

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.

A For the 2018 calendar year, or tax year beginning **JUN 1, 2018** and ending **MAY 31, 2019**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization NYSARC, INC. Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 29 BRITISH AMERICAN BLVD City or town, state or province, country, and ZIP or foreign postal code LATHAM, NY 12110 F Name and address of principal officer: MARK VAN VOORST SAME AS C ABOVE	D Employer identification number 13-5678837 E Telephone number (518) 439-8311 G Gross receipts \$ 9,928,024. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶ 1256
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ WWW.NYSARC.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1949 M State of legal domicile: NY

Part I Summary

	1	Briefly describe the organization's mission or most significant activities: NYSARC WAS FOUNDED IN 1949 TO MEET A CRITICAL MISSION - TO IMPROVE THE QUALITY OF LIFE FOR PEOPLE		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
Activities & Governance	3	Number of voting members of the governing body (Part VI, line 1a)	3	48
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	48
	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	111
	6	Total number of volunteers (estimate if necessary)	6	48
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	7b	Net unrelated business taxable income from Form 990-T, line 38	7b	0.
	Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 176,077.
9		Program service revenue (Part VIII, line 2g)	5,828,906.	5,948,305.
10		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	88,879.	119,683.
11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,769,406.	3,859,936.
12		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	9,863,268.	9,928,024.
Expenses		13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	11,500.
	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)	6,725,755.	6,607,282.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,205,177.	2,428,725.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	8,942,432.	9,060,007.
	19	Revenue less expenses. Subtract line 18 from line 12	920,836.	868,017.
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 17,755,606.	End of Year 16,775,328.
	21	Total liabilities (Part X, line 26)	11,282,676.	9,325,760.
	22	Net assets or fund balances. Subtract line 21 from line 20	6,472,930.	7,449,568.

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 MARK VAN VOORST, EXECUTIVE DIRECTOR Type or print name and title	Date
Paid Preparer Use Only	Print/Type preparer's name ARIEL F AMMIRATO	Preparer's signature Date Check if self-employed <input type="checkbox"/> PTIN P01346991
	Firm's name ▶ BONADIO & CO. LLP Firm's address ▶ 6 WEMBLEY COURT ALBANY, NY 12205	Firm's EIN ▶ 16-1131146 Phone no. 518-464-4080

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

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: TO IMPROVE THE QUALITY OF LIFE FOR PERSONS WITH DEVELOPMENTAL DISABILITIES IN EVERY MANNER POSSIBLE.

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 [X] No

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

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

4a (Code:) (Expenses \$ 4,939,474. including grants of \$) (Revenue \$ 5,785,305.) NYSARC OFFERS A FULL RANGE OF TRUST SERVICES, ADMINISTRATION OF POOLED TRUSTS, AS WELL AS FIRST- AND THIRD-PARTY INDIVIDUAL TRUSTS, ALL OF WHICH ARE DESIGNED TO MEET THE NEEDS OF PEOPLE WITH ANY TYPE OF DISABILITY. ALL QUALIFY AS SUPPLEMENTAL NEEDS TRUSTS. A SUPPLEMENTAL NEEDS TRUST IS A WAY TO SET ASIDE FUNDS TO ENHANCE THE QUALITY OF LIFE OF AN INDIVIDUAL WITH SPECIAL NEEDS WITHOUT RISKING THAT PERSON'S BENEFITS UNDER VARIOUS GOVERNMENT PROGRAMS.

4b (Code:) (Expenses \$ 430,736. including grants of \$) (Revenue \$) THE PROVISION OF EDUCATION, TRAINING, REHABILITATION AND RESEARCH FOR INDIVIDUALS WITH INTELLECTUAL AND OTHER DISABILITIES. AS A LEADING ADVOCATE FOR PERSONS WITH INTELLECTUAL AND OTHER DEVELOPMENTAL DISABILITIES, THE ORGANIZATION PROVIDES SUPPORT, INFORMATION, DIRECTION AND OTHER SERVICES.

4c (Code:) (Expenses \$ 406,029. including grants of \$ 24,000.) (Revenue \$ 163,000.) THE ORGANIZATION PROVIDES TRAINING, FINANCIAL SUPPORT AND TECHNICAL LEGAL ASSISTANCE THROUGH A STATEWIDE GUARDIANSHIP PROGRAM. THE PROGRAM IS ADMINISTERED THROUGH NYSARC'S STATE OFFICE AND SERVES INDIVIDUALS WITH INTELLECTUAL AND OTHER DEVELOPMENTAL DISABILITIES.

4d Other program services (Describe in Schedule O.) (Expenses \$ 84,986. including grants of \$) (Revenue \$ 3,859,936.)

4e Total program service expenses 5,861,225.

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> ?		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 Revenue Procedure 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 temporarily restricted endowments, permanent endowments, or 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</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

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, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity 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 Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash 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 in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38 X	

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 16	
b Enter the number of Forms W-2G included in 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	

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee counts, tax returns, business income, foreign accounts, prohibited transactions, and charitable contributions.

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 in Schedule O. See instructions.

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

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 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 in Schedule O.		
	1a 48		
b	Enter the number of voting members included in line 1a, above, who are independent		
	1b 48		
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?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?	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?	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?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	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 in Schedule O		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?	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?	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		X
b	Describe in 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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	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	X	
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	X	
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?		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?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **NY**
- 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 in Schedule O)
- 19** Describe in 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 **CYNTHIA BOROZNY - (518) 439-8311**
29 BRITISH AMERICAN BLVD, LATHAM, NY 12110

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 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 and/or Box 7 of Form 1099-MISC) 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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) LAURA KENNEDY IMMEDIATE PAST PRESIDENT	1.00	X		X				0.	0.	0.
(2) DR. JOHN KOWALCZYK VICE PRESIDENT, CENTRAL NO	1.00	X		X				0.	0.	0.
(3) JOANNA VALENTE ORR VICE PRESIDENT, CAPITAL REGION NORTH	1.00	X		X				0.	0.	0.
(4) ARTHUR STILWELL VICE PRESIDENT, FINGER LAK	1.00	X		X				0.	0.	0.
(5) SAUNDRA M. GUMEROVE PRESIDENT	1.00	X		X				0.	0.	0.
(6) SHELLEY WINTERS BOARD MEMBER	1.00	X						0.	0.	0.
(7) ANGELO DEFELIPPO, III BOARD MEMBER	1.00	X						0.	0.	0.
(8) ROSE MARY CELLA MEMBER AT LARGE	1.00	X						0.	0.	0.
(9) CHERYL ENGLERT VICE PRESIDENT, WESTERN RE	1.00	X		X				0.	0.	0.
(10) JEROME ISAACS BOARD MEMBER	1.00	X						0.	0.	0.
(11) HOWARD JURIST BOARD MEMBER	1.00	X						0.	0.	0.
(12) THOMAS TALBETT JR. BOARD MEMBER	1.00	X						0.	0.	0.
(13) DR. THOMAS DELANEY BOARD MEMBER	1.00	X						0.	0.	0.
(14) TODD JACOBSON BOARD MEMBER	1.00	X						0.	0.	0.
(15) ELLEN SHANAHAN BECKER, ESQ. BOARD MEMBER	1.00	X						0.	0.	0.
(16) MARY JO HEBERT BOARD MEMBER	1.00	X						0.	0.	0.
(17) MARLENE HILL BOARD MEMBER	1.00	X						0.	0.	0.

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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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) CHERYL GUILD BOARD MEMBER	1.00	X						0.	0.	0.
(19) DAVID IRISH BOARD MEMBER	1.00	X						0.	0.	0.
(20) DEBORAH WILBUR BOARD MEMBER	1.00	X						0.	0.	0.
(21) HAROLD HOFFMEIER, JR. BOARD MEMBER	1.00	X						0.	0.	0.
(22) MARY PAT HARRIS BOARD MEMBER	1.00	X						0.	0.	0.
(23) CAROL KENYON BOARD MEMBER	1.00	X						0.	0.	0.
(24) ELIZABETH HENNESSY BOARD MEMBER	1.00	X						0.	0.	0.
(25) STEPHANIE DYER BOARD MEMBER	1.00	X						0.	0.	0.
(26) JOANNE RHODE BOARD MEMBER	1.00	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								1,456,687.	0.	250,779.
d Total (add lines 1b and 1c)								1,456,687.	0.	250,779.

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 **9**

	Yes	No
3 Did the organization list any former officer, director, or 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**

SEE PART VII, SECTION A CONTINUATION SHEETS

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 (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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			
(27) RICHARD RIMA BOARD MEMBER	1.00	X						0.	0.	0.
(28) DAVID SEBASTIANELLI BOARD MEMBER	1.00	X						0.	0.	0.
(29) JAMES WARREN VICE PRESIDENT, CENTRAL SO	1.00	X		X				0.	0.	0.
(30) JOSEPH ZIFCHOCK TREASURER	1.00	X		X				0.	0.	0.
(31) GORDON EYER BOARD MEMBER	1.00	X						0.	0.	0.
(32) WALTER HOGAN BOARD MEMBER	1.00	X						0.	0.	0.
(33) ROBERT KLEPPANG BOARD MEMBER	1.00	X						0.	0.	0.
(34) MARY ANNE VANDENBURGH BOARD MEMBER	1.00	X						0.	0.	0.
(35) SALLY ROMANO BOARD MEMBER	1.00	X						0.	0.	0.
(36) DIANE DEARBORN BOARD MEMBER	1.00	X						0.	0.	0.
(37) JOHN DE SANTO BOARD MEMBER	1.00	X						0.	0.	0.
(38) DANIEL MARTINDALE VICE PRESIDENT, CAPITAL REGION SOUTH	1.00	X		X				0.	0.	0.
(39) EILEEN HOLGATE BOARD MEMBER	1.00	X						0.	0.	0.
(40) SUSAN LUCAS VICE PRESIDENT, HUDSON VAL	1.00	X		X				0.	0.	0.
(41) STEVEN DROBYSH ASSISTANT TREASURER	1.00	X		X				0.	0.	0.
(42) ROBERT J. BOENING BOARD MEMBER	1.00	X						0.	0.	0.
(43) IDA RIOS BOARD MEMBER	1.00	X						0.	0.	0.
(44) ELLEN OWENS BOARD MEMBER	1.00	X						0.	0.	0.
(45) MIKE OSTRANDER BOARD MEMBER	1.00	X						0.	0.	0.
(46) SHARON RUSSITANO BOARD MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue

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

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	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					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	100.				
	g	Noncash contributions included in lines 1a-1f: \$						
	h	Total. Add lines 1a-1f			100.			
Program Service Revenue	2 a	FIDUCIARY FEES	Business Code	900099	5,948,305.	5,948,305.		
	b							
	c							
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f			5,948,305.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			119,683.		119,683.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6 a	Gross rents	(i) Real	(ii) Personal				
		Less: rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)						
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		Less: cost or other basis and sales expenses						
		Gain or (loss)						
		Net gain or (loss)						
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
		Less: direct expenses	b					
		Net income or (loss) from fundraising events						
	9 a	Gross income from gaming activities. See Part IV, line 19	a					
Less: direct expenses		b						
Net income or (loss) from gaming activities								
10 a	Gross sales of inventory, less returns and allowances	a						
	Less: cost of goods sold	b						
	Net income or (loss) from sales of inventory							
Miscellaneous Revenue				Business Code				
11 a	ADMINISTRATIVE CHARGES		900099	3,799,735.	3,799,735.			
	OTHER REVENUE		900099	32,851.	32,851.			
	PUBLICATION AND REGIST		900099	27,350.	27,350.			
	All other revenue							
	Total. Add lines 11a-11d				3,859,936.			
12	Total revenue. See instructions			9,928,024.	9,808,241.	0.	119,683.	

