

Department of the Treasury  
Internal Revenue Service

or Section 4947(a)(1) Trust Treated as Private Foundation  
▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.

**Open to Public Inspection**

For calendar year **2017** or tax year beginning , **2017**, and ending , **20**

Name of foundation <b>CLOUDSPLITTER FOUNDATION</b>		<b>A Employer identification number</b> 22-2784895
Number and street (or P.O. box number if mail is not delivered to street address)	Room/suite	<b>B Telephone number (see instructions)</b>  (518) 218-1221
62 MOIR ROAD, PO BOX 1357		<b>C</b> If exemption application is pending, check here. . . . . <input type="checkbox"/>
City or town, state or province, country, and ZIP or foreign postal code  SARANAC LAKE, NY 12983		
<b>G</b> Check all that apply:		<b>D</b> 1. Foreign organizations, check here. . . . . <input type="checkbox"/>
<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity	2. Foreign organizations meeting the 85% test, check here and attach computation . . . . . <input type="checkbox"/>
<input type="checkbox"/> Final return	<input type="checkbox"/> Amended return	<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here. . . . . <input type="checkbox"/>
<input type="checkbox"/> Address change	<input type="checkbox"/> Name change	<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here. . . . . <input type="checkbox"/>
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation		
<input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 24,272,860.	<b>J</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)				
<b>Revenue</b>				
1 Contributions, gifts, grants, etc., received (attach schedule)	748,521.			
2 Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch. B. . . . .				
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities . . . .	681,590.	681,590.		ATCH 1
5a Gross rents . . . . .				
b Net rental income or (loss) _____				
6a Net gain or (loss) from sale of assets not on line 10	-227,698.			
b Gross sales price for all assets on line 6a 1,624,727.				
7 Capital gain net income (from Part IV, line 2)		0.		
8 Net short-term capital gain. . . . .				
9 Income modifications . . . . .				
10a Gross sales less returns and allowances . . . . .				
b Less: Cost of goods sold . . . . .				
c Gross profit or (loss) (attach schedule) . . . .				
11 Other income (attach schedule) <u>ATCH 2</u>	486,358.	486,358.		
12 <b>Total.</b> Add lines 1 through 11 . . . . .	1,688,771.	1,167,948.		
<b>Operating and Administrative Expenses</b>				
13 Compensation of officers, directors, trustees, etc. . .	0.			
14 Other employee salaries and wages . . . . .	27,737.			27,737.
15 Pension plans, employee benefits . . . . .				
16a Legal fees (attach schedule) <u>ATCH 3</u>	7,500.			
b Accounting fees (attach schedule) . . . . .				
c Other professional fees (attach schedule) . . .				
17 Interest . . . . .				
18 Taxes (attach schedule) (see instructions) [ 4 ]	12,486.	12,486.		
19 Depreciation (attach schedule) and depletion .				
20 Occupancy . . . . .				
21 Travel, conferences, and meetings . . . . .				
22 Printing and publications . . . . .				
23 Other expenses (attach schedule) <u>ATCH 5</u>	48,369.	3,710.		
24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23. . . . .	96,092.	16,196.		27,737.
25 Contributions, gifts, grants paid . . . . .	1,496,908.			1,496,908.
26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	1,593,000.	16,196.	0.	1,524,645.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements . .	95,771.			
b <b>Net investment income</b> (if negative, enter -0-)		1,151,752.		
c <b>Adjusted net income</b> (if negative, enter -0-)				

<b>Part II Balance Sheets</b>		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	1	Cash - non-interest-bearing . . . . .			
	2	Savings and temporary cash investments . . . . .	1,779,770.	245,494.	245,494.
	3	Accounts receivable ▶ _____ 5,275.			
		Less: allowance for doubtful accounts ▶ _____	3,645.	5,275.	5,275.
	4	Pledges receivable ▶ _____			
		Less: allowance for doubtful accounts ▶ _____			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____			
		Less: allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments - U.S. and state government obligations (attach schedule), . .			
	b	Investments - corporate stock (attach schedule) <b>ATCH 6</b> . . . . .	3,422,466.	2,525,637.	3,814,172.
	c	Investments - corporate bonds (attach schedule), . . . . .			
	11	Investments - land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
12	Investments - mortgage loans . . . . .				
13	Investments - other (attach schedule) . . . . . <b>ATCH 7</b>	12,135,602.	14,435,348.	20,207,919.	
14	Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____				
15	Other assets (describe ▶ _____ )				
16	<b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I) . . . . .	17,341,483.	17,211,754.	24,272,860.	
<b>Liabilities</b>	17	Accounts payable and accrued expenses . . . . .			
	18	Grants payable . . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons, . .			
	21	Mortgages and other notes payable (attach schedule) . . . . .			
	22	Other liabilities (describe ▶ _____ )			
23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	0.	0.		
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here</b> . . . . . <input type="checkbox"/>				
	<b>and complete lines 24 through 26, and lines 30 and 31.</b>				
	24	Unrestricted . . . . .			
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/>				
	<b>and complete lines 27 through 31.</b>				
	27	Capital stock, trust principal, or current funds . . . . .			
28	Paid-in or capital surplus, or land, bldg., and equipment fund . . . . .				
29	Retained earnings, accumulated income, endowment, or other funds . .	17,341,483.	17,211,754.		
30	<b>Total net assets or fund balances</b> (see instructions) . . . . .	17,341,483.	17,211,754.		
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	17,341,483.	17,211,754.		

**Part III Analysis of Changes in Net Assets or Fund Balances**

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	17,341,483.
2	Enter amount from Part I, line 27a . . . . .	<b>2</b>	95,771.
3	Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	
4	Add lines 1, 2, and 3 . . . . .	<b>4</b>	17,437,254.
5	Decreases not included in line 2 (itemize) ▶ <b>ATCH 8</b>	<b>5</b>	225,500.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 . . . .	<b>6</b>	17,211,754.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1 a</b> SEE PART IV SCHEDULE				
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
<b>a</b>				
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.				(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
<b>a</b>				
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
<b>2</b> Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		<b>2</b>	-227,698.
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 . . . . .	{ If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 . . . . . }		<b>3</b>	0.

