

Forms 990 / 990-EZ Return Summary

For calendar year 2019, or tax year beginning **07/01/19** , and ending **06/30/20**

**Chenango County Council of the
Arts, Inc**

22-2187522

Net Asset / Fund Balance at Beginning of Year		<u>911,042</u>
Revenue		
Contributions	<u>262,490</u>	
Program service revenue	<u>11,397</u>	
Investment income	<u>14,855</u>	
Capital gain / loss	<u>-2,739</u>	
Fundraising / Gaming:		
Gross revenue	<u>23,511</u>	
Direct expenses	<u>7,473</u>	
Net income	<u>16,038</u>	
Other income	<u>26,971</u>	
Total revenue		<u>329,012</u>
Expenses		
Program services	<u>276,461</u>	
Management and general	<u>70,891</u>	
Fundraising	<u>9,089</u>	
Total expenses		<u>356,441</u>
Excess / (deficit)		<u>-27,429</u>
Changes		<u>19,280</u>
Net Asset / Fund Balance at End of Year		<u><u>902,893</u></u>

Reconciliation of Revenue	
Total revenue per financial statements	<u>348,292</u>
Less:	
Unrealized gains	<u>-728</u>
Donated services	<u>20,008</u>
Recoveries	<u> </u>
Other	<u> </u>
Plus:	
Investment expenses	<u> </u>
Other	<u> </u>
Total revenue per return	<u><u>329,012</u></u>

Reconciliation of Expenses	
Total expenses per financial statements	<u>356,441</u>
Less:	
Donated services	<u> </u>
Prior year adjustments	<u> </u>
Losses	<u> </u>
Other	<u> </u>
Plus:	
Investment expenses	<u> </u>
Other	<u> </u>
Total expenses per return	<u><u>356,441</u></u>

Balance Sheet			
	Beginning	Ending	Differences
Assets	<u>925,301</u>	<u>923,303</u>	
Liabilities	<u>14,259</u>	<u>20,410</u>	
Net assets	<u><u>911,042</u></u>	<u><u>902,893</u></u>	<u><u>-8,149</u></u>

Miscellaneous Information

Amended return _____
Return / extended due date 05/17/21
Failure to file penalty _____

**IRS e-file Signature Authorization
for an Exempt Organization**

OMB No. 1545-1878

Form **8879-EO**

For calendar year 2019, or fiscal year beginning 7/01, 2019, and ending 6/30, 2020

2019

Department of the Treasury
Internal Revenue Service

**u Do not send to the IRS. Keep for your records.
u Go to www.irs.gov/Form8879EO for the latest information.**

Name of exempt organization **Chenango County Council of the Arts, Inc** Employer identification number **22-2187522**

Name and title of officer **Alecia O'Oeill
Executive Director**

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a**, **2a**, **3a**, **4a**, or **5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b**, **2b**, **3b**, **4b**, or **5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a Form 990 check here <input checked="" type="checkbox"/>	b Total revenue , if any (Form 990, Part VIII, column (A), line 12)	1b <u>329,012</u>
2a Form 990-EZ check here <input type="checkbox"/>	b Total revenue , if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b _____
5a Form 8868 check here <input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5b _____

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2019 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize Cwynar & Company, CPAs, PLLC to enter my PIN 14815 as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature } _____ Date } 01/11/21

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

16318414815
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2019 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature } Stephen J Locke, CPA Date } 01/11/21

ERO Must Retain This Form — See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2019)

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
u Do not enter social security numbers on this form as it may be made public.
u Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2019 calendar year, or tax year beginning 07/01/19, and ending 06/30/20

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization: **Chenango County Council of the Arts, Inc**
 Doing business as:
 Number and street (or P.O. box if mail is not delivered to street address): **27 W Main Street #8**
 Room/suite:
 City or town, state or province, country, and ZIP or foreign postal code: **Norwich NY 13815**

D Employer identification number: **22-2187522**

E Telephone number: **607-336-2787**

F Name and address of principal officer:
Joe Skundrich
27 West Main Street
Norwich NY 13815

G Gross receipts \$: **479,119**

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) () t (insert no.) 4947(a)(1) or 527

J Website: **u www.chenangoarts.org**

K Form of organization: Corporation Trust Association Other **u**

L Year of formation: **1975** **M** State of legal domicile: **NY**

H(c) Group exemption number **u**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: To support life-enriching Art throughout the greater chenango region		
	2 Check this box <input type="checkbox"/> u if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	10
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	10
	5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	5
	6 Total number of volunteers (estimate if necessary)	6	4
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 39	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	275,315	262,490
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	25,914	11,397
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	14,201	12,116
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	62,456	43,009
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	377,886	329,012
	14 Benefits paid to or for members (Part IX, column (A), line 4)	138,564	130,591
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0
	16a Professional fundraising fees (Part IX, column (A), line 11e)	130,426	115,778
	b Total fundraising expenses (Part IX, column (D), line 25) u	9,089	0
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	146,229	110,072
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	415,219	356,441	
19 Revenue less expenses. Subtract line 18 from line 12	-37,333	-27,429	
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)	925,301	923,303
	22 Net assets or fund balances. Subtract line 21 from line 20	14,259	20,410
		911,042	902,893

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: **Alecia O'Oeill** Date: _____
 Type or print name and title: **Executive Director**

Paid Preparer Use Only

Print/Type preparer's name: **Stephen J Locke, CPA** Preparer's signature: **Stephen J Locke, CPA** Date: **01/11/21** Check if self-employed PTIN: **P01654690**

Firm's name: **Cwynar & Company, CPAs, PLLC** Firm's EIN: **16-1490428**
 Firm's address: **12 S Broad St**
Norwich, NY 13815 Phone no.: **607-334-3838**

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

1 Briefly describe the organization's mission:
To Support Life-Enriching Art Throughout the Greater Chenango Region

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **155,140** including grants of \$ **128,591**) (Revenue \$)
Decentralization Program - The Organization receives a grant from the New York State Council of the Arts for reallcation to other eligible organizations in Chenango, Otsego and Broome County. The Purpose of this program is to promote, extend, and enhance community arts in the county.