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 ...				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	24,000.	24,000.		
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	696,968.		696,968.	
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	4,514,099.	3,545,435.	968,664.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	343,097.	274,559.	68,538.	
9 Other employee benefits	711,537.	549,784.	161,753.	
10 Payroll taxes	341,581.	231,789.	109,792.	
11 Fees for services (non-employees):				
a Management				
b Legal	16,409.	6,150.	10,259.	
c Accounting	123,768.	38,751.	85,017.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	474,427.	99,333.	375,094.	
12 Advertising and promotion	94,516.	86,024.	8,492.	
13 Office expenses	353,524.	297,343.	56,181.	
14 Information technology				
15 Royalties				
16 Occupancy	564,286.	380,395.	183,891.	
17 Travel	98,575.	47,662.	50,913.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	65,782.	16,256.	49,526.	
20 Interest	176.	110.	66.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	89,005.	45,672.	43,333.	
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a EMPLOYEE PARKING	11,681.	11,681.		
b COMMITTEES, BOARD OF GO	207,420.	2,931.	204,489.	
c TELEPHONE	187,219.	113,347.	73,872.	
d EQUIPMENT, RENT AND MAI	46,957.	35,589.	11,368.	
e All other expenses	94,980.	54,414.	40,566.	
25 Total functional expenses. Add lines 1 through 24e	9,060,007.	5,861,225.	3,198,782.	0.
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A)		(B)	
		Beginning of year		End of year	
Assets	1 Cash - non-interest-bearing	400.	1	400.	
	2 Savings and temporary cash investments	2,606,489.	2	2,519,367.	
	3 Pledges and grants receivable, net		3		
	4 Accounts receivable, net	82,094.	4	168,677.	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6		
	7 Notes and loans receivable, net		7		
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges	23,050.	9	43,167.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,993,708.			
	b Less: accumulated depreciation	10b 1,768,042.	228,249.	10c	225,666.
	11 Investments - publicly traded securities	4,281,125.	11	4,479,645.	
	12 Investments - other securities. See Part IV, line 11		12		
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11	10,534,199.	15	9,338,406.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	17,755,606.	16	16,775,328.		
Liabilities	17 Accounts payable and accrued expenses	1,487,261.	17	1,540,162.	
	18 Grants payable		18		
	19 Deferred revenue	13,370.	19	32,509.	
	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 current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22		
	23 Secured mortgages and notes payable to unrelated third parties	31,172.	23	0.	
	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	9,750,873.	25	7,753,089.	
	26 Total liabilities. Add lines 17 through 25	11,282,676.	26	9,325,760.	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	6,463,033.	27	7,446,031.	
	28 Temporarily restricted net assets	9,897.	28	3,537.	
	29 Permanently restricted net assets		29		
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
33 Total net assets or fund balances	6,472,930.	33	7,449,568.		
34 Total liabilities and net assets/fund balances	17,755,606.	34	16,775,328.		

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	9,928,024.
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,060,007.
3	Revenue less expenses. Subtract line 2 from line 1	3	868,017.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6,472,930.
5	Net unrealized gains (losses) on investments	5	108,621.
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 in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	7,449,568.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	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 in Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____		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 in Schedule O and describe any steps taken to undergo such audits _____		

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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
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)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five 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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2018. 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		<input type="checkbox"/>
b 33 1/3% support test - 2017. 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		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2018. 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		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2017. 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		<input type="checkbox"/>
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		<input type="checkbox"/>

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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	444.	15,312.	62,357.	170,046.	100.	248,259.
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	6104762.	5972762.	5845787.	5828906.	5948305.	29700522.
3 Gross receipts from activities that are not an unrelated trade or business under section 513	2632230.	3218240.	3557069.	3769076.	3859937.	17036552.
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	8737436.	9206314.	9465213.	9768028.	9808342.	46985333.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
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						0.
c Add lines 7a and 7b						0.
8 Public support. (Subtract line 7c from line 6.)						46985333.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6	8737436.	9206314.	9465213.	9768028.	9808342.	46985333.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	76,318.	82,447.	80,333.	88,879.	119,683.	447,660.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	76,318.	82,447.	80,333.	88,879.	119,683.	447,660.
11 Net income from unrelated business activities not included in 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.)	8813754.	9288761.	9545546.	9856907.	9928025.	47432993.

14 First five 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 2018 (line 8, column (f), divided by line 13, column (f))	15	99.06 %
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	99.15 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	.94 %
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	.85 %

19a 33 1/3% support tests - 2018. 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 - 2017. 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 in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of 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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) 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 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</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 in 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 in 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 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>		

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 in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
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? <i>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.</i>		

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)? <i>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).</i>		

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?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described in (2), 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

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 <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>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 those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>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.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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 (explain in detail in Part VI):		
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 1-1/2% 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 .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 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.**

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 B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and 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 NYSARC, INC.	Employer identification number 13-5678837
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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 employer identification number (EIN) 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-.

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 (grass roots 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.														
<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	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.		
If the amount on line 1e, column (a) or (b) is:	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) 2015	(b) 2016	(c) 2017	(d) 2018	(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					

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		54,638.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?	X		30,348.
j Total. Add lines 1c through 1i			84,986.
2a Did the activities in line 1 cause the organization to be not 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 expenditure 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:

NYSARC ADVOCATES, ON BEHALF OF PERSONS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES, THROUGH MEETINGS, CALLS AND CORRESPONDANCE WITH VARIOUS REGULATORY ENTITIES (OPWDD, OMH, SED), ELECTED OFFICIALS AND THEIR STAFF MEMBERS (NYS GOVERNOR'S OFFICE, NYS SENATE AND ASSEMBLY MEMBERS AS WELL AS LEGISLATIVE COMMITTEES). ADVOCACY IS FOCUSED ON A

SCHEDULE D (Form 990)

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

2018

Open to Public Inspection

Name of the organization NYSARC, INC. Employer identification number 13-5678837

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

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

Form with multiple questions (1-9) regarding conservation easements, including checkboxes for various purposes, a table for lines 2a-2d, and yes/no questions about monitoring and reporting.

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.

Form with questions (1a, 1b, 2) regarding reporting of art and historical treasures, including amounts for revenue and assets.

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 are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 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 on 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					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____%
 - b Permanent endowment _____%
 - c Temporarily restricted endowment _____%
- 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:
- | | Yes | No |
|--|--------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 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		62,989.	24,277.	38,712.
d Equipment		1,828,142.	1,676,939.	151,203.
e Other		102,577.	66,826.	35,751.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				225,666.

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)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

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, col. (B) line 13.) ▶		

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) DUE FROM NYSARC TRUST	455,010.
(2) INTEREST AND OTHER RECEIVABLES	268,217.
(3) PRIVATE PLACEMENT BOND DEPOSITS	984,633.
(4) CHARITABLE GIFT ANNUITY RESERVE FUND	419,100.
(5) CHARITABLE REMAINDER UNITRUST	334,808.
(6) DEBT SERVICE RESERVE FUND	812,829.
(7) DUE FROM CHAPTERS	985,490.
(8) WORKER'S COMPENSATION EXCESS LOSS FUND	5,078,319.
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	9,338,406.

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) PRIVATE PLACEMENT BOND DEPOSITS	984,633.
(3) CHARITABLE GIFT ANNUITY LIABILITY	81,674.
(4) CHARITABLE REMAINDER UNITRUST	334,808.
(5) DEBT SERVICE RESERVE DUE CHAPTERS	812,829.
(6) NOTE PAYABLE FOR MANAGED CARE	
(7) ORGANIZATION	460,826.
(8) WORKER'S COMPENSATION EXCESS LOSS	
(9) FUND LIABILITY	5,078,319.
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	7,753,089.

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

**SCHEDULE I
(Form 990)**

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 the latest information.**

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Name of the organization NYSARC, INC. Employer identification number 13-5678837

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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance

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

3 Enter total number of other organizations listed in the line 1 table ▶ _____

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
SCHOLARSHIPS	15	24,000.	0.		

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:

VARIOUS SCHOLARSHIPS ARE AWARDED TO STUDENTS ENROLLED FULL-TIME IN ANY YEAR OF THEIR COLLEGE, TRAINING IN A FIELD RELATED TO INTELLECTUAL AND OTHER DEVELOPMENTAL DISABILITIES IN NEW YORK STATE.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2018

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization

NYSARC, INC.

Employer identification number

13-5678837

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.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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 filing 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.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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		

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

Schedule J (Form 990) 2018

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) MARK VAN VOORST EXECUTIVE DIRECTOR	(i)	274,148.	0.	0.	30,190.	9,892.	314,230.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) TANIA SEABURG CHIEF POLICY & OPERATIONS TILL JAN.	(i)	196,538.	0.	0.	21,721.	13,118.	231,377.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) ERIK GEIZER DEPUTY ED/CORPORATE COMPLIANCE OFFIC	(i)	158,943.	0.	0.	17,710.	9,678.	186,331.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JOHN KEMMER ASSOCIATE ED, PROGRAM SVCS	(i)	136,441.	0.	0.	15,027.	1,023.	152,491.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) HEIDI FLATT CHIEF OPERATING OFFICER-TRUST	(i)	141,056.	0.	0.	15,671.	10,445.	167,172.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) NANCY CANNON ASSOCIATE COO, TRUST SERVI	(i)	132,623.	0.	0.	14,761.	10,574.	157,958.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) KATHRYN JERIAN DEPUTY ED/GENERAL COUNSEL	(i)	136,515.	0.	0.	15,250.	12,257.	164,022.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

SCHEDULE O
(Form 990 or 990-EZ)

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 990-EZ.

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

OMB No. 1545-0047

2018

Open to Public
Inspection

Name of the organization

NYSARC, INC.

Employer identification number

13-5678837

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

WITH INTELLECTUAL AND OTHER DEVELOPMENTAL DISABILITIES.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

OTHER PROGRAMS

EXPENSES \$ 84,986. INCLUDING GRANTS OF \$ 0. REVENUE \$ 3,859,936.

FORM 990, PART VI, SECTION A, LINE 6:

NYSARC, INC. IS A UNITARY CORPORATION CONSISTING OF ITS 43 CHAPTERS AND 6

DCS. THE CORPORATION AND CHAPTER'S GOVERNING BODY IS THE BOARD OF

GOVERNORS REPRESENTING THE INDIVIDUAL MEMBERSHIP IN EACH CHAPTER'S

JURISDICTION. EACH CHAPTER HAS ONE PRIMARY AND ONE ALTERNATE GOVERNOR WITH

A WEIGHTED VOTE BASED ON MEMBERSHIP. THE CORPORATION THROUGH ITS BYLAWS

DELEGATES DAY-TO-DAY OPERATING AUTHORITY TO THE CHAPTERS' BOARD OF

DIRECTORS. THE EXECUTIVE COMMITTEE OF THE BOARD OF GOVERNORS (SEE PART VI,

LINE 7A BELOW) COMPRISES THE CORPORATION'S ELECTED OFFICERS AND EXERCISES

ALL POWERS OF THE BOARD OF GOVERNORS BETWEEN PLENARY MEETINGS OF THE

GOVERNORS, WHICH ARE HELD FOUR TIMES PER YEAR.