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

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

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

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2016	1,323,155.	21,746,474.	0.060845
2015	860,742.	23,468,198.	0.036677
2014	1,516,324.	24,782,640.	0.061185
2013	1,098,272.	21,569,833.	0.050917
2012	553,125.	19,012,730.	0.029092
<b>2</b> Total of line 1, column (d) . . . . .			<b>2</b> 0.238716
<b>3</b> Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years . . . . .			<b>3</b> 0.047743
<b>4</b> Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 . . . . .			<b>4</b> 22,645,640.
<b>5</b> Multiply line 4 by line 3. . . . .			<b>5</b> 1,081,171.
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b). . . . .			<b>6</b> 11,518.
<b>7</b> Add lines 5 and 6. . . . .			<b>7</b> 1,092,689.
<b>8</b> Enter qualifying distributions from Part XII, line 4. . . . . If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.			<b>8</b> 1,524,645.

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

<b>1a</b> Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. . . . . Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instructions)		
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b. . . . .	<b>1</b>	11,518.
<b>c</b> All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).		
<b>2</b> Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	<b>2</b>	
<b>3</b> Add lines 1 and 2. . . . .	<b>3</b>	11,518.
<b>4</b> Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	<b>4</b>	0.
<b>5 Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	11,518.
<b>6 Credits/Payments:</b>		
<b>a</b> 2017 estimated tax payments and 2016 overpayment credited to 2017. . . . .	<b>6a</b>	30,387.
<b>b</b> Exempt foreign organizations - tax withheld at source . . . . .	<b>6b</b>	
<b>c</b> Tax paid with application for extension of time to file (Form 8868). . . . .	<b>6c</b>	
<b>d</b> Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b> Total credits and payments. Add lines 6a through 6d . . . . .	<b>7</b>	30,387.
<b>8</b> Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached . . . . .	<b>8</b>	
<b>9 Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	<b>9</b>	
<b>10 Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	<b>10</b>	18,869.
<b>11</b> Enter the amount of line 10 to be: <b>Credited to 2018 estimated tax</b> <input checked="" type="checkbox"/> 18,869. <b>Refunded</b> <input type="checkbox"/> <b>11</b>	<b>11</b>	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .		X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition . . . . . If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .		X
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input checked="" type="checkbox"/> \$ _____ (2) On foundation managers. <input checked="" type="checkbox"/> \$ _____		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input checked="" type="checkbox"/> \$ _____		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . If "Yes," attach a detailed description of the activities.		X
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes . . . . .		X
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .		X
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .		
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . If "Yes," attach the statement required by <i>General Instruction T</i> .		X
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	X	
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
<b>8a</b> Enter the states to which the foundation reports or with which it is registered. See instructions. <input checked="" type="checkbox"/> NY,		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation . . . . .	X	
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV. . . . .		X
<b>10</b> Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . . . . .		X

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-16 containing questions about controlled entities, distributions, public inspection requirements, and foreign interests.

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

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

Table with 3 columns: Question, Yes, No. Rows 1a-4b containing questions about disqualifying acts, taxes on failure to distribute income, and business enterprise interests.

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

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

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

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ATCH 9		0.	0.	0.

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

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

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

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

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

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total number of others receiving over \$50,000 for professional services</b> . . . . . ▶		

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 PLEASE NOTE, THE FOUNDATION IS NOT INVOLVED IN ANY DIRECT CHARITABLE ACTIVITIES. ITS PRIMARY PURPOSE IS TO SUPPORT, BY CONTRIBUTIONS, OTHER CHARITABLE ORGANIZATIONS EXEMPT	
2 UNDER INTERNAL REVENUE CODE SECTION 501(C)(3)	
3	
4	

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 NONE	
2	
All other program-related investments. See instructions.	
3 NONE	
<b>Total.</b> Add lines 1 through 3 . . . . . ▶	

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities . . . . .	<b>1a</b>	21,775,049.
<b>b</b>	Average of monthly cash balances . . . . .	<b>1b</b>	1,215,448.
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, b, and c) . . . . .	<b>1d</b>	22,990,497.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) . . . . .	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets . . . . .	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d . . . . .	<b>3</b>	22,990,497.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	344,857.
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 . . . . .	<b>5</b>	22,645,640.
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5 . . . . .	<b>6</b>	1,132,282.

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

<b>1</b>	Minimum investment return from Part X, line 6 . . . . .	<b>1</b>	1,132,282.
<b>2a</b>	Tax on investment income for 2017 from Part VI, line 5 . . . . .	<b>2a</b>	11,518.
<b>b</b>	Income tax for 2017. (This does not include the tax from Part VI.) . . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b . . . . .	<b>2c</b>	11,518.
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1 . . . . .	<b>3</b>	1,120,764.
<b>4</b>	Recoveries of amounts treated as qualifying distributions . . . . .	<b>4</b>	
<b>5</b>	Add lines 3 and 4 . . . . .	<b>5</b>	1,120,764.
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . . . .	<b>7</b>	1,120,764.

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 . . . . .	<b>1a</b>	1,524,645.
<b>b</b>	Program-related investments - total from Part IX-B . . . . .	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes . . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required) . . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule) . . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 . . . . .	<b>4</b>	1,524,645.
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions . . . . .	<b>5</b>	11,518.
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 . . . . .	<b>6</b>	1,513,127.

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



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7 . . . . .				1,120,764.
2 Undistributed income, if any, as of the end of 2017:				
a Enter amount for 2016 only. . . . .				
b Total for prior years: 20 <u>15</u> , 20 <u>14</u> , 20 <u>13</u> . . . . .				
3 Excess distributions carryover, if any, to 2017:				
a From 2012 . . . . .				
b From 2013 . . . . .		37,051.		
c From 2014 . . . . .		367,344.		
d From 2015 . . . . .				
e From 2016 . . . . .		246,965.		
f <b>Total</b> of lines 3a through e . . . . .	651,360.			
4 Qualifying distributions for 2017 from Part XII, line 4: ▶ \$ <u>1,524,645.</u>				
a Applied to 2016, but not more than line 2a . . . . .				
b Applied to undistributed income of prior years (Election required - see instructions). . . . .				
c Treated as distributions out of corpus (Election required - see instructions) . . . . .				
d Applied to 2017 distributable amount. . . . .				1,120,764.
e Remaining amount distributed out of corpus. . . . .	403,881.			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 <b>Enter the net total of each column as indicated below:</b>				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 . . . . .	1,055,241.			
b Prior years' undistributed income. Subtract line 4b from line 2b. . . . .				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed . . . . .				
d Subtract line 6c from line 6b. Taxable amount - see instructions . . . . .				
e Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see instructions . . . . .				
f Undistributed income for 2017. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018. . . . .				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . .				
8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions) . . . . .				
9 <b>Excess distributions carryover to 2018.</b> Subtract lines 7 and 8 from line 6a . . . . .	1,055,241.			
10 Analysis of line 9:				
a Excess from 2013 . . . . .		37,051.		
b Excess from 2014 . . . . .		367,344.		
c Excess from 2015 . . . . .				
d Excess from 2016 . . . . .		246,965.		
e Excess from 2017 . . . . .		403,881.		