4b (Code:) (Expenses \$ **63,679** including grants of \$) (Revenue \$ **11,397**)
Performances Program - The Organization sponsors various plays and performances for the benefit of the community.

4c (Code:) (Expenses \$ **33,823** including grants of \$) (Revenue \$)
Visual Arts Program - The Organization provides and manages a gallery for artists to display their work.

4d Other program services (Describe on Schedule O.)
(Expenses \$ **23,819** including grants of \$ **2,000**) (Revenue \$)

4e Total program service expenses **u** **276,461**

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)? If "Yes," complete Schedule A	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part 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? If "Yes," complete Schedule C, Part II		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? If "Yes," complete Schedule C, Part III		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? If "Yes," complete Schedule D, Part 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? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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? If "Yes," complete Schedule D, Part IV		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	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? If "Yes," complete Schedule D, Part VI	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? If "Yes," complete Schedule D, Part VII		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? If "Yes," complete Schedule D, Part VIII		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? If "Yes," complete Schedule D, Part IX	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	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)? If "Yes," complete Schedule D, Part X		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		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? If "Yes," complete Schedule F, Parts I and IV		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? If "Yes," complete Schedule F, Parts II and IV		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? If "Yes," complete Schedule F, Parts III and IV		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? If "Yes," complete Schedule G, Part I (see instructions)		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? If "Yes," complete Schedule G, Part II	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		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? If "Yes," complete Schedule I, Parts I and II		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>		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>		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>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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>		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>		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		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, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		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>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		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>		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>		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>		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		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>		
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>		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>		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.	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		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X

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

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a 5		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country u See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X

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

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 on Schedule O.		
	1a 10		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 10		
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, 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 on 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?		
10b			
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?		
12b			
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done		
12c			
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?		
16b			

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **u 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 on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **u**

Alecia O'Oeill **27 W Main Street #8** **NY 13815** **607-336-2787**
Norwich

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. See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted 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) Alecia O'Oeill Executive Director	40.00 40.00			X				36,366	0	0
(2) Jim Baldwin Director	0.00 0.00	X						0	0	0
(3) Annette Burns Treasurer	0.00 0.00	X		X				0	0	0
(4) Melissa DeCordova Secretary	0.00 0.00	X		X				0	0	0
(5) Mary El Emerson Vice President	0.00 0.00	X		X				0	0	0
(6) Anne English Director	0.00 0.00	X						0	0	0
(7) Hon. Mike Genute Director	0.00 0.00	X						0	0	0
(8) Richard Heim Director	0.00 0.00	X						0	0	0
(9) TJ Moorehead Director	0.00 0.00	X						0	0	0
(10) Denise Reppert Director	0.00 0.00	X						0	0	0
(11) Joe Skundrich President	0.00 0.00	X		X				0	0	0

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b	4,865				
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	165,000				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	92,625				
	g Noncash contributions included in lines 1a-1f	1g	\$				
	h Total. Add lines 1a-1f	u	262,490				
Program Service Revenue			Business Code				
	2a Admissions		711110	8,698	8,698		
	b Program workshop fees			2,699	2,699		
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f	u	11,397					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	u	14,855			14,855	
	4 Income from investment of tax-exempt bond proceeds	u					
	5 Royalties	u					
	6a Gross rents	6a	(i) Real	11,490			
			(ii) Personal				
	b Less: rental expenses	6b					
	c Rental inc. or (loss)	6c	11,490				
	d Net rental income or (loss)	u	11,490			11,490	
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities	139,895			
			(ii) Other				
	b Less: cost or other basis and sales exps.	7b	142,634				
c Gain or (loss)	7c	-2,739					
d Net gain or (loss)	u	-2,739	-2,739				
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a		23,511				
		b Less: direct expenses	8b	7,473			
		c Net income or (loss) from fundraising events	u	16,038			16,038
9a Gross income from gaming activities. See Part IV, line 19	9a						
		b Less: direct expenses	9b				
		c Net income or (loss) from gaming activities	u				
10a Gross sales of inventory, less returns and allowances	10a						
		b Less: cost of goods sold	10b				
		c Net income or (loss) from sales of inventory	u				
Miscellaneous Revenue			Business Code				
	11a Misc Income			15,481	15,481		
	b						
	c						
	d All other revenue						
e Total. Add lines 11a-11d	u	15,481					
12 Total revenue. See instructions	u	329,012	24,139	0	42,383		

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	130,591	130,591		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
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				
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	79,707	52,607	23,115	3,985
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	29,865	19,711	8,661	1,493
10 Payroll taxes	6,206	4,096	1,800	310
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	6,999		6,999	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	2,755		2,755	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	27,834	22,027	5,280	527
12 Advertising and promotion	3,478	2,295	1,009	174
13 Office expenses	3,913	1,702	2,082	129
14 Information technology				
15 Royalties				
16 Occupancy	12,154	8,022	3,525	607
17 Travel	59	39	17	3
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	33,507	22,115	9,717	1,675
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	15,653	10,801	4,852	
23 Insurance	3,720	2,455	1,079	186
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a				
b				
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	356,441	276,461	70,891	9,089
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 checked="" 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) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest-bearing	12,974	1	15,130
	2	Savings and temporary cash investments	8,292	2	8,347
	3	Pledges and grants receivable, net	20,008	3	20,008
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	2,844	9	5,219
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	642,795		
		10a			
	b	Less: accumulated depreciation	451,251	10c	191,544
		10b			
	11	Investments—publicly traded securities	377,159	11	391,847
	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	296,827	15	291,208	
16	Total assets. Add lines 1 through 15 (must equal line 33)	925,301	16	923,303	
Liabilities	17	Accounts payable and accrued expenses		17	105
	18	Grants payable		18	
	19	Deferred revenue	2,202	19	3,500
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	12,057	25	16,805
	26	Total liabilities. Add lines 17 through 25	14,259	26	20,410
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.				
	27	Net assets without donor restrictions	589,207	27	585,627
	28	Net assets with donor restrictions	321,835	28	317,266
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	911,042	32	902,893
33	Total liabilities and net assets/fund balances	925,301	33	923,303	