FORM 990, PART VI, SECTION A, LINE 7A:

THE ORGANIZATION'S MEMBERS ELECT THE OFFICERS AND DIRECTORS OF THE CHAPTER

ANNUALLY. IN TURN, THOSE CHAPTER BOARD MEMBERS NOMINATE THE OFFICERS AND

DIRECTORS OF THE CORPORATION.

FORM 990, PART VI, SECTION B, LINE 11B:

THE BOARD OF GOVERNORS DOES NOT REVIEW CHAPTERS' FORM 990S BEFORE THEY ARE

Name of the organization NYSARC, INC.	Employer identification number 13-5678837
--	--

FILED. EACH CHAPTER SUBMITS A COPY OF ITS FORM 990 TO THE CORPORATION'S BOARD OF GOVERNORS WHEN THE FORM IS FILED BY THE CHAPTER. NYSARC'S 990 IS REVIEWED BY MEMBERS OF THE EXECUTIVE COMMITTEE AND COPIES ARE AVAILABLE UPON REQUEST.

FORM 990, PART VI, SECTION B, LINE 12C:
COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY IS MONITORED BY THE AUDIT COMMITTEE.

FORM 990, PART VI, SECTION B, LINE 15:
ANNUAL BUDGET IS REVIEWED AND RECOMMENDED BY BUDGET AND FINANCE COMMITTEE, THEN SUBMITTED TO BOARD OF GOVERNORS. ALL EXECUTIVE STAFF SALARIES ARE APPROVED WITHIN THE ANNUAL BUDGET.

FORM 990, PART VI, SECTION C, LINE 19:
BY WRITTEN REQUEST.

FORM 990, PART XII, LINE 2C:
THE AUDIT COMMITTEE IS RESPONSIBLE FOR THE SELECTION AND OVERSIGHT OF THE AUDITORS. THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

	Enter filer's identifying number	
Type or print	Name of exempt organization or other filer, see instructions. NYSARC, INC.	Employer identification number (EIN) or 13-5678837
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 29 BRITISH AMERICAN BLVD	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. LATHAM, NY 12110	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

CYNTHIA BOROZNY

- The books are in the care of ▶ **29 BRITISH AMERICAN BLVD - LATHAM, NY 12110**
Telephone No. ▶ **(518) 439-8311** Fax No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until APRIL 15, 2020, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year _____ or
 ▶ tax year beginning JUN 1, 2018, and ending MAY 31, 2019.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat, select the "Actual Size" in the Adobe "Print" dialog.

STATE COPY

TAX RETURN FILING INSTRUCTIONS

NEW YORK FORM CHAR500

FOR THE YEAR ENDING

May 31, 2019

Prepared For:

NYSARC, Inc.
29 British American Blvd
Latham, NY 12110

Prepared By:

Bonadio & Co. LLP
6 Wembley Court
Albany, NY 12205

Amount of Tax:

Balance due of \$275

Make Check Payable To:

Department of Law

Mail Tax Return To:

NYS Office of Attorney General
Charities Bureau Registration Section
28 Liberty Street
New York, NY 10005

Return Must Be Mailed On Or Before:

Please mail as soon as possible.

Special Instructions:

The report should be signed and dated by an authorized individual(s).

The attached copy of the federal Form 990 must be properly signed and dated.

CHAR500

NYS Annual Filing for Charitable Organizations
www.CharitiesNYS.com

Send with fee and attachments to:
NYS Office of the Attorney General
Charities Bureau Registration Section
28 Liberty Street
New York, NY 10005

2018
Open to Public Inspection

1. General Information

For Fiscal Year Beginning (mm/dd/yyyy) **06/01/2018** and Ending (mm/dd/yyyy) **05/31/2019**

Check if Applicable: <input type="checkbox"/> Address Change <input type="checkbox"/> Name Change <input type="checkbox"/> Initial Filing <input type="checkbox"/> Final Filing <input type="checkbox"/> Amended Filing <input type="checkbox"/> Reg ID Pending	Name of Organization: NYSARC, INC.	Employer Identification Number (EIN): 13-5678837
	Mailing Address: 29 BRITISH AMERICAN BLVD	NY Registration Number: 00-48-07
	City / State / ZIP: LATHAM, NY 12110	Telephone: 518 439-8311
	Website: WWW.NYSARC.ORG	Email: NYSARC@NYSARC.ORG

Check your organization's registration category: 7A only EPTL only DUAL (7A & EPTL) EXEMPT* Confirm your Registration Category in the Charities Registry at www.CharitiesNYS.com.

2. Certification

See instructions for certification requirements. Improper certification is a violation of law that may be subject to penalties. The certification requires two signatories.

We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report.

President or Authorized Officer:	Signature	MARK VAN VOORST EXECUTIVE DIRECTOR	Print Name and Title	Date
Chief Financial Officer or Treasurer:	Signature	CINDY BOROZNY CHIEF FINANCIAL OFFI	Print Name and Title	Date

3. Annual Reporting Exemption

Check the exemption(s) that apply to your filing. If your organization is claiming an exemption under one category (7A or EPTL only filers) or both categories (DUAL filers) that apply to your registration, complete only parts 1, 2, and 3, and submit the certified Char500. No fee, schedules, or additional attachments are required. If you cannot claim an exemption or are a DUAL filer that claims only one exemption, you must file applicable schedules and attachments and pay applicable fees.

- 3a. 7A filing exemption: Total contributions from NY State including residents, foundations, government agencies, etc. did not exceed \$25,000 and the organization did not engage a professional fund raiser (PFR) or fund raising counsel (FRC) to solicit contributions during the fiscal year.
- 3b. EPTL filing exemption: Gross receipts did not exceed \$25,000 and the market value of assets did not exceed \$25,000 at any time during the fiscal year.

4. Schedules and Attachments

See the following page for a checklist of schedules and attachments to complete your filing.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	4a. Did your organization use a professional fund raiser, fund raising counsel or commercial co-venturer for fund raising activity in NY State? If yes, complete Schedule 4a.
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	4b. Did the organization receive government grants? If yes, complete Schedule 4b.

5. Fee

See the checklist on the next page to calculate your fee(s). Indicate fee(s) you are submitting here:	7A filing fee: \$ <u>25.</u>	EPTL filing fee: \$ <u>250.</u>	Total fee: \$ <u>275.</u>	Make a single check or money order payable to: "Department of Law"
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CHAR500 Annual Filing for Charitable Organizations (Updated January 2019)

*The "Exempt" category refers to an organization's NYS registration status. It does not refer to its IRS tax designation.

CHAR500

Annual Filing Checklist

- Simply submit the certified CHAR500 with no fee, schedule, or additional attachments IF:
- Your organization is registered as 7A only and you marked the 7A filing exemption in Part 3.
 - Your organization is registered as EPTL only and you marked the EPTL filing exemption in Part 3.
 - Your organization is registered as DUAL and you marked both the 7A and EPTL filing exemption in Part 3.

Checklist of Schedules and Attachments

Check the schedules you must submit with your CHAR500 as described in Part 4:

- If you answered "yes" in Part 4a, submit Schedule 4a: Professional Fund Raisers (PFR), Fund Raising Counsel (FRC), Commercial Co-Venturers (CCV)
- If you answered "yes" in Part 4b, submit Schedule 4b: Government Grants

Check the financial attachments you must submit with your CHAR500:

- IRS Form 990, 990-EZ, or 990-PF, and 990-T if applicable
- All additional IRS Form 990 Schedules, including Schedule B (Schedule of Contributors). Schedule B of public charities is exempt from disclosure and will not be available for public review.
- Our organization was eligible for and filed an IRS 990-N e-postcard. Our revenue exceeded \$25,000 and/or our assets exceeded \$25,000 in the filing year. We have included an IRS Form 990-EZ for state purposes only.

If you are a 7A only or DUAL filer, submit the applicable independent Certified Public Accountant's Review or Audit Report:

- Review Report if you received total revenue and support greater than \$250,000 and up to \$750,000.
- Audit Report if you received total revenue and support greater than \$750,000
- No Review Report or Audit Report is required because total revenue and support is less than \$250,000
- We are a DUAL filer and checked box 3a, no Review Report or Audit Report is required

Calculate Your Fee

For 7A and DUAL filers, calculate the 7A fee:

- \$0, if you checked the 7A exemption in Part 3a
- \$25, if you did not check the 7A exemption in Part 3a

For EPTL and DUAL filers, calculate the EPTL fee:

- \$0, if you checked the EPTL exemption in Part 3b
- \$25, if the NET WORTH is less than \$50,000
- \$50, if the NET WORTH is \$50,000 or more but less than \$250,000
- \$100, if the NET WORTH is \$250,000 or more but less than \$1,000,000
- \$250, if the NET WORTH is \$1,000,000 or more but less than \$10,000,000
- \$750, if the NET WORTH is \$10,000,000 or more but less than \$50,000,000
- \$1500, if the NET WORTH is \$50,000,000 or more

Send Your Filing

Send your CHAR500, all schedules and attachments, and total fee to:

NYS Office of the Attorney General
 Charities Bureau Registration Section
 28 Liberty Street
 New York, NY 10005

Need Assistance?

Visit: www.CharitiesNYS.com
 Call: (212) 416-8401
 Email: Charities.Bureau@ag.ny.gov

Is my Registration Category 7A, EPTL, DUAL or EXEMPT?

Organizations are assigned a Registration Category upon registration with the NY Charities Bureau:

7A filers are registered to solicit contributions in New York under Article 7-A of the Executive Law ("7A")

EPTL filers are registered under the Estates, Powers & Trusts Law ("EPTL") because they hold assets and/or conduct activities for charitable purposes in NY.

DUAL filers are registered under both 7A and EPTL.

EXEMPT filers have registered with the NY Charities Bureau and meet conditions in **Schedule E - Registration Exemption for Charitable Organizations**. These organizations are not required to file annual financial reports but may do so voluntarily.

Confirm your Registration Category and learn more about NY law at www.CharitiesNYS.com.

Where do I find my organization's NET WORTH?

NET WORTH for fee purposes is calculated on:

- IRS Form 990 Part I, line 22
- IRS Form 990 EZ Part I, line 21
- IRS Form 990 PF, calculate the difference between Total Assets at Fair Market Value (Part II, line 16(c)) and Total Liabilities (Part II, line 23(b)).

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.