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

NOT APPLICABLE

**1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling . . . . . ▶

**b** Check box to indicate whether the foundation is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
<b>2 a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon:					
<b>a</b> "Assets" alternative test - enter:					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i) . . . . .					
<b>b</b> "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . . . . .					
<b>c</b> "Support" alternative test - enter:					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) . . . . .					
<b>(3)</b> Largest amount of support from an exempt organization . . . . .					
<b>(4)</b> Gross investment income . . . . .					

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)**

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

ERNEST E. KEET

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

N/A

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed:

**b** The form in which applications should be submitted and information and materials they should include:

**c** Any submission deadlines:

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

**Part XV** Supplementary Information *(continued)*

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<p><b>a</b> <i>Paid during the year</i></p> <p>ATCH 10</p>				
<b>Total</b> .....				<b>3a</b> 1,496,908.
<p><b>b</b> <i>Approved for future payment</i></p>				
<b>Total</b> .....				<b>3b</b>





**FORM 990-PF - PART IV  
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME**

Kind of Property		Description				P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj. basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		TOTAL CAPITAL GAIN DISTRIBUTIONS					2,021.	
748,851.		SCHWAB #5937 - LT E (SEE ATTACHMENT) PROPERTY TYPE: SECURITIES 1,023,130.				P	VARIOUS	VARIOUS
							-274,279.	
1,682.		ENERGY TRANSFER EQUITY K-1 ST PROPERTY TYPE: SECURITIES				P	VARIOUS	VARIOUS
							1,682.	
45,156.		ENERGY TRANSFER EQUITY K-1 LT PROPERTY TYPE: SECURITIES				P	VARIOUS	VARIOUS
							45,156.	
8,210.		ENERGY TRANSFER PARTNERS K-1 ST PROPERTY TYPE: SECURITIES				P	VARIOUS	VARIOUS
							8,210.	
9,731.		ENERGY TRANSFER PARTNERS K-1 LT PROPERTY TYPE: SECURITIES				P	VARIOUS	VARIOUS
							9,731.	
809,076.		ENERGY TRANSFER PARTNERS (SEE ATTACHMENT) 829,295.					VARIOUS	VARIOUS
							-20,219.	
TOTAL GAIN(LOSS) .....							<u>-227,698.</u>	

**Schedule of Contributors**

**2017**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
 ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

<b>Name of the organization</b> CLOUDSPLITTER FOUNDATION	<b>Employer identification number</b> 22-2784895
---	---

**Organization type** (check one):

**Filers of:**

**Section:**

- Form 990 or 990-EZ  501(c)( ) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization
- Form 990-PF  501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

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

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

**General Rule**

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

**Special Rules**

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

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

Name of organization **CLOUDSPLITTER FOUNDATION**

Employer identification number  
22-2784895

**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ERNEST E KEET  62 MOIR ROAD, PO BOX 1357  SARANAC LAKE, NY 12983	\$ 748,521.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization CLOUDSPLITTER FOUNDATION

Employer identification number

22-2784895

**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
1	RHHBY (ROCHE ADR) - 6,000 SHARES	\$ 186,780.	12/22/2017
1	SCHB (SCHWAB US BROAD MARKET ETF) - 8,700 SHARES	\$ 561,965.	12/22/2017
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization CLOUDSPLITTER FOUNDATION

Employer identification number  
22-2784895

**Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ► \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

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

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>
SCHWAB #5937 - INTEREST	708.	708.
SCHWAB #5937 - DIVIDENDS	668,969.	668,969.
ENERGY TRANSFER EQUITY - INTEREST	2,574.	2,574.
ENERGY TRANSFER PARTNERS - INTEREST	3,258.	3,258.
ENTERPRISE PRODUCTS PARTNERS - INTEREST	114.	114.
ENERGY TRANSFER EQUITY - DIVIDENDS	2,342.	2,342.
ENERGY TRANSFER PARTNERS - DIVIDENDS	3,625.	3,625.
TOTAL	<u>681,590.</u>	<u>681,590.</u>

ATTACHMENT 2FORM 990PF, PART I - OTHER INCOME

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>
ENTERPRISE PRODUCTS PARTNERS	-11,784.	-11,784.
ENERGY TRANSFER PARTNERS	-8,198.	-8,198.
ENERGY TRANSFER EQUITY	419.	419.
ENERGY TRANSFER PARTNERS - ORD GAIN	505,921.	505,921.
TOTALS	<u>486,358.</u>	<u>486,358.</u>

ATTACHMENT 3

FORM 990PF, PART I - LEGAL FEES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>ADJUSTED NET INCOME</u>	<u>CHARITABLE PURPOSES</u>
ATTORNEY PETER DUMAS	7,500.			
TOTALS	<u>7,500.</u>			

FORM 990PF, PART I - TAXES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>
SCHWAB #5937 - FOREIGN TAXES	12,486.	12,486.
TOTALS	<u>12,486.</u>	<u>12,486.</u>

FORM 990PF, PART I - OTHER EXPENSES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>
SCHWAB #5937 - ADR FEES	3,710.	3,710.
NYS FILING FEE	750.	
PAYROLL PROCESSING FEES	1,643.	
NON-DEDUCTIBLE EXPENSES K-1	217.	
TRAVEL, SUPPLIES, AND GENERAL	42,049.	
TOTALS	<u>48,369.</u>	<u>3,710.</u>

ATTACHMENT 6

FORM 990PF, PART II - CORPORATE STOCK

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
SCHWAB #5937	2,525,637.	3,814,172.
TOTALS	<u>2,525,637.</u>	<u>3,814,172.</u>



ATTACHMENT 7FORM 990PF, PART II - OTHER INVESTMENTS

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
SCHWAB #5937	14,435,348.	20,207,919.
TOTALS	<u>14,435,348.</u>	<u>20,207,919.</u>