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	329,012
2	Total expenses (must equal Part IX, column (A), line 25)	2	356,441
3	Revenue less expenses. Subtract line 2 from line 1	3	-27,429
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	911,042
5	Net unrealized gains (losses) on investments	5	-728
6	Donated services and use of facilities	6	20,008
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	902,893

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 checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2b	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 type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	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
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

u Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization Chenango County Council of the Arts, Inc	Employer identification number 22-2187522
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

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

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

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

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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	327,458	310,179	307,641	275,315	282,498	1,503,091
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	327,458	310,179	307,641	275,315	282,498	1,503,091
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						1,503,091

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4	327,458	310,179	307,641	275,315	282,498	1,503,091
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	13,784	11,779	11,065	9,865	10,466	56,959
9 Net income from unrelated business activities, whether or not the business is regularly carried on	21,222	18,439	26,563	21,189	11,490	98,903
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	13,202	13,440	6,434	5,402	4,806	43,284
11 Total support. Add lines 7 through 10						1,702,237

12 Gross receipts from related activities, etc. (see instructions) 12 210,909

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**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	88.30 %
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	78.48 %

16a 33 1/3% support test—2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included 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.)						
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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	%

- 19a 33 1/3% support tests—2019.** 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—2018.** 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 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 2019 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-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Part II, Line 10 - Other Income Detail

Other Income \$ 30,448

Distribution from 3rd party Trust \$ 12,836

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2019

Name of the organization

**Chenango County Council of the
Arts, Inc**

Employer identification number

22-2187522

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(**3**) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ► \$

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

Name of organization

Chenango County Council of the

Employer identification number

22-2187522

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NYS Council on the Arts 300 Park Ave. S, 10th Fl. New York NY 10010	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	NBT Bank 52 South Broad Street Norwich NY 13815	\$ 19,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	Chenango County Board of Supervisors 5 Court Street Norwich NY 13815	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

u 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. u Attach to Form 990.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization

Chenango County Council of the Arts, Inc

Employer identification number

22-2187522

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, aggregate value of grants, and questions about donor advised funds 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(s) of conservation easements, total number of easements, total acreage, and 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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting art, historical treasures, or other similar 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 make 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 program
 - 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	385,451	389,906	492,183	469,667	495,444
b Contributions	25,000			500	
c Net investment earnings, gains, and losses	11,833	13,584	23,634	50,321	2,244
d Grants or scholarships					
e Other expenditures for facilities and programs	19,335	15,448	122,657	25,000	24,840
f Administrative expenses	2,756	2,591	3,254	3,305	3,181
g End of year balance	400,193	385,451	389,906	492,183	469,667

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment **u** **100.00** %
 - b Permanent endowment **u** %
 - c Term endowment **u** %
- 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 | | X |
| (ii) Related organizations | | X |
- b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		507,831	318,080	189,751
d Equipment		74,181	73,805	376
e Other		60,783	59,366	1,417
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) u				191,544

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. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	u	

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. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	u	

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) Promise to Give	206,068
(2) Willard Trust	85,140
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	u 291,208

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) NBT Line of Credit	15,678
(3) Accrued payroll expenses	1,127
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	u 16,805

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1	348,292
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments	2a	-728	
	b Donated services and use of facilities	2b	20,008	
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII.)	2d		
	e Add lines 2a through 2d	2e	19,280	
3	Subtract line 2e from line 1		3	329,012
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b	4c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	329,012

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

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

1	Total expenses and losses per audited financial statements		1	356,441
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2a		
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII.)	2d		
	e Add lines 2a through 2d	2e		
3	Subtract line 2e from line 1		3	356,441
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b	4c		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	356,441

Part XIII Supplemental Information.

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

Part V, Line 4 - Intended Uses for Endowment Funds

The Organization has adopted investment and spending policies for endowment assets that attempt to provide a predictable stream of funding to support the Organization by its endowment while seeking to maintain the purchasing power of the endowment assets.

Total returns generated by the endowment fund may be used for ongoing operations of the Organization, but may not exceed 5% of market value of the fund at December 31 prior to the current yearend.

The principal shall not be invaded in the absence of critical or unusual circumstances and requires the approval of the Board of Directors at the

Part XIII Supplemental Information *(continued)*

recommendation of the Finance Committee. Earnings not used to supplement
the operating budget shall become part of the fund's principal.

**SCHEDULE G
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

⚡ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization

**Chenango County Council of the
Arts, Inc**

Employer identification number

22-2187522

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

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

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

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total							

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

.....

.....

.....

.....

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		Fundraising (event type)	(event type)	None (total number)	(add col. (a) through col. (c))
Revenue	1	Gross receipts	23,511		23,511
	2	Less: Contributions			
	3	Gross income (line 1 minus line 2)	23,511		23,511
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	7,473		7,473
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
11	Net income summary. Subtract line 10 from line 3, column (d)				16,038

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

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

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

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

b If "Yes," explain: _____

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

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

2019

Department of the Treasury
Internal Revenue Service

u Attach to Form 990 or 990-EZ.