A For the 2018 calendar year, or tax year beginning **JUN 1, 2018** and ending **MAY 31, 2019**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization NYSARC, INC. Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 29 BRITISH AMERICAN BLVD City or town, state or province, country, and ZIP or foreign postal code LATHAM, NY 12110	D Employer identification number 13-5678837 E Telephone number (518) 439-8311
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		G Gross receipts \$ 9,928,024.
J Website: ▶ WWW.NYSARC.ORG		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶ 1256
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1949 M State of legal domicile: NY

Part I Summary

	1	Briefly describe the organization's mission or most significant activities: NYSARC WAS FOUNDED IN 1949 TO MEET A CRITICAL MISSION - TO IMPROVE THE QUALITY OF LIFE FOR PEOPLE		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
Activities & Governance	3	Number of voting members of the governing body (Part VI, line 1a)	3	48
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	48
	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	111
	6	Total number of volunteers (estimate if necessary)	6	48
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	7b	Net unrelated business taxable income from Form 990-T, line 38	7b	0.
	Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year
9		Program service revenue (Part VIII, line 2g)	176,077.	100.
10		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	5,828,906.	5,948,305.
11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	88,879.	119,683.
12		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,769,406.	3,859,936.
			9,863,268.	9,928,024.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	11,500.	24,000.
	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)	6,725,755.	6,607,282.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,205,177.	2,428,725.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	8,942,432.	9,060,007.
	19	Revenue less expenses. Subtract line 18 from line 12	920,836.	868,017.
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)	17,755,606.	16,775,328.
	22	Net assets or fund balances. Subtract line 21 from line 20	11,282,676.	9,325,760.
			6,472,930.	7,449,568.

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 MARK VAN VOORST, EXECUTIVE DIRECTOR <small>Type or print name and title</small>	Date
Paid Preparer Use Only	Print/Type preparer's name ARIEL F AMMIRATO	Preparer's signature Date Check <input type="checkbox"/> if self-employed PTIN P01346991
	Firm's name ▶ BONADIO & CO. LLP Firm's address ▶ 6 WEMBLEY COURT ALBANY, NY 12205	Firm's EIN ▶ 16-1131146 Phone no. 518-464-4080

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

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: TO IMPROVE THE QUALITY OF LIFE FOR PERSONS WITH DEVELOPMENTAL DISABILITIES IN EVERY MANNER POSSIBLE.

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 [X] No

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

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

4a (Code:) (Expenses \$ 4,939,474. including grants of \$) (Revenue \$ 5,785,305.) NYSARC OFFERS A FULL RANGE OF TRUST SERVICES, ADMINISTRATION OF POOLED TRUSTS, AS WELL AS FIRST- AND THIRD-PARTY INDIVIDUAL TRUSTS, ALL OF WHICH ARE DESIGNED TO MEET THE NEEDS OF PEOPLE WITH ANY TYPE OF DISABILITY. ALL QUALIFY AS SUPPLEMENTAL NEEDS TRUSTS. A SUPPLEMENTAL NEEDS TRUST IS A WAY TO SET ASIDE FUNDS TO ENHANCE THE QUALITY OF LIFE OF AN INDIVIDUAL WITH SPECIAL NEEDS WITHOUT RISKING THAT PERSON'S BENEFITS UNDER VARIOUS GOVERNMENT PROGRAMS.

4b (Code:) (Expenses \$ 430,736. including grants of \$) (Revenue \$) THE PROVISION OF EDUCATION, TRAINING, REHABILITATION AND RESEARCH FOR INDIVIDUALS WITH INTELLECTUAL AND OTHER DISABILITIES. AS A LEADING ADVOCATE FOR PERSONS WITH INTELLECTUAL AND OTHER DEVELOPMENTAL DISABILITIES, THE ORGANIZATION PROVIDES SUPPORT, INFORMATION, DIRECTION AND OTHER SERVICES.

4c (Code:) (Expenses \$ 406,029. including grants of \$ 24,000.) (Revenue \$ 163,000.) THE ORGANIZATION PROVIDES TRAINING, FINANCIAL SUPPORT AND TECHNICAL LEGAL ASSISTANCE THROUGH A STATEWIDE GUARDIANSHIP PROGRAM. THE PROGRAM IS ADMINISTERED THROUGH NYSARC'S STATE OFFICE AND SERVES INDIVIDUALS WITH INTELLECTUAL AND OTHER DEVELOPMENTAL DISABILITIES.

4d Other program services (Describe in Schedule O.) (Expenses \$ 84,986. including grants of \$) (Revenue \$ 3,859,936.)

4e Total program service expenses 5,861,225.

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> ?		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 Revenue Procedure 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 temporarily restricted endowments, permanent endowments, or 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</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

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, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity 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 Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash 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 in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38 X	

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 16	
b Enter the number of Forms W-2G included in 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	

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee counts, tax returns, business income, foreign accounts, prohibited transactions, and charitable contributions.

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 in Schedule O. See instructions.

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

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 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 in Schedule O.		
	1a 48		
b	Enter the number of voting members included in line 1a, above, who are independent		
	1b 48		
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?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?	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?	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?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	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 in Schedule O		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?	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?	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		X
b	Describe in 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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	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	X	
b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process in 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?		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?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **NY**
- 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 in Schedule O)
- 19** Describe in 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 **CYNTHIA BOROZNY - (518) 439-8311**
29 BRITISH AMERICAN BLVD, LATHAM, NY 12110

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 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 and/or Box 7 of Form 1099-MISC) 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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) LAURA KENNEDY IMMEDIATE PAST PRESIDENT	1.00	X		X				0.	0.	0.
(2) DR. JOHN KOWALCZYK VICE PRESIDENT, CENTRAL NO	1.00	X		X				0.	0.	0.
(3) JOANNA VALENTE ORR VICE PRESIDENT, CAPITAL REGION NORTH	1.00	X		X				0.	0.	0.
(4) ARTHUR STILWELL VICE PRESIDENT, FINGER LAK	1.00	X		X				0.	0.	0.
(5) SAUNDRA M. GUMEROVE PRESIDENT	1.00	X		X				0.	0.	0.
(6) SHELLEY WINTERS BOARD MEMBER	1.00	X						0.	0.	0.
(7) ANGELO DEFELIPPO, III BOARD MEMBER	1.00	X						0.	0.	0.
(8) ROSE MARY CELLA MEMBER AT LARGE	1.00	X						0.	0.	0.
(9) CHERYL ENGLERT VICE PRESIDENT, WESTERN RE	1.00	X		X				0.	0.	0.
(10) JEROME ISAACS BOARD MEMBER	1.00	X						0.	0.	0.
(11) HOWARD JURIST BOARD MEMBER	1.00	X						0.	0.	0.
(12) THOMAS TALBETT JR. BOARD MEMBER	1.00	X						0.	0.	0.
(13) DR. THOMAS DELANEY BOARD MEMBER	1.00	X						0.	0.	0.
(14) TODD JACOBSON BOARD MEMBER	1.00	X						0.	0.	0.
(15) ELLEN SHANAHAN BECKER, ESQ. BOARD MEMBER	1.00	X						0.	0.	0.
(16) MARY JO HEBERT BOARD MEMBER	1.00	X						0.	0.	0.
(17) MARLENE HILL BOARD MEMBER	1.00	X						0.	0.	0.

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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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) CHERYL GUILD BOARD MEMBER	1.00	X						0.	0.	0.
(19) DAVID IRISH BOARD MEMBER	1.00	X						0.	0.	0.
(20) DEBORAH WILBUR BOARD MEMBER	1.00	X						0.	0.	0.
(21) HAROLD HOFFMEIER, JR. BOARD MEMBER	1.00	X						0.	0.	0.
(22) MARY PAT HARRIS BOARD MEMBER	1.00	X						0.	0.	0.
(23) CAROL KENYON BOARD MEMBER	1.00	X						0.	0.	0.
(24) ELIZABETH HENNESSY BOARD MEMBER	1.00	X						0.	0.	0.
(25) STEPHANIE DYER BOARD MEMBER	1.00	X						0.	0.	0.
(26) JOANNE RHODE BOARD MEMBER	1.00	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								1,456,687.	0.	250,779.
d Total (add lines 1b and 1c)								1,456,687.	0.	250,779.

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 **9**

	Yes	No
3 Did the organization list any former officer, director, or 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**

SEE PART VII, SECTION A CONTINUATION SHEETS

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 (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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			
(27) RICHARD RIMA BOARD MEMBER	1.00	X						0.	0.	0.
(28) DAVID SEBASTIANELLI BOARD MEMBER	1.00	X						0.	0.	0.
(29) JAMES WARREN VICE PRESIDENT, CENTRAL SO	1.00	X		X				0.	0.	0.
(30) JOSEPH ZIFCHOCK TREASURER	1.00	X		X				0.	0.	0.
(31) GORDON EYER BOARD MEMBER	1.00	X						0.	0.	0.
(32) WALTER HOGAN BOARD MEMBER	1.00	X						0.	0.	0.
(33) ROBERT KLEPPANG BOARD MEMBER	1.00	X						0.	0.	0.
(34) MARY ANNE VANDENBURGH BOARD MEMBER	1.00	X						0.	0.	0.
(35) SALLY ROMANO BOARD MEMBER	1.00	X						0.	0.	0.
(36) DIANE DEARBORN BOARD MEMBER	1.00	X						0.	0.	0.
(37) JOHN DE SANTO BOARD MEMBER	1.00	X						0.	0.	0.
(38) DANIEL MARTINDALE VICE PRESIDENT, CAPITAL REGION SOUTH	1.00	X		X				0.	0.	0.
(39) EILEEN HOLGATE BOARD MEMBER	1.00	X						0.	0.	0.
(40) SUSAN LUCAS VICE PRESIDENT, HUDSON VAL	1.00	X		X				0.	0.	0.
(41) STEVEN DROBYSH ASSISTANT TREASURER	1.00	X		X				0.	0.	0.
(42) ROBERT J. BOENING BOARD MEMBER	1.00	X						0.	0.	0.
(43) IDA RIOS BOARD MEMBER	1.00	X						0.	0.	0.
(44) ELLEN OWENS BOARD MEMBER	1.00	X						0.	0.	0.
(45) MIKE OSTRANDER BOARD MEMBER	1.00	X						0.	0.	0.
(46) SHARON RUSSITANO BOARD MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue

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

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	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					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	100.				
	g	Noncash contributions included in lines 1a-1f: \$						
	h	Total. Add lines 1a-1f			100.			
Program Service Revenue	2 a	FIDUCIARY FEES	Business Code	900099	5,948,305.	5,948,305.		
	b							
	c							
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f			5,948,305.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			119,683.		119,683.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6 a	Gross rents	(i) Real	(ii) Personal				
		Less: rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)						
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		Less: cost or other basis and sales expenses						
		Gain or (loss)						
		Net gain or (loss)						
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
		Less: direct expenses	b					
		Net income or (loss) from fundraising events						
9 a	Gross income from gaming activities. See Part IV, line 19	a						
	Less: direct expenses	b						
	Net income or (loss) from gaming activities							
10 a	Gross sales of inventory, less returns and allowances	a						
	Less: cost of goods sold	b						
	Net income or (loss) from sales of inventory							
Miscellaneous Revenue				Business Code				
11 a	ADMINISTRATIVE CHARGES	900099		3,799,735.	3,799,735.			
b	OTHER REVENUE	900099		32,851.	32,851.			
c	PUBLICATION AND REGIST	900099		27,350.	27,350.			
d	All other revenue							
e	Total. Add lines 11a-11d			3,859,936.				
12	Total revenue. See instructions			9,928,024.	9,808,241.	0.	119,683.	