ATTACHMENT 8

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

<u>DESCRIPTION</u>	<u>AMOUNT</u>
APPRECIATION OVER DONOR'S COST BASIS OF DONATED STOCKS	225,500.
TOTAL	<u>225,500.</u>

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

ATTACHMENT 9

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT AND OTHER ALLOWANCES</u>
ERNEST E KEET PO BOX 1199, MOIR ROAD LAKE COLBY SARANAC LAKE, NY 12983	TRUSTEE	0.	0.	0.
NANCY R KEET PO BOX 1199, MOIR ROAD LAKE COLBY SARANAC LAKE, NY 12983	TRUSTEE	0.	0.	0.
BONNIE FALKENSTINE KEET 3130 N MAIN STREET SOQUEL, CA 95073	TRUSTEE	0.	0.	0.
JODI COLLINS KEET 22 GLORY ROAD WESTON, CT 06883	TRUSTEE	0.	0.	0.
GLENN A KEET PO BOX 1392 CAPITOLA, CA 95010	TRUSTEE	0.	0.	0.
	GRAND TOTALS	<u>0.</u>	<u>0.</u>	<u>0.</u>

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 10

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
AARCH - ADIRONDACK ARCHITETURAL HERITAGE 1745 MAIN STREET ELIZABETHTOWN KEESEVILLE, NY 12944	NONE PC	GENERAL CHARITABLE	20,000.
ACAP - ADIRONDACK COMMUNITY ACTION PROGRAMS 7572 COURT STREET NEW YORK ELIZABETHTOWN, NY 12932	NONE PC	GENERAL CHARITABLE	10,000.
ACLU FOUNDATION 125 BROAD STREET SUITE 2 NEW YORK, NY 10004	NONE PC	GENERAL CHARITABLE	50,000.
ADIRONDACK CAROUSEL PO BOX 1059 SARANAC LAKE SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	200.
ADIRONDACK CENTER FOR LOON CONSERVATION 15 BROADWAY SARANAC LAKE SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	500.
ADIRONDACK CENTER FOR WRITING 52 MAIN STREET NORTH CREEK SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	2,500.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 10 (CONT'D)

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
ADIRONDACK COMMUNITY OUTREACH CENTER 2718 NY-28 2ND FLOOR NORTH CREEK, NY 12853	NONE PC	GENERAL CHARITABLE	1,000.
ADIRONDACK COUNCIL 103 HAND AVE BLUE MOUNTAIN LAKE ELIZABETHTOWN, NY 12932	NONE PC	GENERAL CHARITABLE	25,000.
ADIRONDACK EXPERIENCE 9097 NY-30 SUITE 3 BLUE MOUNTAIN LAKE, NY 12812	NONE PC	GENERAL CHARITABLE	220,000.
ADIRONDACK EXPLORER FUND 36 CHURCH STREET LAKE PLACID SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	29,000.
ADIRONDACK FOUNDATION PO BOX 288 LAKE PLACID LAKE PLACID, NY 12946	NONE PC	GENERAL CHARITABLE	25,000.
ADIRONDACK FOUNDATION - SMALL GRANTS FOR SMALL CHI PO BOX 288 SARANAC LAKE LAKE PLACID, NY 12946	NONE PC	GENERAL CHARITABLE	10,000.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 10 (CONT'D)

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
ADIRONDACK HAMLETS TO HUTS 47 MAIN STREET SARANAC LAKE SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	20,000.
ADIRONDACK HEALTH FOUNDATION PO BOX 120 KEENE VALLEY SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	250,000.
ADIRONDACK LAND TRUST PO BOX 65 LAKE GEORGE KEENE VALLEY, NY 12943	NONE PC	GENERAL CHARITABLE	25,000.
ADIRONDACK MOUNTAIN CLUB 814 GOGGINS ROAD SARANAC LAKE LAKE GEORGE, NY 12845	NONE PC	GENERAL CHARITABLE	25,000.
ADIRONDACK NORTH COUNTRY ASSOCIATION 67 MAIN STREET NEWCOMB SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	2,500.
ADIRONDACK PARK INSTITUTE PO BOX 67 SUITE 201 NEWCOMB, NY 12852	NONE PC	GENERAL CHARITABLE	1,000.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 10 (CONT'D)

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
ADIRONDACK PUBLIC OBSERVATORY 178 BIG WOLF RD PAUL SMITHS TUPPER LAKE, NY 12986	NONE PC	GENERAL CHARITABLE	6,000.
ADIRONDACK RESEARCH CONSORTIUM PO BOX 96 JOHNSBURG PAUL SMITHS, NY 12970	NONE PC	GENERAL CHARITABLE	2,500.
ADIRONDACK TREKS PO BOX 23 SARANAC LAKE JOHNSBURG, NY 12843	NONE PC	GENERAL CHARITABLE	4,500.
ADKACTION.ORG PO BOX 655 MATTAPoisETT SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	17,000.
ALL HANDS VOLUNTEERS 8 COUNTY ROAD, STE 6 WASHINGTON MATTAPoisETT, MA 02739	NONE PC	GENERAL CHARITABLE	25,000.
AMERICAN IMMIGRATION COUNCIL 1331 G ST. NW WILMINGTON WASHINGTON, DC 20005	NONE PC	GENERAL CHARITABLE	20,000.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 10 (CONT'D)

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
AUSABLE RIVER ASSOCIATION 1181 HASELTON ROAD SUITE 200 WILMINGTON, NY 12997	NONE PC	GENERAL CHARITABLE	15,000.
BALLARD PARK FOUNDATION PO BOX 531 LAKE PLACID WESTPORT, NY 12993	NONE PC	GENERAL CHARITABLE	2,500.
BARKEATER TRAILS ALLIANCE PO BOX 843 NORTHAMPTON LAKE PLACID, NY 12946	NONE PC	GENERAL CHARITABLE	10,000.
BILL OF RIGHTS DEFENSE COMMITTEE 8 BRIDGE ST NORTHAMPTON, MA 01060	NONE PC	GENERAL CHARITABLE	1,000.
BLUSEED STUDIOS 24 CEDAR STREET NEW YORK SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	15,500.
CENTER FOR CONSTITUTIONAL RIGHTS 666 BROADWAY NEW YORK NEW YORK, NY 10012	NONE PC	GENERAL CHARITABLE	30,000.



FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 10 (CONT'D)

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
CENTRAL PARK CONSERVANCY 14 E 60TH STREET 7TH FLOOR NEW YORK, NY 10022	NONE PC	GENERAL CHARITABLE	250.
CHAMPLAIN AREA TRAILS 6482 MAIN STREET MINNEAPOLIS WESTPORT, NY 12993	NONE PC	GENERAL CHARITABLE	20,000.
CHARLES BABBAGE INSTITUTE 200 OAK ST, SE STE 500 SARANAC LAKE MINNEAPOLIS, MN 55455	NONE PC	GENERAL CHARITABLE	600.
COLBY FOUNDATION PO BOX 934 BAKERS MILLS SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	20,000.
CREATIVE HEALING CONNECTIONS PO BOX 69 NEW YORK BAKERS MILLS, NY 12811	NONE PC	GENERAL CHARITABLE	3,000.
CWS (CROP WALK) 475 RIVERSIDE DRIVE LAKE PLACID NEW YORK, NY 10115	NONE PC	GENERAL CHARITABLE	250.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 10 (CONT'D)

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
DIGITAL ABRAHAM 4 BARKEATER WAY SUITE 700 LAKE PLACID, NY 12946	NONE PC	GENERAL CHARITABLE	7,500.
DOCTORS WITHOUT BORDERS 333 7TH AVE SARANAC LAKE NEW YORK, NY 10001	NONE PC	GENERAL CHARITABLE	500.
ECUMENICAL COUNCIL OF SARANAC LAKE PO BOX 194 SAN FRANCISCO SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	6,640.
ELECTRONIC FRONTIER FOUNDATION 815 EDDY STREET ALBANY SAN FRANCISCO, CA 94109	NONE PC	GENERAL CHARITABLE	15,000.
ENVIRONMENTAL ADVOCATES OF NEW YORK 353 HAMILTON ST NEW YORK ALBANY, NY 12210	NONE PC	GENERAL CHARITABLE	1,000.
ENVIRONMENTAL DEFENSE FUND 257 PARK AVENUE SOUTH ELIZABETHTOWN NEW YORK, NY 10010	NONE PC	GENERAL CHARITABLE	10,000.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 10 (CONT'D)

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
FAMILIES FIRST IN ESSEX COUNTY 196 WATER ST SARANAC LAKE ELIZABETHTOWN, NY 12932	NONE PC	GENERAL CHARITABLE	500.
FIRST NIGHT SARANAC LAKE PO BOX 326 TICONDEROGA SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	2,500.
FORT TICONDEROGA ASSOCIATION PO BOX 390 LAKE PLACID TICONDEROGA, NY 12883	NONE PC	GENERAL CHARITABLE	1,000.
FRIENDS - LAKE PLACID ELEMENTARY SCHOOL PLAYGROUND 318 OLD MILITARY ROAD SARANAC LAKE LAKE PLACID, NY 12946	NONE PC	GENERAL CHARITABLE	10,000.
FRIENDS OF EAGLE ISLAND 442 GILPIN BAY ROAD SCHROON LAKE SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	20,000.
FRIENDS OF SCHROON LAKE PUBLIC LIBRARY 15 LELAND AVENUE RAQUETTE LAKE SCHROON LAKE, NY 12870	NONE PC	GENERAL CHARITABLE	13,700.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 10 (CONT'D)

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
GREAT CAMP SAGAMORE PO BOX 40 QUEENSBURY RAQUETTE LAKE, NY 13436	NONE PC	GENERAL CHARITABLE	500.
HIGH PEAKS HOSPICE 79 GLENWOOD AVENUE SARANAC LAKE QUEENSBURY, NY 12804	NONE PC	GENERAL CHARITABLE	2,000.
HISTORIC SARANAC LAKE 89 CHURCH STREET #2 SARANAC LAKE SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	35.
HOMEWARD BOUND ANDIRODACKS 81 MAIN STREET QUEENSBURY SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	5,000.
HUDSON HEADWATERS FOUNDATION 9 CAREY ROAD WESTPORT QUEENSBURY, NY 12804	NONE PC	GENERAL CHARITABLE	500.
JOHN BROWN LIVES PO BOX 357 KEENE VALLEY WESTPORT, NY 12993	NONE PC	GENERAL CHARITABLE	2,250.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 10 (CONT'D)

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
KEENE VALLEY LIBRARY ASSOCIATION 1796 NY-73 LAKE PLACID KEENE VALLEY, NY 12943	NONE PC	GENERAL CHARITABLE	25,000.
LAKE PLACID ARTS & HUMANITIES 2693 MAIN STREET LAKE PLACID LAKE PLACID, NY 12946	NONE PC	GENERAL CHARITABLE	150.
LAKE PLACID CENTER FOR THE ARTS 17 ALGONQUIN DRIVE LAKE PLACID LAKE PLACID, NY 12946	NONE PC	GENERAL CHARITABLE	500.
LAKE PLACID OLYMPIC MUSEUM (ORDA) 2634 MAIN STREET LAKE PLACID LAKE PLACID, NY 12946	NONE PC	GENERAL CHARITABLE	1,500.
LAKE PLACID OUTING CLUB 34 SCHOOL STREET LAKE PLACID LAKE PLACID, NY 12946	NONE PC	GENERAL CHARITABLE	2,500.
LAKE PLACID SINFONIETTA 17 ALGONQUIN DRIVE TROY LAKE PLACID, NY 12946	NONE PC	GENERAL CHARITABLE	10,000.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 10 (CONT'D)

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
LITERACY VOLUNTEERS 71 FIRST STREET LAKE PLACID TROY, NY 12180	NONE PC	GENERAL CHARITABLE	3,000.
MERCY CARE OF THE ADIRONDACKS 185 OLD MILITARY ROAD LOS ANGELES LAKE PLACID, NY 12946	NONE PC	GENERAL CHARITABLE	5,000.
NATIONAL IMMIGRATION LAW CENTER 3450 WILSHIRE BOULEVARD #108-62 WASHINGTON LOS ANGELES, CA 90010	NONE PC	GENERAL CHARITABLE	40,000.
NATIONAL PARKS FOUNDATION 1201 EYE ST NW CANTON WASHINGTON, DC 20005	NONE PC	GENERAL CHARITABLE	2,000.
NORTH COUNTRY PUBLIC RADIO 80 E MAIN ST #2 LAKE PLACID CANTON, NY 13617	NONE PC	GENERAL CHARITABLE	25,000.
NORTH COUNTRY SCHOOL 4382 CASCADE ROAD LAKE PLACID LAKE PLACID, NY 12946	NONE PC	GENERAL CHARITABLE	1,500.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 10 (CONT'D)