Open to Public Inspection

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

Name of the organization	Chenango County Council of the Arts, Inc	Employer identification number 22-2187522
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Form 990, Part III, Line 4d - All Other Accomplishments

Arts In Education - The Organization Seeks to Integrate Arts Into The

Form 990, Part VI, Line 6 - Classes of Members or Stockholders

THERE SHALL BE THREE CLASSES OF MEMBERS:

INDIVIDUAL - SECTION (1) (A) MEMBERSHIP SHALL BE OPEN TO ANY INDIVIDUAL WHO IS INTERESTED IN AND SUPPORTS THE PURPOSES OF THE COUNCIL AND WHO SHALL PAY THE MEMBERSHIP CONTRIBUTION AS FIXED BY THE BOARD OF DIRECTORS. SECTION (1) (B) EACH SUCH INDIVIDUAL MEMBER SHALL BE ENTITLED TO ONE VOTE ON EACH MATTER SUBMITTED TO A VOTE OF THE MEMBERS.

NON-FOR-PROFIT ORGANIZATIONS - SECTION (2) (A) MEMBERSHIP SHALL BE OPEN TO ANY NOT-FOR-PROFIT ORGANIZATION WHICH IS INTERESTED IN AND SUPPORTS THE PURPOSE OF THE COUNCIL AND WHICH SHALL PAY MEMBERSHIP CONTRIBUTION AS FIXED BY THE BOARD OF DIRECTORS. SECTION (2)(B) EACH SUCH NOT-FOR-PROFIT ORGANIZATION, THROUGH ITS DESIGNATED REPRESENTATIVE, SHALL BE ENTITLED TO ONE VOTE ON EACH MATTER SUBMITTED TO A VOTE OF THE MEMBERS.

BUSINESS MEMBERS - SECTION (3) (A) MEMBERSHIP SHALL BE OPEN TO ANY BUSINESS WHICH IS INTERESTED IN AND SUPPORTS THE PURPOSE OF THE COUNCIL AND WHICH SHALL PAY MEMBERSHIP CONTRIBUTION AS FIXED BY THE BOARD OF DIRECTORS. SECTION (3) (B) EACH SUCH BUSINESS THROUGH ITS DESIGNATED REPRESENTATIVE SHALL BE ENTITLED TO ONE VOTE ON EACH MATTER SUBMITTED TO A VOTE OF THE MEMBERS.

SECTION (4) (A) MEMBERSHIP CONTRIBUTION - THE BOARD OF DIRECTORS SHALL, AT ITS DISCRETION, ESTABLISH THE FEE SCHEDULES FOR THE VARIOUS CLASSES OF MEMBERSHIP.

Name of the organization

Employer identification number

Chenango County Council of the

22-2187522

SECTION (5) (A) AT THE BOARD OF DIRECTORS DISCRETION, OTHER CLASSES OF MEMBERSHIP MAY BE ESTABLISHED BY A VOTE OF A MAJORITY OF THE BOARD OF DIRECTORS.

Form 990, Part VI, Line 7a - Election of Members and Their Rights

EACH MEMBERS IS ALLOWED ONE VOTE AT THE ANNUAL MEETING TO ELECT THE BOARD OF DIRECTORS. IN LIEU OF AN ANNUAL MEETING, A BALLOT LISTING NOMINEES TO THE BOARD OF DIRECTORS AND A SPACE FOR WRITE-IN NOMINATIONS WILL BE SENT TO THE MEMBERSHIP FOR TABULATION PRIOR TO THE JUNE BOARD MEETING.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

THE RETURN IS GIVEN TO THE PRESIDENT AND THE TREASURER TO REVIEW. THE REMAINING BOARD MEMBERS ARE NOTIFIED THAT THE RETURN IS BE AVAILABLE FOR REVIEW AT THE OFFICE.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

EVERY YEAR IN NOVEMBER, CONFLICT OF INTEREST FORMS ARE HANDED OUT AT THE BOARD MEETING AND FILLED OUT AT THAT TIME. THE FORMS ARE KEPT AND REFERRED TO AS NEEDED ESPECIALLY WHEN BOARD APPROVES DEC FUNDING FOR THE YEAR. ANY BOARD MEMBER WITH A CONFLICT OF INTEREST IS RECUSED AND DOES NOT VOTE.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

EXECUTIVE COMMITTEE REVIEWS EXECUTIVE COMPENSATION ANNUALLY AND A DISCUSSION IS HELD WITH THE BOARD DURING BUDGETING TIME. PERIODIC UPDATES ON COMPENSATION IS RECEIVED FROM NATIONAL ADVOCACY/SERVICE ORGANIZATIONS WHICH IS REVIEWED BY THE EXECUTIVE COMMITTEE.

Name of the organization

Employer identification number

Chenango County Council of the

22-2187522

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

DOCUMENTS ARE AVAILABLE AT THE OFFICE UPON REQUEST

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

u Attach to your tax return.

u Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2019

Attachment Sequence No. **179**

Name(s) shown on return **Chenango County Council of the Arts, Inc**

Identifying number
22-2187522

Business or activity to which this form relates

Indirect Depreciation

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,020,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,550,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2018 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2020. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	15,293

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2019	17	359
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input checked="" type="checkbox"/> u <input type="checkbox"/>		

Section B—Assets Placed in Service During 2019 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property					
b	5-year property					
c	7-year property					
d	10-year property					
e	15-year property					
f	20-year property					
g	25-year property		25 yrs.		S/L	
h	Residential rental property		27.5 yrs.	MM	S/L	
i	Nonresidential real property		39 yrs.	MM	S/L	

Section C—Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	30-year		30 yrs.	MM	S/L	
d	40-year		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	15,652
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2019)