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 ...				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	24,000.	24,000.		
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	696,968.		696,968.	
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	4,514,099.	3,545,435.	968,664.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	343,097.	274,559.	68,538.	
9 Other employee benefits	711,537.	549,784.	161,753.	
10 Payroll taxes	341,581.	231,789.	109,792.	
11 Fees for services (non-employees):				
a Management				
b Legal	16,409.	6,150.	10,259.	
c Accounting	123,768.	38,751.	85,017.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	474,427.	99,333.	375,094.	
12 Advertising and promotion	94,516.	86,024.	8,492.	
13 Office expenses	353,524.	297,343.	56,181.	
14 Information technology				
15 Royalties				
16 Occupancy	564,286.	380,395.	183,891.	
17 Travel	98,575.	47,662.	50,913.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	65,782.	16,256.	49,526.	
20 Interest	176.	110.	66.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	89,005.	45,672.	43,333.	
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a EMPLOYEE PARKING	11,681.	11,681.		
b COMMITTEES, BOARD OF GO	207,420.	2,931.	204,489.	
c TELEPHONE	187,219.	113,347.	73,872.	
d EQUIPMENT, RENT AND MAI	46,957.	35,589.	11,368.	
e All other expenses	94,980.	54,414.	40,566.	
25 Total functional expenses. Add lines 1 through 24e	9,060,007.	5,861,225.	3,198,782.	0.
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)

Part X Balance Sheet

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

		(A)		(B)	
		Beginning of year		End of year	
Assets	1 Cash - non-interest-bearing	400.	1	400.	
	2 Savings and temporary cash investments	2,606,489.	2	2,519,367.	
	3 Pledges and grants receivable, net		3		
	4 Accounts receivable, net	82,094.	4	168,677.	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6		
	7 Notes and loans receivable, net		7		
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges	23,050.	9	43,167.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,993,708.			
	b Less: accumulated depreciation	10b 1,768,042.			
	11 Investments - publicly traded securities	4,281,125.	11	4,479,645.	
	12 Investments - other securities. See Part IV, line 11		12		
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11	10,534,199.	15	9,338,406.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	17,755,606.	16	16,775,328.		
Liabilities	17 Accounts payable and accrued expenses	1,487,261.	17	1,540,162.	
	18 Grants payable		18		
	19 Deferred revenue	13,370.	19	32,509.	
	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 current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22		
	23 Secured mortgages and notes payable to unrelated third parties	31,172.	23	0.	
	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	9,750,873.	25	7,753,089.	
	26 Total liabilities. Add lines 17 through 25	11,282,676.	26	9,325,760.	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	6,463,033.	27	7,446,031.	
	28 Temporarily restricted net assets	9,897.	28	3,537.	
	29 Permanently restricted net assets		29		
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
33 Total net assets or fund balances	6,472,930.	33	7,449,568.		
34 Total liabilities and net assets/fund balances	17,755,606.	34	16,775,328.		

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	9,928,024.
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,060,007.
3	Revenue less expenses. Subtract line 2 from line 1	3	868,017.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6,472,930.
5	Net unrealized gains (losses) on investments	5	108,621.
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 in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	7,449,568.

Part XII Financial Statements and Reporting

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

- 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 in 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
- 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
- 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 in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____
- 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 in Schedule O and describe any steps taken to undergo such audits _____

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
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)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five 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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2018. 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		<input type="checkbox"/>
b 33 1/3% support test - 2017. 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		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2018. 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		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2017. 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		<input type="checkbox"/>
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		<input type="checkbox"/>

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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	444.	15,312.	62,357.	170,046.	100.	248,259.
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	6104762.	5972762.	5845787.	5828906.	5948305.	29700522.
3 Gross receipts from activities that are not an unrelated trade or business under section 513	2632230.	3218240.	3557069.	3769076.	3859937.	17036552.
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	8737436.	9206314.	9465213.	9768028.	9808342.	46985333.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
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						0.
c Add lines 7a and 7b						0.
8 Public support. (Subtract line 7c from line 6.)						46985333.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6	8737436.	9206314.	9465213.	9768028.	9808342.	46985333.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	76,318.	82,447.	80,333.	88,879.	119,683.	447,660.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	76,318.	82,447.	80,333.	88,879.	119,683.	447,660.
11 Net income from unrelated business activities not included in 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.)	8813754.	9288761.	9545546.	9856907.	9928025.	47432993.

14 First five 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 2018 (line 8, column (f), divided by line 13, column (f))	15	99.06 %
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	99.15 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	.94 %
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	.85 %

19a 33 1/3% support tests - 2018. 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 - 2017. 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 in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of 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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) 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 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</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 in 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 in 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 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>		

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 in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
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? <i>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.</i>		

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)? <i>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).</i>		

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?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described in (2), 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

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 <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>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 those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>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.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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 (explain in detail in Part VI):		
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 1-1/2% 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 .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 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.**

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 B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and 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 NYSARC, INC.	Employer identification number 13-5678837
---	---

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 employer identification number (EIN) 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-.

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 (grass roots 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.														
<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	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.		
If the amount on line 1e, column (a) or (b) is:	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) 2015	(b) 2016	(c) 2017	(d) 2018	(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					

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		54,638.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?	X		30,348.
j Total. Add lines 1c through 1i			84,986.
2a Did the activities in line 1 cause the organization to be not 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 expenditure 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:

NYSARC ADVOCATES, ON BEHALF OF PERSONS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES, THROUGH MEETINGS, CALLS AND CORRESPONDANCE WITH VARIOUS REGULATORY ENTITIES (OPWDD, OMH, SED), ELECTED OFFICIALS AND THEIR STAFF MEMBERS (NYS GOVERNOR'S OFFICE, NYS SENATE AND ASSEMBLY MEMBERS AS WELL AS LEGISLATIVE COMMITTEES). ADVOCACY IS FOCUSED ON A

SCHEDULE D (Form 990)

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

2018

Open to Public Inspection

Name of the organization NYSARC, INC. Employer identification number 13-5678837

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, lines 2a-2d for total number, acreage, and structure counts, and questions about monitoring, expenses, and reporting.

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting works of art and historical treasures, and amounts for revenue and assets.

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 are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 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 on 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					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c Temporarily restricted endowment _____ %
- 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:
- | | Yes | No |
|--|--------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 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		62,989.	24,277.	38,712.
d Equipment		1,828,142.	1,676,939.	151,203.
e Other		102,577.	66,826.	35,751.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				225,666.

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)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

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, col. (B) line 13.) ▶		

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) DUE FROM NYSARC TRUST	455,010.
(2) INTEREST AND OTHER RECEIVABLES	268,217.
(3) PRIVATE PLACEMENT BOND DEPOSITS	984,633.
(4) CHARITABLE GIFT ANNUITY RESERVE FUND	419,100.
(5) CHARITABLE REMAINDER UNITRUST	334,808.
(6) DEBT SERVICE RESERVE FUND	812,829.
(7) DUE FROM CHAPTERS	985,490.
(8) WORKER'S COMPENSATION EXCESS LOSS FUND	5,078,319.
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	9,338,406.

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) PRIVATE PLACEMENT BOND DEPOSITS	984,633.
(3) CHARITABLE GIFT ANNUITY LIABILITY	81,674.
(4) CHARITABLE REMAINDER UNITRUST	334,808.
(5) DEBT SERVICE RESERVE DUE CHAPTERS	812,829.
(6) NOTE PAYABLE FOR MANAGED CARE	
(7) ORGANIZATION	460,826.
(8) WORKER'S COMPENSATION EXCESS LOSS	
(9) FUND LIABILITY	5,078,319.
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	7,753,089.

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

**SCHEDULE I
(Form 990)**

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 the latest information.**

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Name of the organization NYSARC, INC. Employer identification number 13-5678837

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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance

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

3 Enter total number of other organizations listed in the line 1 table ▶ _____

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

Schedule I (Form 990) (2018)

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
SCHOLARSHIPS	15	24,000.	0.		

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:

VARIOUS SCHOLARSHIPS ARE AWARDED TO STUDENTS ENROLLED FULL-TIME IN ANY YEAR
OF THEIR COLLEGE, TRAINING IN A FIELD RELATED TO INTELLECTUAL AND OTHER
DEVELOPMENTAL DISABILITIES IN NEW YORK STATE.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2018

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization

NYSARC, INC.

Employer identification number

13-5678837

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.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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 filing 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.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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		

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

Schedule J (Form 990) 2018

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) MARK VAN VOORST EXECUTIVE DIRECTOR	(i)	274,148.	0.	0.	30,190.	9,892.	314,230.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) TANIA SEABURG CHIEF POLICY & OPERATIONS TILL JAN.	(i)	196,538.	0.	0.	21,721.	13,118.	231,377.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) ERIK GEIZER DEPUTY ED/CORPORATE COMPLIANCE OFFIC	(i)	158,943.	0.	0.	17,710.	9,678.	186,331.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JOHN KEMMER ASSOCIATE ED, PROGRAM SVCS	(i)	136,441.	0.	0.	15,027.	1,023.	152,491.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) HEIDI FLATT CHIEF OPERATING OFFICER-TRUST	(i)	141,056.	0.	0.	15,671.	10,445.	167,172.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) NANCY CANNON ASSOCIATE COO, TRUST SERVI	(i)	132,623.	0.	0.	14,761.	10,574.	157,958.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) KATHRYN JERIAN DEPUTY ED/GENERAL COUNSEL	(i)	136,515.	0.	0.	15,250.	12,257.	164,022.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

SCHEDULE O
(Form 990 or 990-EZ)

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 990-EZ.

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

OMB No. 1545-0047

2018

Open to Public
Inspection

Name of the organization

NYSARC, INC.

Employer identification number

13-5678837

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

WITH INTELLECTUAL AND OTHER DEVELOPMENTAL DISABILITIES.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

OTHER PROGRAMS

EXPENSES \$ 84,986. INCLUDING GRANTS OF \$ 0. REVENUE \$ 3,859,936.

FORM 990, PART VI, SECTION A, LINE 6:

NYSARC, INC. IS A UNITARY CORPORATION CONSISTING OF ITS 43 CHAPTERS AND 6

DCS. THE CORPORATION AND CHAPTER'S GOVERNING BODY IS THE BOARD OF

GOVERNORS REPRESENTING THE INDIVIDUAL MEMBERSHIP IN EACH CHAPTER'S

JURISDICTION. EACH CHAPTER HAS ONE PRIMARY AND ONE ALTERNATE GOVERNOR WITH

A WEIGHTED VOTE BASED ON MEMBERSHIP. THE CORPORATION THROUGH ITS BYLAWS

DELEGATES DAY-TO-DAY OPERATING AUTHORITY TO THE CHAPTERS' BOARD OF

DIRECTORS. THE EXECUTIVE COMMITTEE OF THE BOARD OF GOVERNORS (SEE PART VI,

LINE 7A BELOW) COMPRISES THE CORPORATION'S ELECTED OFFICERS AND EXERCISES

ALL POWERS OF THE BOARD OF GOVERNORS BETWEEN PLENARY MEETINGS OF THE

GOVERNORS, WHICH ARE HELD FOUR TIMES PER YEAR.