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
NORTHERN FOREST ATLAS FOUNDATION PO BOX 288 WAITSFIELD LAKE PLACID, NY 12946	NONE PC	GENERAL CHARITABLE	50,000.
NORTHERN FOREST CANOE TRAIL 8 STATE ROUTE 17 CONCORD WAITSFIELD, VT 05673	NONE PC	GENERAL CHARITABLE	1,500.
NORTHERN FOREST CENTER PO BOX 210 SARANAC LAKE CONCORD, NH 03302	NONE PC	GENERAL CHARITABLE	1,000.
NOTHERN LIGHTS SCHOOL 57 CHURCH STREET WASHINGTON SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	7,000.
NPR NATIONAL PUBLIC RADIO 1111 NORTH CAPITOL STREET NW NEW YORK WASHINGTON, DC 20002	NONE PC	GENERAL CHARITABLE	5,000.
NRDC NATIONAL RESOURCES DEFENSE COUNCIL 40 WEST 20TH STREET WILMINGTON NEW YORK, NY 10011	NONE PC	GENERAL CHARITABLE	15,000.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 10 (CONT'D)

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
NYSEF NEW YORK SKI EDUCATIONAL FOUNDATION 5021 STATE ROUTE 86 ALBANY WILMINGTON, NY 12997	NONE PC	GENERAL CHARITABLE	20,000.
PARKS & TRAILS NY 29 ELK ST PAUL SMITHS ALBANY, NY 12207	NONE PC	GENERAL CHARITABLE	5,000.
PAUL SMITHS COLLEGE PO BOX 265 SARANAC LAKE PAUL SMITHS, NY 12970	NONE PC	GENERAL CHARITABLE	7,000.
PENDRAGON THEATRE 15 BRANDY BROOK AVENUE NEW YORK SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	18,000.
PREP FOR PREP 328 WEST 71ST ST NEW YORK NEW YORK, NY 10023	NONE PC	GENERAL CHARITABLE	1,000.
PRO PUBLICA 155 AVE AMERICA WASHINGTON NEW YORK, NY 10013	NONE PC	GENERAL CHARITABLE	10,000.



FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 10 (CONT'D)

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
RAIL TO TRAILS CONSERVANCY 2121 WARD COURT 13TH FLOOR WASHINGTON, DC 20037	NONE PC	GENERAL CHARITABLE	1,000.
REGIONAL FOOD BANK OF NE NEW YORK 965 ALBANY SHAKER RD SARANAC LAKE LATHAM, NY 12110	NONE PC	GENERAL CHARITABLE	5,000.
SARANAC LAKE ADULT CENTER 135 BROADWAY STREET SARANAC LAKE SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	4,000.
SARANAC LAKE FREE LIBRARY 109 MAIN ST SARANAC LAKE SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	500.
SARANAC LAKE ROTARY 36 BROADWAY SARANAC LAKE SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	33,000.
SARANAC LAKE VOLUNTEER FIRE DEPT 100 BROADWAY SARANAC LAKE SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	200.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 10 (CONT'D)

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
SARANAC LAKE VOLUNTEER RESCUE SQUAD 100 BROADWAY SARANAC LAKE SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	200.
SARANAC LAKE YOUNG ARTS ASSOCIATION PO BOX 1130 SARANAC LAKE SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	500.
SARANAC LAKE YOUTH CENTER PO BOX 1003 SARANAC LAKE SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	2,000.
SCHROON LAKE CENTRAL SCHOOL 79 CANARAS AVENUE SCHROON LAKE SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	1,000.
SEAGLE MUSIC COLONY 999 CHARLEY HILL ROAD TUPPER LAKE SCHROON LAKE, NY 12870	NONE PC	GENERAL CHARITABLE	5,000.
SHINGLE SHANTY PRESERVE AND RESEARCH STATION PO BOX 732 SARANAC LAKE TUPPER LAKE, NY 12986	NONE PC	GENERAL CHARITABLE	2,500.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 10 (CONT'D)

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
SLAYP SARANAC LAKE AREA YOUTH PROGRAM 141 PETROVA AVENUE SARANAC LAKE SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	5,000.
SLDC SARANAC LAKE LOCAL DEVELOPMENT CORPORATION 39 MAIN STREET PLATTSBURG SARANAC LAKE, NY 12983	NONE PC	GENERAL CHARITABLE	35,000.
STRAND CENTER FOR THE ARTS 23 BRINKERHOFF STREET CANTON PLATTSBURG, NY 12901	NONE PC	GENERAL CHARITABLE	25,000.
TAUNY - TRADITIONAL ARTS IN UPSTATE NY 53 MAIN STREET TUPPER LAKE CANTON, NY 13617	NONE PC	GENERAL CHARITABLE	5,000.
THE ADIRONDACK ARC 12 MOHAWK STREET OLDE FORGE TUPPER LAKE, NY 12986	NONE PC	GENERAL CHARITABLE	38,500.
THE ARTS GUILD OF OLD FORGE 3273 STATE ROUTE 28 SARANAC LAKE OLDE FORGE, NY 13420	NONE	GENERAL CHARITABLE	2,000.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 10 (CONT'D)

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
THE BRIGID PROJECT 907 CASEY ROAD SARANAC LAKE SARANAC LAKE, NY 12981	NONE	GENERAL CHARITABLE	3,700.
THE COMMUNITY LUNCHBOX 136 MAIN STREET WESTPORT SARANAC LAKE, NY 12983	NONE	GENERAL CHARITABLE	2,000.
THE DEPOT THEATRE 6705 MAIN STREET SARANAC LAKE WESTPORT, NY 12993	NONE	GENERAL CHARITABLE	2,000.
THE FIRST PRESBYTERIAN CHURCH OF SARANAC LAKE 57 CHURCH STREET NORTH CREEK SARANAC LAKE, NY 12983	NONE	GENERAL CHARITABLE	10,000.
TOWN OF JOHNSBURG LIBRARY 219 MAIN STREET SARANAC LAKE NORTH CREEK, NY 12853	NONE	GENERAL CHARITABLE	3,000.
TRUDEAU INSTITUTE 154 ALGONQUIN AVENUE UPPER JAY SARANAC LAKE, NY 12983	NONE	GENERAL CHARITABLE	9,233.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 10 (CONT'D)