22-2187522

Federal Asset Report

FYE: 6/30/2020

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
Prior MACRS:									
115	Lobby Rennovations	6/30/18	13,999			13,999	39 MMS/L	374	359
			<u>13,999</u>			<u>13,999</u>		<u>374</u>	<u>359</u>
Other Depreciation:									
1	Baldwin SF-10 Grand Piano	4/26/96	19,500			19,500	7 MO S/L	19,500	0
2	Podium	5/30/96	1,743			1,743	7 MO S/L	1,743	0
3	TV	10/18/96	299			299	7 MO S/L	299	0
4	Dressing Room Chairs	9/23/96	670			670	7 MO S/L	670	0
5	Samsung SP - Printer	11/15/96	220			220	5 MO S/L	220	0
6	IBM	12/31/96	5,879			5,879	5 MO S/L	5,879	0
7	Stage	2/21/97	2,500			2,500	7 MO S/L	2,500	0
8	Stage	3/07/97	478			478	7 MO S/L	478	0
9	Lighting	5/30/97	467			467	7 MO S/L	467	0
10	Piano Dolly	6/26/97	405			405	7 MO S/L	405	0
11	Lighting Equipment	5/10/98	8,197			8,197	7 MO S/L	8,197	0
12	Loft Space	10/15/98	9,538			9,538	31 MO S/L	9,303	235
13	Auditorium Doors	4/15/89	4,750			4,750	31 MO S/L	4,560	150
14	HVAC Equipment - AUD	4/12/91	16,430			16,430	31 MO S/L	14,742	522
15	Ductwork - AUD	4/12/91	8,000			8,000	31 MO S/L	7,175	254
16	Grilles - AUD	4/12/91	1,500			1,500	31 MO S/L	1,352	48
17	Gas Piping - AUD	4/12/91	2,000			2,000	31 MO S/L	1,785	63
18	Electric Service - AUD	4/12/91	5,300			5,300	31 MO S/L	4,749	168
19	Wire HVAC - AUD	4/12/91	1,500			1,500	31 MO S/L	1,352	48
20	Ceiling Fans - AUD	4/12/91	2,085			2,085	31 MO S/L	1,866	67
21	2 Economizers	4/12/91	2,548			2,548	31 MO S/L	2,287	81
22	Architechtural Plans - AUD	6/01/96	13,860			13,860	39 MO S/L	8,197	355
23	Architechtural Plans - AUD	6/01/96	2,520			2,520	39 MO S/L	1,498	65
24	Architechtural Plans - AUD	6/01/96	1,620			1,620	39 MO S/L	967	42
25	Architechtural Plans - BAT	9/30/96	339			339	39 MO S/L	203	9
26	Lighting Plan - AUD	6/01/96	1,500			1,500	39 MO S/L	880	38
27	Lighting Plan - AUD	6/01/96	500			500	39 MO S/L	300	12
28	Renovation Permit	6/01/96	1,410			1,410	39 MO S/L	831	36
29	General Contractor - AUD	6/01/96	10,627			10,627	39 MO S/L	6,282	272
30	General Contractor - AUD	6/01/96	101,497			101,497	39 MO S/L	60,065	2,602
31	Electrical - AUD	6/01/96	6,289			6,289	39 MO S/L	3,718	161
32	Electrical - AUD	6/01/96	36,335			36,335	39 MO S/L	21,512	932
33	Sound System - AUD	6/01/96	1,000			1,000	39 MO S/L	598	26
34	Theatrical Sound - AUD	6/01/96	37,119			37,119	39 MO S/L	21,975	951
35	Stage Lighting - AUD	6/01/96	62,460			62,460	39 MO S/L	36,977	1,602
36	Theatrical Curtains - AUD	6/01/96	31,525			31,525	39 MO S/L	18,653	808
37	Refurbished Chairs - AUD	6/01/96	61,589			61,589	39 MO S/L	36,449	1,580
38	Carpet	5/09/96	3,206			3,206	39 MO S/L	1,900	83
39	Handicap Access - Bath	10/31/96	2,203			2,203	39 MO S/L	1,272	56
40	Wall Gallery	3/06/97	750			750	40 MO S/L	424	18
41	Wall Painting	5/07/99	650			650	1 MO S/L	650	0
42	Phone Work	5/27/99	36			36	1 MO S/L	36	0
43	Stairs to Sound Booth	5/27/99	673			673	39 MO S/L	342	17
44	Carpet	6/04/99	1,228			1,228	7 MO S/L	1,228	0
45	Insulation	7/16/99	11,760			11,760	39 MO S/L	6,013	302
46	Office Renovation	11/26/99	6,422			6,422	39 MO S/L	3,230	165
47	Hallway	12/03/99	992			992	39 MO S/L	491	25
48	Renovations Room 106 107	1/03/00	2,425			2,425	39 MO S/L	1,209	63
49	Fire Door	2/07/00	550			550	39 MO S/L	272	14
50	Ticket Booth	3/10/00	1,227			1,227	39 MO S/L	600	31
51	Plumbing Room 107	3/21/00	542			542	39 MO S/L	269	14
52	Gallery Pedestals	5/15/00	2,000			2,000	39 MO S/L	979	51
53	Laser Printer	2/15/89	3,275			3,275	5 MO S/L	3,275	0
54	Chair	5/15/89	175			175	7 MO S/L	175	0
55	Credenza	5/15/89	409			409	7 MO S/L	409	0
56	Computer Funrniture	6/15/89	397			397	7 MO S/L	397	0
57	CMS SD Hard Disc & Conn	5/11/90	534			534	5 MO S/L	534	0
58	Chair	7/06/90	215			215	7 MO S/L	215	0
59	Desk & 3 Chairs	10/15/92	400			400	7 MO S/L	400	0
60	Office Furniture & Fixture	2/19/93	297			297	7 MO S/L	297	0
61	Panafax PD - 2300	4/01/93	595			595	5 MO S/L	595	0
62	Chair Evry-DY BE-BK	9/24/93	125			125	7 MO S/L	125	0
63	4MB Memory	6/14/96	53			53	5 MO S/L	53	0