FORM 990, PART VI, SECTION A, LINE 7A:

THE ORGANIZATION'S MEMBERS ELECT THE OFFICERS AND DIRECTORS OF THE CHAPTER

ANNUALLY. IN TURN, THOSE CHAPTER BOARD MEMBERS NOMINATE THE OFFICERS AND

DIRECTORS OF THE CORPORATION.

FORM 990, PART VI, SECTION B, LINE 11B:

THE BOARD OF GOVERNORS DOES NOT REVIEW CHAPTERS' FORM 990S BEFORE THEY ARE

Name of the organization NYSARC, INC.	Employer identification number 13-5678837
--	--

FILED. EACH CHAPTER SUBMITS A COPY OF ITS FORM 990 TO THE CORPORATION'S BOARD OF GOVERNORS WHEN THE FORM IS FILED BY THE CHAPTER. NYSARC'S 990 IS REVIEWED BY MEMBERS OF THE EXECUTIVE COMMITTEE AND COPIES ARE AVAILABLE UPON REQUEST.

FORM 990, PART VI, SECTION B, LINE 12C:
COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY IS MONITORED BY THE AUDIT COMMITTEE.

FORM 990, PART VI, SECTION B, LINE 15:
ANNUAL BUDGET IS REVIEWED AND RECOMMENDED BY BUDGET AND FINANCE COMMITTEE, THEN SUBMITTED TO BOARD OF GOVERNORS. ALL EXECUTIVE STAFF SALARIES ARE APPROVED WITHIN THE ANNUAL BUDGET.

FORM 990, PART VI, SECTION C, LINE 19:
BY WRITTEN REQUEST.

FORM 990, PART XII, LINE 2C:
THE AUDIT COMMITTEE IS RESPONSIBLE FOR THE SELECTION AND OVERSIGHT OF THE AUDITORS. THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

NYSARC, INC. STATE OFFICE

**Financial Statements as of
May 31, 2019 and 2018
Together with
Independent Auditor's Report**

Bonadio & Co., LLP
Certified Public Accountants

INDEPENDENT AUDITOR'S REPORT

November 12, 2019

To the Board of Governors of
NYSARC, Inc.:

We have audited the accompanying financial statements of NYSARC, Inc. State Office (State Office), which comprise the statements of financial position as of May 31, 2019 and 2018, and the related statements of activities and changes in net assets and cash flows for the years then ended, and the statement of functional expenses for the year ended May 31, 2019, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the organization's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the organization's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of NYSARC, Inc. State Office as of May 31, 2019 and 2018, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

INDEPENDENT AUDITOR'S REPORT

(Continued)

Change in Accounting Principles

As described in Note 2 to the financial statements, NYSARC, Inc. State Office implemented Accounting Standards Updates 2016-14 and 2014-09, and the effects have been included in these financial statements. Our opinion is not modified with respect to this matter.

Report on Supplemental Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The schedule of administrative charges due from chapters is presented for the purpose of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Bonadio & Co., LLP

NYSARC, INC. STATE OFFICE
STATEMENTS OF FINANCIAL POSITION
MAY 31, 2019 AND 2018

	<u>2019</u>	<u>2018</u>	<u>2019</u>	<u>2018</u>
ASSETS				
CURRENT ASSETS:				
Cash	\$ 2,519,767	\$ 2,606,889		\$ 31,172
Investments	4,479,645	4,281,125		943,554
Administrative charges due from Chapters	168,677	82,094		543,708
Interest and other receivables	268,217	444,173		13,370
Prepaid expenses	43,167	23,050		
Due from NYSARC Trust	455,010	6,734		
	<u>7,934,483</u>	<u>7,444,065</u>		<u>1,531,804</u>
Total current assets				
PROPERTY AND EQUIPMENT:				
Equipment and furniture	1,828,142	1,741,720		1,196,157
Building improvements	62,989	62,989		857,856
Vehicles	102,577	102,577		150,144
	<u>1,993,708</u>	<u>1,907,286</u>		<u>5,167,763</u>
Less: Accumulated depreciation and amortization	<u>(1,768,042)</u>	<u>(1,679,037)</u>		<u>1,925,971</u>
				<u>93,954</u>
Total property and equipment, net	<u>225,666</u>	<u>228,249</u>		<u>359,028</u>
OTHER ASSETS:				
Due from Chapters	985,490	1,196,157		9,750,873
Private placement bond deposits	984,633	857,856		
Managed care phase II Chapter funds	-	150,144		
Worker's compensation excess loss fund	5,078,319	5,167,763		6,463,032
Debt service reserve fund	812,829	1,925,971		-
Charitable gift annuity reserve fund	419,100	426,373		6,463,032
Charitable remainder unitrust	334,808	359,028		9,897
	<u>8,615,179</u>	<u>10,083,292</u>		<u>6,472,929</u>
Total other assets				
	<u>\$ 16,775,328</u>	<u>\$ 17,755,606</u>		<u>\$ 17,755,606</u>
LIABILITIES AND NET ASSETS				
CURRENT LIABILITIES:				
Current portion of capital leases payable			\$ -	\$ -
Accounts payable and accrued expenses			1,147,220	943,554
Accrued payroll and compensated absences			392,942	543,708
Deferred revenue			32,509	13,370
			<u>1,572,671</u>	<u>1,531,804</u>
Total current liabilities				
OTHER LIABILITIES:				
Notes payable			460,826	1,196,157
Private placement bond deposits liability			984,633	857,856
Managed care phase II Chapter liability			-	150,144
Worker's compensation excess loss fund liability			5,078,319	5,167,763
Debt service reserve liability			812,829	1,925,971
Charitable gift annuity liability			81,674	93,954
Charitable remainder unitrust liability			334,808	359,028
			<u>7,753,089</u>	<u>9,750,873</u>
Total other liabilities				
Total liabilities			<u>9,325,760</u>	<u>11,282,677</u>
NET ASSETS:				
Without donor restrictions -			7,236,031	6,463,032
Operating (undesignated)			210,000	-
Board designated			7,446,031	6,463,032
Total net assets without donor restrictions			<u>3,537</u>	<u>9,897</u>
With donor restrictions				
Total net assets			<u>7,449,568</u>	<u>6,472,929</u>

The accompanying notes are an integral part of these statements.

NYSARC, INC. STATE OFFICE

STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS FOR THE YEARS ENDED MAY 31, 2019 AND 2018

	<u>2019</u>	<u>2018</u>
NET ASSETS WITHOUT DONOR RESTRICTIONS		
REVENUE AND SUPPORT:		
Fiduciary and NYSARC Trust fees	\$ 5,948,305	\$ 5,828,906
Administrative charges	3,799,735	3,656,546
Gain on sale of property	-	-
Investment income, net	208,704	190,272
Other	32,851	69,341
Contributions, grants and donations	100	170,046
Publication and seminar registration fees	27,351	43,189
Net assets released from restrictions	<u>6,360</u>	<u>-</u>
Total revenue and support	<u>10,023,406</u>	<u>9,958,300</u>
EXPENSES:		
Trust services	4,939,474	4,915,905
Administrative and general	3,179,182	2,928,086
Advocacy	430,736	571,842
Guardianship	406,029	332,086
Legislative and lobbying services	<u>84,986</u>	<u>175,014</u>
Total expenses	<u>9,040,407</u>	<u>8,922,933</u>
CHANGE IN NET ASSETS WITHOUT DONOR RESTRICTIONS	982,999	1,035,367
NET ASSETS WITH DONOR RESTRICTIONS		
Contributions	-	6,360
Net assets released from restrictions	<u>(6,360)</u>	<u>-</u>
CHANGE IN NET ASSETS WITH DONOR RESTRICTIONS	<u>(6,360)</u>	<u>6,360</u>
CHANGE IN NET ASSETS	976,639	1,041,727
NET ASSETS - beginning of year	<u>6,472,929</u>	<u>5,431,202</u>
NET ASSETS - end of year	<u>\$ 7,449,568</u>	<u>\$ 6,472,929</u>

The accompanying notes are an integral part of these statements.

NYSARC, INC. STATE OFFICE

**STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED MAY 31, 2019**

	<u>Trust Services</u>	<u>Administrative and General</u>	<u>Advocacy</u>	<u>Guardianship</u>	<u>Legislative and Lobbying Services</u>	<u>Total</u>
FUNCTIONAL EXPENSES:						
Salaries and fringe benefits -						
Professional, clerical and staff salaries	\$ 2,940,671	\$ 1,569,088	\$ 297,424	\$ 263,313	\$ 44,027	\$ 5,114,523
Fringe benefits	<u>910,353</u>	<u>436,627</u>	<u>71,697</u>	<u>63,471</u>	<u>10,611</u>	<u>1,492,759</u>
Total salaries and fringe benefits	<u>3,851,024</u>	<u>2,005,715</u>	<u>369,121</u>	<u>326,784</u>	<u>54,638</u>	<u>6,607,282</u>
Occupancy	375,183	183,891	15,655	1,238	-	575,967
Supplies	293,098	56,181	399	2,607	1,239	353,524
Professional fees	87,973	450,770	24,694	6,056	25,511	595,004
Committees, Board of Governors	2,171	204,489	760	-	-	207,420
Telephone and computer	105,133	73,872	(1,739)	7,346	2,607	187,219
Postage	33,455	4,791	(1,498)	2,738	530	40,016
Printing, publications and publicity	78,671	8,492	4,141	3,212	-	94,516
Travel and vehicle	33,553	50,913	851	12,797	461	98,575
Equipment, rent and maintenance	30,347	11,368	1,661	3,581	-	46,957
Training and seminars	12,191	49,526	3,072	993	-	65,782
Scholarships and awards	-	-	-	38,124	-	38,124
Membership dues	3,753	31,364	697	553	-	36,367
Non-capital equipment	62	4,411	-	-	-	4,473
Interest	<u>110</u>	<u>66</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>176</u>
Total functional expenses before depreciation and amortization	4,906,724	3,135,849	417,814	406,029	84,986	8,951,402
DEPRECIATION AND AMORTIZATION	<u>32,750</u>	<u>43,333</u>	<u>12,922</u>	<u>-</u>	<u>-</u>	<u>89,005</u>
	<u>\$ 4,939,474</u>	<u>\$ 3,179,182</u>	<u>\$ 430,736</u>	<u>\$ 406,029</u>	<u>\$ 84,986</u>	<u>\$ 9,040,407</u>

The accompanying notes are an integral part of these statements.