<u>RECIPIENT NAME AND ADDRESS</u>	<u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF GRANT OR CONTRIBUTION</u>	<u>AMOUNT</u>
UPPER JAY ART CENTER 12198 OLD RTE 9N SARANAC LAKE UPPER JAY, NY 12987	NONE	GENERAL CHARITABLE	6,000.
VILLAGE IMPROVEMENT SOCIETY PO BOX 702 ESSEX SARANAC LAKE, NY 12983	NONE	GENERAL CHARITABLE	500.
WHALLONSBURG GRANGE HALL 1610 NY-22 TUPPER LAKE ESSEX, NY 12936	NONE	GENERAL CHARITABLE	20,000.
WILD CENTER 45 MUSEUM DRIVE TUPPER LAKE, NY 12986	NONE	GENERAL CHARITABLE	10,000.
		TOTAL CONTRIBUTIONS PAID	<u>1,496,908.</u>

FORM 990-PF, PART XVI-A - ANALYSIS OF OTHER REVENUE

ATTACHMENT 11

<u>DESCRIPTION</u>	<u>BUSINESS CODE</u>	<u>AMOUNT</u>	<u>EXCLUSION CODE</u>	<u>AMOUNT</u>	<u>RELATED OR EXEMPT FUNCTION INCOME</u>
ENERGY TRANSFER EQUITY			01	419.	
ENERGY TRANSFER PARTNERS LP			01	497,723.	
ENTERPRISE PRODUCTS PARTNERS LP			01	-11,784.	
TOTALS				<u>486,358.</u>	

**SCHEDULE D  
(Form 1041)**

Department of the Treasury  
Internal Revenue Service

**Capital Gains and Losses**

▶ Attach to Form 1041, Form 5227, or Form 990-T.  
▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.  
▶ Go to [www.irs.gov/F1041](http://www.irs.gov/F1041) for instructions and the latest information.

OMB No. 1545-0092

**2017**

Name of estate or trust

CLOUDSPLITTER FOUNDATION

Employer identification number

22-2784895

**Note:** Form 5227 filers need to complete *only* Parts I and II.

**Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less**

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>1a</b> Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.				
<b>1b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked . . . . .				
<b>2</b> Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked . . . . .				
<b>3</b> Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked . . . . .	9,892.			9,892.
<b>4</b> Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 . . . . .				<b>4</b>
<b>5</b> Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts . . . . .				<b>5</b>
<b>6</b> Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2016 Capital Loss Carryover Worksheet . . . . .				<b>6</b> ( )
<b>7</b> <b>Net short-term capital gain or (loss).</b> Combine lines 1a through 6 in column (h). Enter here and on line 17, column (3) on the back . . . . . ▶				<b>7</b> 9,892.

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year**

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>8a</b> Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.				
<b>8b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked . . . . .	809,076.	829,295.		-20,219.
<b>9</b> Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked . . . . .	748,851.	1,023,130.		-274,279.
<b>10</b> Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked . . . . .	54,887.			54,887.
<b>11</b> Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 . . . . .				<b>11</b>
<b>12</b> Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts . . . . .				<b>12</b>
<b>13</b> Capital gain distributions . . . . .				<b>13</b> 2,021.
<b>14</b> Gain from Form 4797, Part I . . . . .				<b>14</b>
<b>15</b> Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2016 Capital Loss Carryover Worksheet . . . . .				<b>15</b> ( )
<b>16</b> <b>Net long-term capital gain or (loss).</b> Combine lines 8a through 15 in column (h). Enter here and on line 18a, column (3) on the back . . . . . ▶				<b>16</b> -237,590.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2017

<b>Part III Summary of Parts I and II</b>		(1) Beneficiaries' (see instr.)	(2) Estate's or trust's	(3) Total
<b>Caution:</b> Read the instructions before completing this part.				
<b>17</b>	<b>Net short-term gain or (loss).</b> . . . . .	<b>17</b>		9,892.
<b>18</b>	<b>Net long-term gain or (loss):</b>			
a	Total for year . . . . .	<b>18a</b>		-237,590.
b	Unrecaptured section 1250 gain (see line 18 of the wrksh.) . . . . .	<b>18b</b>		
c	28% rate gain . . . . .	<b>18c</b>		
<b>19</b>	<b>Total net gain or (loss).</b> Combine lines 17 and 18a. . . . . ▶	<b>19</b>		-227,698.

**Note:** If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a). If lines 18a and 19, column (2), are net gains, go to Part V, and **don't** complete Part IV. If line 19, column (3), is a net loss, complete Part IV and the **Capital Loss Carryover Worksheet**, as necessary.

<b>Part IV Capital Loss Limitation</b>			
<b>20</b>	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the <b>smaller</b> of:		
a	The loss on line 19, column (3) or b \$3,000 . . . . .	<b>20</b>	( 3,000. )

**Note:** If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the **Capital Loss Carryover Worksheet** in the instructions to figure your capital loss carryover.

**Part V Tax Computation Using Maximum Capital Gains Rates**

**Form 1041 filers.** Complete this part **only** if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero.

**Caution:** Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if:

- Either line 18b, col. (2) or line 18c, col. (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.

**Form 990-T trusts.** Complete this part **only** if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if either line 18b, col. (2) or line 18c, col. (2) is more than zero.

<b>21</b>	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34). . . . .	<b>21</b>		
<b>22</b>	Enter the <b>smaller</b> of line 18a or 19 in column (2) but not less than zero. . . . .	<b>22</b>		
<b>23</b>	Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T) . . . . .	<b>23</b>		
<b>24</b>	Add lines 22 and 23 . . . . .	<b>24</b>		
<b>25</b>	If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0- . . . . . ▶	<b>25</b>		
<b>26</b>	Subtract line 25 from line 24. If zero or less, enter -0- . . . . .	<b>26</b>		
<b>27</b>	Subtract line 26 from line 21. If zero or less, enter -0- . . . . .	<b>27</b>		
<b>28</b>	Enter the <b>smaller</b> of the amount on line 21 or \$2,550 . . . . .	<b>28</b>		
<b>29</b>	Enter the <b>smaller</b> of the amount on line 27 or line 28 . . . . .	<b>29</b>		
<b>30</b>	Subtract line 29 from line 28. If zero or less, enter -0-. This amount is taxed at 0% . . . . . ▶	<b>30</b>		
<b>31</b>	Enter the <b>smaller</b> of line 21 or line 26 . . . . .	<b>31</b>		
<b>32</b>	Subtract line 30 from line 26 . . . . .	<b>32</b>		
<b>33</b>	Enter the <b>smaller</b> of line 21 or \$12,500 . . . . .	<b>33</b>		
<b>34</b>	Add lines 27 and 30 . . . . .	<b>34</b>		
<b>35</b>	Subtract line 34 from line 33. If zero or less, enter -0- . . . . .	<b>35</b>		
<b>36</b>	Enter the <b>smaller</b> of line 32 or line 35 . . . . .	<b>36</b>		
<b>37</b>	Multiply line 36 by 15% (0.15) . . . . . ▶	<b>37</b>		
<b>38</b>	Enter the amount from line 31 . . . . .	<b>38</b>		
<b>39</b>	Add lines 30 and 36 . . . . .	<b>39</b>		
<b>40</b>	Subtract line 39 from line 38. If zero or less, enter -0- . . . . .	<b>40</b>		
<b>41</b>	Multiply line 40 by 20% (0.20) . . . . . ▶	<b>41</b>		
<b>42</b>	Figure the tax on the amount on line 27. Use the 2017 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) . . . . .	<b>42</b>		
<b>43</b>	Add lines 37, 41, and 42 . . . . .	<b>43</b>		
<b>44</b>	Figure the tax on the amount on line 21. Use the 2017 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) . . . . .	<b>44</b>		
<b>45</b>	<b>Tax on all taxable income.</b> Enter the <b>smaller</b> of line 43 or line 44 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 36) . . . . . ▶	<b>45</b>		