22-2187522

Federal Asset Report

FYE: 6/30/2020

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
64	Computers	1/10/97	5,879			5,879	5 MO S/L	5,879	0
65	Signs	2/07/97	548			548	7 MO S/L	548	0
66	Signs	4/15/97	372			372	7 MO S/L	372	0
67	Signs	4/15/97	88			88	7 MO S/L	88	0
68	Telephone Systems	7/01/97	3,500			3,500	7 MO S/L	3,500	0
69	Signs	1/13/98	3,723			3,723	7 MO S/L	3,723	0
70	Shades	6/04/99	2,148			2,148	7 MO S/L	2,148	0
71	Conference Room Chairs	6/11/99	2,072			2,072	7 MO S/L	2,072	0
72	Labeling Machine	3/29/99	1,500			1,500	7 MO S/L	1,500	0
73	Electrical meter	11/10/00	516			516	7 MO S/L	516	0
74	Balcony Lighting	6/30/00	3,724			3,724	7 MO S/L	3,724	0
75	Handicap Entrance	2/02/02	28,603			28,603	39 MO S/L	12,706	733
76	Pottery Kin	9/05/00	1,677			1,677	7 MO S/L	1,677	0
77	Potters Wheel	9/05/00	684			684	7 MO S/L	684	0
78	Kiln Electric	7/16/01	525			525	7 MO S/L	525	0
79	Air Conditioner	5/16/02	628			628	7 MO S/L	628	0
80	Theater Sconces	2/08/02	1,019			1,019	7 MO S/L	1,019	0
81	Potters wheel	7/29/02	750			750	7 MO S/L	750	0
82	Hewlet Packard DC1500	2/27/06	2,000			2,000	5 MO S/L	2,000	0
83	Latitude D620	4/23/07	1,136			1,136	5 MO S/L	1,136	0
84	Shared network Storage	6/29/07	206			206	5 MO S/L	206	0
85	Ticket Printer	2/27/07	550			550	5 MO S/L	550	0
86	3 Flat Screens	2/26/07	540			540	5 MO S/L	540	0
87	2 Hand Held Microphone SY	12/22/06	640			640	5 MO S/L	640	0
88	Conference RM Tables	6/18/99	1,926			1,926	7 MO S/L	1,926	0
89	Speaker Cable	12/22/06	90			90	5 MO S/L	90	0
90	Microphone Cable	12/22/06	44			44	5 MO S/L	44	0
91	Speakers	12/22/06	600			600	5 MO S/L	600	0
92	Speaker Stand	12/22/06	80			80	5 MO S/L	80	0
93	Wireless Mics	6/29/06	598			598	5 MO S/L	598	0
94	Track Lighting	3/05/07	3,000			3,000	39 MO S/L	950	77
95	Instillation	6/29/07	860			860	5 MO S/L	860	0
96	Yamaha P700s	12/22/06	700			700	5 MO S/L	700	0
97	Four Phones	3/31/07	381			381	5 MO S/L	381	0
98	Phone Work	9/07/07	95			95	5 MO S/L	95	0
99	Musicians Friend	9/07/07	1,128			1,128	5 MO S/L	1,128	0
100	Phones	11/30/07	1,922			1,922	5 MO S/L	1,922	0
101	Theater Lighting Equip	9/09/08	5,327			5,327	7 MO S/L	5,327	0
102	Theater Sound Equipment	1/08/08	1,649			1,649	7 MO S/L	1,649	0
103	Security System	2/03/09	10,505			10,505	7 MO S/L	10,505	0
104	Dishwasher	3/16/09	850			850	5 MO S/L	850	0
105	Carpet	3/16/09	1,562			1,562	5 MO S/L	1,562	0
106	Office Safe	2/08/10	750			750	5 MO S/L	750	0
107	Dell Computer	11/16/11	968			968	5 MO S/L	968	0
108	24 Nesting Chairs	11/16/12	5,464			5,464	7 MO S/L	5,140	324
109	8 Synthesis Fixed Tables	9/04/12	4,418			4,418	7 MO S/L	4,312	106
110	Cube	2/01/13	300			300	7 MO S/L	276	24
111	Printer	6/26/13	1,375			1,375	5 MO S/L	1,375	0
112	Computers	6/19/13	2,908			2,908	5 MO S/L	2,908	0
113	Auditorium Equipment	8/01/14	9,162			9,162	7 MO S/L	6,436	1,309
114	Xerox Copier	9/22/15	3,768			3,768	5 MO S/L	2,638	754
Total Other Depreciation			<u>628,796</u>			<u>628,796</u>		<u>435,225</u>	<u>15,293</u>
Total ACRS and Other Depreciation			<u>628,796</u>			<u>628,796</u>		<u>435,225</u>	<u>15,293</u>
Grand Totals			642,795			642,795		435,599	15,652
Less: Dispositions and Transfers			0			0		0	0
Less: Start-up/Org Expense			0			0		0	0
Net Grand Totals			<u>642,795</u>			<u>642,795</u>		<u>435,599</u>	<u>15,652</u>