NYSARC, INC. STATE OFFICE

STATEMENTS OF CASH FLOWS FOR THE YEARS ENDED MAY 31, 2019 AND 2018

	<u>2019</u>	<u>2018</u>
CASH FLOW FROM OPERATING ACTIVITIES:		
Change in net assets	\$ 976,639	\$ 1,041,727
Adjustments to reconcile change in net assets to net cash flow from operating activities:		
Depreciation and amortization	89,005	118,391
Realized and unrealized gains on investments, net	(108,621)	(120,893)
Changes in:		
Administrative charges due from Chapters	(86,583)	61,061
Interest and other receivables	175,956	(141,168)
Prepaid expenses	(20,117)	(23,050)
Due from NYSARC Trust	(448,276)	2,437
Deposits	-	1,650
Accounts payable and accrued expenses	203,666	271,710
Accrued payroll and compensated absences	(150,766)	16,178
Deferred revenue	19,139	510
	<u>650,042</u>	<u>1,228,553</u>
Net cash flow from operating activities		
CASH FLOW FROM INVESTING ACTIVITIES:		
Proceeds from sale of investments	69,671	73,740
Purchase of investments	(152,337)	(133,607)
Purchases of property and equipment	(81,628)	(62,201)
(Increase) decrease in due from Chapters	210,667	(1,113,439)
Proceeds from sale of charitable gift annuity funds	88,613	2,672
Purchase of investments in charitable gift annuity funds	(93,367)	(4,738)
Charitable gift annuity liability payments	(12,280)	(7,139)
	<u>29,339</u>	<u>(1,244,712)</u>
Net cash flow from investing activities		
CASH FLOW FROM FINANCING ACTIVITIES:		
Net borrowings (repayments) on notes payable	(735,331)	1,113,439
Capital lease payments	(31,172)	(52,721)
	<u>(766,503)</u>	<u>1,060,718</u>
Net cash flow from financing activities		
CHANGE IN CASH	(87,122)	1,044,559
CASH - beginning of year	<u>2,606,889</u>	<u>1,562,330</u>
CASH - end of year	<u>\$ 2,519,767</u>	<u>\$ 2,606,889</u>

The accompanying notes are an integral part of these statements.

NYSARC, INC. STATE OFFICE

NOTES TO FINANCIAL STATEMENTS MAY 31, 2019 AND 2018

1. THE AGENCY

NYSARC, Inc. (NYSARC) is a membership corporation composed of 45 Community Chapters and their affiliates and six Developmental Center Chapters (the Chapters) located throughout New York State. NYSARC is governed by a Board of Governors that consists of at least one Governor per Chapter to a maximum of six based on NYSARC membership in the Chapter. The Chapters are unincorporated divisions of NYSARC granted geographic jurisdiction and operating authority by the Board of Governors that provide assistance to persons with intellectual and other developmental disabilities through program services, education and guardianship. NYSARC also fosters research and helps individuals and organizations working with persons with intellectual and other developmental disabilities, while disseminating information to develop a better understanding of and opportunities for persons with intellectual and other developmental disabilities.

NYSARC, Inc. State Office (State Office) is NYSARC's central office that provides oversight responsibilities on behalf of NYSARC's Board of Governors. The State Office provides the Chapters with technical and financing assistance and advocates on their behalf with New York State funding sources and legislative bodies. The State Office provides Trust Services which consist of management and administration of a variety of supplemental needs trusts for persons with disabilities. Trustees of the NYSARC Unrestricted Trusts Services and Pooled Life Income Trust are also the management board for the NYSARC Community Trusts and Third Party Agency Trust. The Trustees are appointed by the NYSARC Executive Committee. Designated State Office staff act as Trustee on behalf of NYSARC for the Community Trusts and Third Party Agency Trust. Trust Services also provide administrative services to individual and third party supplemental needs trusts. A designated State Office executive acts as a Trustee on behalf of NYSARC and the NYSARC Trustees serve as the management board. The State Office receives the majority of its support from administrative charges assessed on the Chapters and fees charged to the supplemental needs trusts.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements of the State Office have been prepared in conformity with accounting principles generally accepted in the United States of America (GAAP).

Change in Accounting Principles

In August 2016, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update (ASU) 2016-14, *Presentation of Financial Statements of Not-for-Profit Entities*, with the purpose of improving financial reporting by not-for-profit (NFP) entities.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Change in Accounting Principles (Continued)

ASU 2016-14 includes many changes affecting the presentation and accounting for the State Office's financial statements including:

- Reducing the number of classes of net assets from three to two (net assets with donor restrictions and net assets without donor restrictions);
- Requiring the presentation of expenses in both natural and functional classifications;
- Requiring qualitative and quantitative disclosure regarding the State Office's liquidity and availability of resources (Note 3); and
- Eliminating the requirement to disclose the components of investment returns as well as reporting investment return net of external and direct internal investment expenses.

ASU 2016-14 is effective for the State Office's year ended May 31, 2019, and was applied retrospectively with the exception of the disclosures regarding liquidity and availability of resources, and presentation of expenses in both natural and functional classification, which are presented for the current year only. The effects of this ASU have been included in these financial statements. There was no effect on total net assets or changes in net assets.

On May 31, 2019, the State Office adopted ASU 2014-09, *amending guidance on "Revenue from Contracts with Customers (Topic 606)"*. The objective of the ASU is to align the recognition of revenue with the transfer of promised goods or services provided to customers in an amount that reflects the consideration which the State Office expects to be entitled in exchange for those goods or services. Policies related to recognition of revenue for the State Office are discussed in Note 2. This ASU replaces most existing revenue recognition guidance under U.S. GAAP. Adoption of this standard did not have a material impact on the revenue recognized by the State Office for the period ending May 31, 2019.

Financial Reporting

The State Office reports its activities and the related net assets using the following net asset categories:

- **Net Assets Without Donor Restrictions**

Net assets without donor restrictions include resources that are available for the support of the State Office's operating activities. This category also includes resources designed by the Board of Director for specific purposes. At May 31, 2019, board designated net assets were \$210,000. There were no board designated net assets at May 31, 2018.

- **Net Assets With Donor Restrictions**

Net assets with donor restrictions include resources that have been donated to the State Office subject to restrictions as defined by the donor. Approximately \$3,500 are restricted for the purpose of providing scholarships as of both May 31, 2019 and 2018.

Fair Value Measurements

Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. GAAP provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). Valuations based on quoted prices in markets that are not active or for which all significant inputs are observable, directly or indirectly, are considered level 2 measurements.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Fair Value Measurements (Continued)

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs. The valuation methodology used for the State Office's investments is discussed in Note 4.

Revenue Recognition

Revenues are recognized through Chapter administrative charges when due. The State Office administrative charges are based on a formula approved annually by the Board of Governors. The formula is applied to the gross revenues of each Chapter for the period two years' prior in determining the amount due in the current year.

Fiduciary and NYSARC Trust fees are recognized through fees charged to beneficiaries' accounts. Fees vary depending on the type of trust.

Revenue is recognized when the State Office satisfies their performance obligations under contracts. The State Office's performance obligations include administrative oversight over the Chapters as well as the NYSARC trusts. The transaction price is based on established charges for services provided. The Organization expects to collect established charges. The State Office performs an assessment of each entity's' ability to pay for the services provided prior to performing services. Based on this, the State Office determined that there are no implicit price concessions provided to the Chapters or Trust.

A receivable is recognized to the extent revenue earned exceeds cash advances. Conversely, deferred revenue is recorded when cash advances exceed support and revenue earned.

Performance obligations for all of the State Office's services are provided and consumed at a point in time, not over time, and therefore these types of fees allocated to performance obligations are not left unsatisfied or partially unsatisfied at the end of the reporting period.

Revenues are charged and collected routinely throughout the month. Amounts that remain uncollected at the end of the month are recorded as accounts receivable. The allowance for doubtful accounts receivable is estimated by management based on periodic reviews of the collectability of specific accounts receivable considering historical experience and prevailing economic conditions. Accounts receivable are written off when they are determined to be uncollectible.

Prior to the adoption of ASC 606, the State Office provided an allowance for doubtful accounts based on review of the entity's ability to pay for services provided. After adoption of ASC 606, the State Office reviews individual contracts at the time of performance, in order to determine estimated uncollectable accounts due and records these implicit price concessions as a direct reduction to revenue. Based on this, the State Office determined that there are no implicit price concessions.

Contributions

The State Office reports gifts of cash and other assets as restricted if they are received with donor stipulations that limit the use of the donated assets. When the donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, net assets with donor restrictions are reclassified to net assets without donor restrictions.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Cash

Cash consists of bank demand deposit accounts and money market accounts, which, at times, may exceed federally insured limits. The State Office has not experienced any losses in such accounts and believes it is not exposed to any significant credit risk with respect to cash.

Investments

Investments are recorded at fair value based on quoted market prices. The State Office invests in various types of investment securities which include money market funds, and equity and fixed income mutual funds. These investment securities are exposed to various risks, such as interest rate, market and credit risk. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of the investment securities will occur in the near term and such changes could materially affect the amount reported in the accompanying financial statements.

Receivables

The State Office provides services for the Chapters, some of which are covered under the administrative charges. The State Office does not accrue interest on these receivables. The State Office has elected to record bad debts using the direct write-off method. GAAP requires that the allowance method be used to recognize bad debts; however, the effect of using the direct write-off method is not materially different from the results that would have been obtained under the allowance method.

Property and Equipment

Property and equipment are recorded at cost if purchased or fair value at date of donation. The State Office capitalizes all property and equipment additions greater than \$2,000 with useful lives in excess of one year. Depreciation and amortization of property and equipment is computed using the straight-line method over the assets' estimated useful lives, and, for leased equipment, over the shorter of the remaining lease term or useful lives, which range from four (4) to forty (10) years.

Private Placement Bond Deposits and Deposits Liability

Private placement bond deposits consist of money market funds. The deposits are received from a Chapter, in trust, on a monthly basis, to make semi-annual payments for private placement bonds. The State Office transmits the payment to the bank, when due, and the bank remits the payment to the bondholders.

Workers' Compensation Excess Loss Fund

Certain Chapters are involved in a workers' compensation group that was formed to generate savings in the cost of workers' compensation insurance through improved risk management and negotiated rates. The Workers' Compensation Excess Loss Fund includes money market deposits related to that program for the benefit of the specific Chapters involved.

Debt Service Reserve Fund and Debt Service Reserve Liability

Debt service reserve fund consists of money market funds. The reserve was established as a result of the change in the required debt service payments due to the New York State Dormitory Authority (DASNY) as a result of the decreased level of debt service reserves required to be held by DASNY.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Charitable Gift Annuity Reserve Fund and Liability

The charitable gift annuity reserve fund is a segregated custodian account held solely for the protection of all annuitants of NYSARC in accordance with section 1110(d) of the New York Insurance Law. NYSARC is obligated to maintain a reserve funded at the greater of \$100,000 or the amount required by section 4217 of the New York Insurance Law, plus 25% of such reserve. Charitable gift annuities are general obligations of NYSARC. The fund is invested in money market funds and mutual funds. The liability relating to the annuities at May 31, 2019 and 2018 are recorded at the present value of the expected payout.

Charitable Remainder Unitrust and Liability

A donor established a charitable remainder unitrust naming NYSARC as the beneficiary and the State Office serves as the trustee. The fund is invested in money market funds and mutual funds. The State Office has not recorded any revenue or expense related to this trust for the years ended May 31, 2019 and 2018.

Deferred Revenue

Deferred revenue represents cash received in advance for administrative charges due from the Chapters and is recognized ratably over the term of service.

Allocation of Functional Expenses

The statement of activities presents expenses by functional classification. Operation and maintenance of buildings and depreciation are allocated based on square footage. Management and general expenses include executive, financial administration, information systems, and personnel expenses and are allocated based on the ratio value method.

Income Taxes

NYSARC is a New York not-for-profit corporation and is exempt from income taxes as a charity qualified under Section 501(c)(3) of the Internal Revenue Code. NYSARC is classified by the Internal Revenue Service as an entity that is not a private foundation.

