organization(s)	1d	
e Loans or loan guarantees by related organization(s)	1e	
f Dividends from related organization(s)	1f	
g Sale of assets to related organization(s)	1g	
h Purchase of assets from related organization(s)	1h	
i Exchange of assets with related organization(s)	1i	
j Lease of facilities, equipment, or other assets to related organization(s)	1j	
k Lease of facilities, equipment, or other assets from related organization(s)	1k	
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	
o Sharing of paid employees with related organization(s)	1o	
p Reimbursement paid to related organization(s) for expenses	1p	
q Reimbursement paid by related organization(s) for expenses	1q	
r Other transfer of cash or property to related organization(s)	1r	
s Other transfer of cash or property from related organization(s)	1s	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Schedule R (Form 990) (Rev. 1-2025) **CAPITAL REGION, INC.**

Page 4

Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Part VII

Provide additional information for responses to questions on Schedule R. See instructions.

Type and Entity: FLOW THROUGH INVESTMEN POST-2017 NO
 Section 382 Annual Limitation

DETAIL CARRYOVER SCHEDULE

Section 382 Carryover

Year Originated	Original Carryover Amount		Total Amount Used	Amount Used for 12/31/20	Amount Used for 12/31/21	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
A	2019	9,198.		9,198.	1,990.	7,208.						
B	2023	41,706.										
C	2024	12,777.										
D	2025	31,967.										
E												
F												
G												
H												
I												
J												
K												
L												
M												
N												
O												
P												
Q												
R												
S												
T												
U												
V												
W												
Detail Type	E S B C	Amount Used for		Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
A												
B												
C												
D												
E												
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N												
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P												
Q												
R												
S												
T												
U												
V												
W												

FEIN: 14-1505623

Type and Entity: CONTRIBUTION - 50% CASH FED

DETAIL CARRYOVER SCHEDULE

Section 382 Annual Limitation

Section 382 Carryover

A
B
C
D
E
F
G
H
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M
N
O
P
Q
R
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T
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V
W

FEIN: 14-1505623

Type and Entity: NOL NY

DETAIL CARRYOVER SCHEDULE

Section 382 Annual Limitation

Section 382 Carryover

[illegible]