22-2187522

NY Asset Report

FYE: 6/30/2020

Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	NY Prior	NY Current	Federal Current	Difference Fed - NY
Prior MACRS:								
115	Lobby Renovations	6/30/18	13,999	13,999	374	359	359	0
			<u>13,999</u>	<u>13,999</u>	<u>374</u>	<u>359</u>	<u>359</u>	<u>0</u>
Other Depreciation:								
1	Baldwin SF-10 Grand Piano	4/26/96	19,500	19,500	19,500	0	0	0
2	Podium	5/30/96	1,743	1,743	1,743	0	0	0
3	TV	10/18/96	299	299	299	0	0	0
4	Dressing Room Chairs	9/23/96	670	670	670	0	0	0
5	Samsung SP - Printer	11/15/96	220	220	220	0	0	0
6	IBM	12/31/96	5,879	5,879	5,879	0	0	0
7	Stage	2/21/97	2,500	2,500	2,500	0	0	0
8	Stage	3/07/97	478	478	478	0	0	0
9	Lighting	5/30/97	467	467	467	0	0	0
10	Piano Dolly	6/26/97	405	405	405	0	0	0
11	Lighting Equipment	5/10/98	8,197	8,197	8,197	0	0	0
12	Loft Space	10/15/98	9,538	9,538	6,283	303	235	-68
13	Auditorium Doors	4/15/89	4,750	4,750	4,561	151	150	-1
14	HVAC Equipment - AUD	4/12/91	16,430	16,430	14,735	522	522	0
15	Ductwork - AUD	4/12/91	8,000	8,000	7,175	254	254	0
16	Grilles - AUD	4/12/91	1,500	1,500	1,345	48	48	0
17	Gas Piping - AUD	4/12/91	2,000	2,000	1,794	63	63	0
18	Electric Service - AUD	4/12/91	5,300	5,300	4,753	168	168	0
19	Wire HVAC - AUD	4/12/91	1,500	1,500	1,345	48	48	0
20	Ceiling Fans - AUD	4/12/91	2,085	2,085	1,870	66	67	1
21	2 Economizers	4/12/91	2,548	2,548	2,285	81	81	0
22	Architectural Plans - AUD	6/01/96	13,860	13,860	8,203	356	355	-1
23	Architectural Plans - AUD	6/01/96	2,520	2,520	1,492	64	65	1
24	Architectural Plans - AUD	6/01/96	1,620	1,620	959	41	42	1
25	Architectural Plans - BAT	9/30/96	339	339	198	8	9	1
26	Lighting Plan - AUD	6/01/96	1,500	1,500	888	38	38	0
27	Lighting Plan - AUD	6/01/96	500	500	296	13	12	-1
28	Renovation Permit	6/01/96	1,410	1,410	834	37	36	-1
29	General Contractor - AUD	6/01/96	10,627	10,627	6,290	272	272	0
30	General Contractor - AUD	6/01/96	101,497	101,497	60,074	2,603	2,602	-1
31	Electrical - AUD	6/01/96	6,289	6,289	3,722	162	161	-1
32	Electrical - AUD	6/01/96	36,335	36,335	21,506	932	932	0
33	Sound System - AUD	6/01/96	1,000	1,000	592	26	26	0
34	Theatrical Sound - AUD	6/01/96	37,119	37,119	21,970	952	951	-1
35	Stage Lighting - AUD	6/01/96	62,460	62,460	36,969	1,601	1,602	1
36	Theatrical Curtains - AUD	6/01/96	31,525	31,525	18,659	808	808	0
37	Refurbished Chairs - AUD	6/01/96	61,589	61,589	36,453	1,580	1,580	0
38	Carpet	5/09/96	3,206	3,206	1,905	82	83	1
39	Handicap Access - Bath	10/31/96	2,203	2,203	1,280	57	56	-1
40	Wall Gallery	3/06/97	750	750	419	19	18	-1
41	Wall Painting	5/07/99	650	650	650	0	0	0
42	Phone Work	5/27/99	36	36	36	0	0	0
43	Stairs to Sound Booth	5/27/99	673	673	347	17	17	0
44	Carpet	6/04/99	1,228	1,228	1,228	0	0	0
45	Insulation	7/16/99	11,760	11,760	6,006	301	302	1
46	Office Renovation	11/26/99	6,422	6,422	3,225	164	165	1
47	Hallway	12/03/99	992	992	498	26	25	-1
48	Renovations Room 106 107	1/03/00	2,425	2,425	1,213	62	63	1
49	Fire Door	2/07/00	550	550	274	14	14	0
50	Ticket Booth	3/10/00	1,227	1,227	608	32	31	-1
51	Plumbing Room 107	3/21/00	542	542	268	13	14	1
52	Gallery Pedestals	5/15/00	2,000	2,000	983	51	51	0
53	Laser Printer	2/15/89	3,275	3,275	3,275	0	0	0
54	Chair	5/15/89	175	175	175	0	0	0
55	Credenza	5/15/89	409	409	409	0	0	0
56	Computer Furniture	6/15/89	397	397	397	0	0	0
57	CMS SD Hard Disc & Conn	5/11/90	534	534	534	0	0	0
58	Chair	7/06/90	215	215	215	0	0	0
59	Desk & 3 Chairs	10/15/92	400	400	400	0	0	0
60	Office Furniture & Fixture	2/19/93	297	297	297	0	0	0
61	Panafax PD - 2300	4/01/93	595	595	595	0	0	0
62	Chair Evry-DY BE-BK	9/24/93	125	125	125	0	0	0
63	4MB Memory	6/14/96	53	53	53	0	0	0