Estimates

The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.

Other Corporate Funds

NYSARC, Inc. administers draws and payments for a variety of financing (DASNY bonds, Senior Notes, TELP financing, Special Loan Program, etc.) and insurance programs on behalf of its operating chapters. These activities result in the receipt of corporate funds from the operating chapters with related disbursements to the financial institutions and insurance related entities. The activity related to this role is reflected within the operating chapters' financial statements and is not reflected within these statements.

Reclassifications

Certain reclassifications have been made to the prior year information to confirm to the current year presentation.

3. LIQUIDITY

The State Office is substantially supported by the Chapters and NYSARC Trust through administrative charges and fees. In addition, some support is received from donors. The following reflects the State Office's financial assets as of the statement of financial position date, reduced by amounts not available for general use because of contractual or donor-imposed restrictions within one year of the statement of financial position date.

The State Office's financial assets available to meet cash needs for general expenditures within one year are:

Financial assets		
Cash	\$	2,519,767
Investments		4,479,645
Due from NYSARC Trust		979,674
Due from Chapters		629,503
Restricted deposits		7,294,881
Interest and other receivables		<u>268,217</u>
		16,171,687
Less: Assets unavailable for general expenditure within on year, due to:		
Restricted deposits		(7,294,881)
Board designated		(210,000)
Net assets with donor restrictions		<u>(3,537)</u>
Financial assets available to meet cash need for general expenditure within one year	\$	<u>8,663,269</u>

The State Office's ability to meet its cash needs is highly dependent on timely collection of its accounts receivable. The State Office's accounts receivable are due primarily from the Chapters and NYSARC Trust. The State Office has arrangements with the Chapters to collect at varying times throughout the year. However, timeliness of these payments can sometimes be difficult to predict. Due to this factor, the State Office has two lines-of-credit available (see Note 5), which can be drawn upon. In addition, the State Office could also manage vendor relationships to extend payment terms where possible. The board designated investment reserves could be used by the State Office if approved by the Board if there was a shortage in liquidity.

4. INVESTMENTS

Investments consisted of the following at May 31:

	<u>2019</u>	<u>2018</u>
Money market funds	\$ 138,185	\$ 82,608
Mutual funds	<u>4,341,460</u>	<u>4,198,517</u>
	<u>\$ 4,479,645</u>	<u>\$ 4,281,125</u>

4. INVESTMENTS (Continued)

The following are measured at fair value on a recurring basis at May 31, 2019:

	Level 1 <u>Inputs</u>	Level 2 <u>Inputs</u>	Level 3 <u>Inputs</u>	<u>Total</u>
Investments -				
Money market funds	\$ 138,185	\$ -	\$ -	\$ 138,185
Equity mutual funds	1,574,428	-	-	1,574,428
Fixed income mutual funds	2,767,032	-	-	2,767,032
Charitable gift annuity reserve -				
Money market funds	12,882			12,882
Equity mutual funds	233,516	-	-	233,516
Fixed income mutual funds	172,702	-	-	172,702
Charitable remainder unitrust -				
Money market funds	3,823	-	-	3,823
Equity mutual funds	186,341	-	-	186,341
Fixed income mutual funds	144,644	-	-	144,644
Debt service reserve fund -				
Money market funds	812,829	-	-	812,829
Private placement bond deposits -				
Money market funds	<u>984,633</u>	<u>-</u>	<u>-</u>	<u>984,633</u>
	<u>\$ 7,031,015</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 7,031,015</u>

The following are measured at fair value on a recurring basis at May 31, 2018:

	Level 1 <u>Inputs</u>	Level 2 <u>Inputs</u>	Level 3 <u>Inputs</u>	<u>Total</u>
Investments -				
Money market funds	\$ 82,608	\$ -	\$ -	\$ 82,608
Equity mutual funds	1,517,767	-	-	1,517,767
Fixed income mutual funds	2,680,750	-	-	2,680,750
Charitable gift annuity reserve -				
Money market funds	4,357	-	-	4,357
Equity mutual funds	265,617	-	-	265,617
Fixed income mutual funds	156,399	-	-	156,399
Charitable remainder unitrust -				
Money market funds	7,185	-	-	7,185
Equity mutual funds	207,018	-	-	207,018
Fixed income mutual funds	144,825	-	-	144,825
Debt service reserve fund -				
Money market funds	1,925,971	-	-	1,925,971
Private placement bond deposits -				
Money market funds	<u>857,856</u>	<u>-</u>	<u>-</u>	<u>857,856</u>
	<u>\$ 7,850,353</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 7,850,353</u>

Money market funds, equity mutual funds, fixed income mutual funds, and other mutual funds were valued based on quoted market prices of the investments on the last business day of the fiscal year. There were no changes to the valuation techniques during fiscal year 2019 and 2018.

5. FINANCING ARRANGEMENTS

Note Payable

The State Office has available three working capital notes totaling \$20,000,000 from a bank through NYSARC's special loan program. Amounts borrowed bear interest at LIBOR plus 200 basis points. There are currently no terms established for the repayment of the principal. The balance due on these loans at year-end relating to the managed care initiative and workers compensation adjustment that was financed on behalf of the Chapters is \$11,517 and \$36,421 at May 31, 2019 and 2018, respectively. These amounts are included as a receivable due from Chapters in the accompanying statements of financial position.

Line-of-Credit

The State Office also has available a \$1,000,000 annually renewable bank line-of-credit. Amounts borrowed bear interest at Prime rate minus one. There were no outstanding borrowings against the line-of-credit at May 31, 2019 and 2018.

In February 2018, the State Office obtained a \$5,000,000 bank special loan line-of-credit to finance the cost of purchasing the Workers Compensation Assumption of Liability Policy (ALP) on behalf of certain Chapters. Payments are received monthly. There are two interest rate options available. Amounts borrowed for 30 days or more will bear interest on 30/60 day LIBOR plus 200 basis points. Interest on brief duration loans (e.g. five days to three weeks) will be calculated utilizing an interest rate on bank Prime Plus 100 basis points. Outstanding borrowings against the line-of-credit at May 31, 2019 and 2018 was \$449,309 and \$1,159,736, respectively, with an interest rate of 3.398%.

Supplemental Cash Flow Information

Interest paid and expensed during the years ended May 31, 2019 and 2018, was approximately \$200 and \$1,000, respectively.

6. PENSION PLAN

The State Office maintains a defined contribution pension plan covering substantially all employees. Contributions for the years ended May 31, 2019 and 2018 were 11% of covered payroll. The total pension expense for the years ended May 31, 2019 and 2018 was approximately \$395,000 and \$400,000, respectively.

7. COMMITMENTS

The State Office leases equipment and office space under the terms of operating leases. The future minimum operating lease payments under non-cancelable leases having initial or remaining lease terms in excess of one year as of May 31, 2019, are as follows:

2020	\$	434,064
2021		440,469
2022		440,469
2023		439,378
2024		427,380
Thereafter		<u>35,615</u>
	\$	<u>2,217,375</u>

Rent expense under these agreements was approximately \$468,000 and \$462,000 during 2019 and 2018, respectively.

8. CONTINGENCIES

Scholarships

The State Office awarded approximately \$24,000 in scholarships to eligible students in the field of intellectual and other developmental disabilities during both 2019 and 2018. These awards are expensed as student present evidence of satisfactory completion of their studies. The scholarships are payable over a period not to exceed four years. Scholarships of \$25,750 and \$11,500 were paid and expensed in 2019 and 2018, respectively. Unpaid scholarships of \$167,250 and \$138,000 are not included in accounts payable at May 31, 2019 and 2018, respectively, because conditions for payment have not been met.

Debt Obligations

NYSARC has established various sources of capital for Chapters including tax-exempt bonds, tax-exempt leasing, and commercial loan programs. Loans through these programs are administered by the State Office and require authorization of the NYSARC Executive Committee. Prior to the 2009A series bonds, security for the tax exempt bonds was the pledged revenue of the participating Chapters and for individual loans in excess of \$3 million a mortgage on the financed property was given. For the 2009A and subsequent bond series, in addition to pledging revenues, participating Chapters were required to mortgage all real property associated with the financed projects. NYSARC is the owner of the program operating certificates (operating licenses) that allow Chapters to bill for provided services. NYSARC, through its Chapters or their controlled affiliates, holds the title to the financed real estate.

As of May 31, 2019, NYSARC had outstanding approximately \$79 million in tax-exempt bonds, \$14 million of taxable senior notes, \$19 million of tax-exempt leases, and \$35 million in commercial loans. The debt is reported in the financial statements of the Chapters that borrowed the money. The tax-exempt leases are secured by the financed equipment and the commercial loans are secured by a negative pledge. All of the aforementioned debt is the obligation of NYSARC, including the State Office, in the event of default. Fees and expenses relating to the loans are charged to and paid by the participating Chapters.

NYSARC as a single entity is subject to the statutory federal limitation of \$150 million in non-hospital tax-exempt bonds. As of May 31, 2019, the Chapters and their related holding companies have approximately \$8 million of tax-exempt bonds subject to that limit.

Other Corporate Funds

As described in Note 2, NYSARC administers draws and payments on a variety of financing and insurance programs on behalf of its operating chapters. As of May 31, 2019 and 2018, NYSARC, Inc. held approximately \$399,900 and \$504,000, respectively, in financing and insurance related payments due to certain financial institutions and insurance entities. No provision for the asset and offsetting liability is reflected within the Statement of Financial Position.

8. RELATED PARTY TRANSACTIONS

The State Office charged the Chapters annual administrative fees of approximately \$3.8 million and \$3.6 million in 2019 and 2018, respectively. The amount receivable relating to those fees was approximately \$169,000 and \$82,000 at May 31, 2019 and 2018, respectively.

The State Office provides management and administrative services to a variety of supplemental needs trusts. Fees charged for those services were approximately \$5.9 million and \$5.8 million in 2019 and 2018, respectively. The amount receivable relating to those fees was approximately \$455,000 and \$7,000 at May 31, 2019 and 2018. During 2019 and 2018, State Office also received grants in the amount of \$150,000 from NYSARC Trust to support guardianship activities at the State Office.

9. SUBSEQUENT EVENTS

Subsequent events have been evaluated through November 12, 2019, which is the date the financial statements were issued.

**ADMINISTRATIVE CHARGES DUE FROM CHAPTERS
MAY 31, 2019 AND 2018**

	<u>2019</u>	<u>2018</u>
CHAPTER:		
Clinton	\$ 5,334	\$ -
Columbia	4,411	4,331
Delaware	2,382	2,411
Erie	8,964	-
Franklin	-	3,487
Herkimer	9,673	-
Nassau	22,833	-
NYC	22,833	41,500
Niagara	4,913	-
Oswego	231	-
Otsego	7,285	
Putnam	18,336	4,406
Saratoga	5,141	5,336
Schenectady	5,792	5,967
Schuyler	-	1,648
Seneca-Cayuga	5,118	-
Suffolk	27,308	13,008
Sullivan	6,543	-
Ulster-Greene	<u>11,580</u>	<u>-</u>
Total	<u>\$ 168,677</u>	<u>\$ 82,094</u>

NOTE: As of September 2019, the administrative charges due from Chapters at May 31, 2019 have been paid in full.