Department of the Treasury  
Internal Revenue Service

▶ Go to [www.irs.gov/Form8949](http://www.irs.gov/Form8949) for instructions and the latest information.  
▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Attachment  
Sequence No. **12A**

Name(s) shown on return CLOUDSPLITTER FOUNDATION	Social security number or taxpayer identification number 22-2784895
---	--

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

**Part I Short-Term.** Transactions involving capital assets you held 1 year or less are short term. For long-term transactions, see page 2.

**Note:** You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

**You must check Box A, B, or C below. Check only one box.** If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (B) Short-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
- (C) Short-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the <b>Note</b> below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). <b>See the separate instructions.</b>		(h) <b>Gain or (loss).</b> Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	ENERGY TRANSFER EQUITY K-1 ST	VARIOUS	VARIOUS	1,682.				1,682.
	ENERGY TRANSFER PARTNERS K-1 ST	VARIOUS	VARIOUS	8,210.				8,210.
<b>2 Totals.</b>	Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, <b>line 1b</b> (if <b>Box A</b> above is checked), <b>line 2</b> (if <b>Box B</b> above is checked), or <b>line 3</b> (if <b>Box C</b> above is checked) ▶			9,892.				9,892.

**Note:** If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

**Social security number or taxpayer identification number**

CLOUDSPLITTER FOUNDATION

22-2784895

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

**Part II Long-Term.** Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

**Note:** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

**You must check Box D, E, or F below. Check only one box.** If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D)** Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (E)** Long-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
- (F)** Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the <b>Note</b> below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). <b>See the separate instructions.</b>		(h) <b>Gain or (loss).</b> Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	ENERGY TRANSFER PARTNERS (SEE ATTAC	VARIOUS	VARIOUS	809,076.	829,295.			-20,219.
<b>2 Totals.</b> Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, <b>line 8b</b> (if <b>Box D</b> above is checked), <b>line 9</b> (if <b>Box E</b> above is checked), or <b>line 10</b> (if <b>Box F</b> above is checked) ▶				809,076.	829,295.			-20,219.

**Note:** If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

**Social security number or taxpayer identification number**

CLOUDSPLITTER FOUNDATION

22-2784895

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

**Part II Long-Term.** Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

**Note:** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

**You must check Box D, E, or F below. Check only one box.** If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D)** Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (E)** Long-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
- (F)** Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the <b>Note</b> below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). <b>See the separate instructions.</b>		(h) <b>Gain or (loss).</b> Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	SCHWAB #5937 - LT E (SEE ATTACHMENT)	VARIOUS	VARIOUS	748,851.	1023130.			-274,279.
<b>2 Totals.</b> Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, <b>line 8b</b> (if <b>Box D</b> above is checked), <b>line 9</b> (if <b>Box E</b> above is checked), or <b>line 10</b> (if <b>Box F</b> above is checked) ▶				748,851.	1023130.			-274,279.

**Note:** If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.





**SCHEDULE D ATTACHMENT - LONG TERM CAPITAL GAINS / LOSSES - BOX E**

Description	Symbol	Date acquired	Date sold	Quantity	Proceeds	Cost	Gain / Loss
Donnelley Financial	DFIN	8/30/2010	9/18/2017	5,375.00	114,911.47	(130,889.49)	(15,978.02)
Donnelley Financial	DFIN	11/22/2010	9/18/2017	2,500.00	53,447.19	(64,073.39)	(10,626.19)
<b>Subtotal</b>				<b>7,875.00</b>	<b>168,358.66</b>	<b>(194,962.87)</b>	<b>(26,604.21)</b>
LSC Communications	LKSD	8/30/2010	9/18/2017	5,375.00	88,735.82	(163,021.67)	(74,285.85)
LSC Communications	LKSD	11/22/2010	9/18/2017	2,500.00	41,272.48	(79,802.82)	(38,530.35)
<b>Subtotal</b>				<b>7,875.00</b>	<b>130,008.30</b>	<b>(242,824.50)</b>	<b>(112,816.20)</b>
RR Donnelley & Sons	RRD	8/30/2010	5/4/2017	14,333.33	180,592.64	(361,847.79)	(181,255.15)
RR Donnelley & Sons	RRD	11/22/2010	5/4/2017	6,666.67	83,996.64	(177,132.74)	(93,136.10)
<b>Subtotal</b>				<b>21,000.00</b>	<b>264,589.28</b>	<b>(538,980.53)</b>	<b>(274,391.25)</b>
Zoetis	ZTS	8/30/2010	9/18/2017	2,868.00	185,894.52	(46,361.95)	139,532.57
<b>Subtotal</b>				<b>2,868.00</b>	<b>185,894.52</b>	<b>(46,361.95)</b>	<b>139,532.57</b>
<b>Total - Schwab #5937 - LT E</b>					<b>748,850.76</b>	<b>(1,023,129.85)</b>	<b>(274,279.09)</b>

**Energy Transfer Partners ETP**

Proceeds	809,076.36
Cost	(1,307,417.90)
Adjustments to basis - K-1	984,040.00
<b>Gain</b>	<b>485,698.46</b>
Ordinary gain K-1	505,917.00
Capital gain	(20,218.54)