22-2187522

NY Asset Report

FYE: 6/30/2020

Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	NY Prior	NY Current	Federal Current	Difference Fed - NY
64	Computers	1/10/97	5,879	5,879	5,879	0	0	0
65	Signs	2/07/97	548	548	548	0	0	0
66	Signs	4/15/97	372	372	372	0	0	0
67	Signs	4/15/97	88	88	88	0	0	0
68	Telephone Systems	7/01/97	3,500	3,500	3,500	0	0	0
69	Signs	1/13/98	3,723	3,723	3,723	0	0	0
70	Shades	6/04/99	2,148	2,148	2,148	0	0	0
71	Conference Room Chairs	6/11/99	2,072	2,072	2,072	0	0	0
72	Labeling Machine	3/29/99	1,500	1,500	1,500	0	0	0
73	Electrical meter	11/10/00	516	516	516	0	0	0
74	Balcony Lighting	6/30/00	3,724	3,724	3,724	0	0	0
75	Handicap Entrance	2/02/02	28,603	28,603	12,774	733	733	0
76	Pottery Kin	9/05/00	1,677	1,677	1,677	0	0	0
77	Potters Wheel	9/05/00	684	684	684	0	0	0
78	Kiln Electric	7/16/01	525	525	525	0	0	0
79	Air Conditioner	5/16/02	628	628	628	0	0	0
80	Theater Sconces	2/08/02	1,019	1,019	1,019	0	0	0
81	Potters wheel	7/29/02	750	750	750	0	0	0
82	Hewlet Packard DC1500	2/27/06	2,000	2,000	2,000	0	0	0
83	Latitude D620	4/23/07	1,136	1,136	1,136	0	0	0
84	Shared network Storage	6/29/07	206	206	206	0	0	0
85	Ticket Printer	2/27/07	550	550	550	0	0	0
86	3 Flat Screens	2/26/07	540	540	540	0	0	0
87	2 Hand Held Microphone SY	12/22/06	640	640	640	0	0	0
88	Conference RM Tables	6/18/99	1,926	1,926	1,926	0	0	0
89	Speaker Cable	12/22/06	90	90	90	0	0	0
90	Microphone Cable	12/22/06	44	44	44	0	0	0
91	Speakers	12/22/06	600	600	600	0	0	0
92	Speaker Stand	12/22/06	80	80	80	0	0	0
93	Wireless Mics	6/29/06	598	598	598	0	0	0
94	Track Lighting	3/05/07	3,000	3,000	949	77	77	0
95	Instillation	6/29/07	860	860	860	0	0	0
96	Yamaha P700s	12/22/06	700	700	700	0	0	0
97	Four Phones	3/31/07	381	381	381	0	0	0
98	Phone Work	9/07/07	95	95	95	0	0	0
99	Musicians Friend	9/07/07	1,128	1,128	1,128	0	0	0
100	Phones	11/30/07	1,922	1,922	1,922	0	0	0
101	Theater Lighting Equip	9/09/08	5,327	5,327	5,327	0	0	0
102	Theater Sound Equipment	1/08/08	1,649	1,649	1,649	0	0	0
103	Security System	2/03/09	10,505	10,505	10,505	0	0	0
104	Dishwasher	3/16/09	850	850	850	0	0	0
105	Carpet	3/16/09	1,562	1,562	1,562	0	0	0
106	Office Safe	2/08/10	750	750	750	0	0	0
107	Dell Computer	11/16/11	968	968	968	0	0	0
108	24 Nesting Chairs	11/16/12	5,464	5,464	5,139	325	324	-1
109	8 Synthesis Fixed Tables	9/04/12	4,418	4,418	4,313	105	106	1
110	Cube	2/01/13	300	300	275	25	24	-1
111	Printer	6/26/13	1,375	1,375	1,375	0	0	0
112	Computers	6/19/13	2,908	2,908	2,908	0	0	0
113	Auditorium Equipment	8/01/14	9,162	9,162	6,435	1,309	1,309	0
114	Xerox Copier	9/22/15	3,768	3,768	2,826	754	754	0
Total Other Depreciation			<u>628,796</u>	<u>628,796</u>	<u>432,478</u>	<u>15,363</u>	<u>15,293</u>	<u>-70</u>
Total ACRS and Other Depreciation			<u>628,796</u>	<u>628,796</u>	<u>432,478</u>	<u>15,363</u>	<u>15,293</u>	<u>-70</u>
Grand Totals			642,795	642,795	432,852	15,722	15,652	-70
Less: Dispositions			0	0	0	0	0	0
Less: Start-up/Org Expense			0	0	0	0	0	0
Net Grand Totals			<u>642,795</u>	<u>642,795</u>	<u>432,852</u>	<u>15,722</u>	<u>15,652</u>	<u>-70</u>

22-2187522

AMT Asset Report

FYE: 6/30/2020

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
Prior MACRS:									
115	Lobby Renovations	6/30/18	13,999			13,999	39 MMS/L	374	359
			<u>13,999</u>			<u>13,999</u>		<u>374</u>	<u>359</u>
Other Depreciation:									
1	Baldwin SF-10 Grand Piano	4/26/96	0			0	0 HY	0	0
2	Podium	5/30/96	0			0	0 HY	0	0
3	TV	10/18/96	0			0	0 HY	0	0
4	Dressing Room Chairs	9/23/96	0			0	0 HY	0	0
5	Samsung SP - Printer	11/15/96	0			0	0 HY	0	0
6	IBM	12/31/96	0			0	0 HY	0	0
7	Stage	2/21/97	0			0	0 HY	0	0
8	Stage	3/07/97	0			0	0 HY	0	0
9	Lighting	5/30/97	0			0	0 HY	0	0
10	Piano Dolly	6/26/97	0			0	0 HY	0	0
11	Lighting Equipment	5/10/98	0			0	0 HY	0	0
12	Loft Space	10/15/98	0			0	0 HY	0	0
13	Auditorium Doors	4/15/89	0			0	0 HY	0	0
14	HVAC Equipment - AUD	4/12/91	0			0	0 HY	0	0
15	Ductwork - AUD	4/12/91	0			0	0 HY	0	0
16	Grilles - AUD	4/12/91	0			0	0 HY	0	0
17	Gas Piping - AUD	4/12/91	0			0	0 HY	0	0
18	Electric Service - AUD	4/12/91	0			0	0 HY	0	0
19	Wire HVAC - AUD	4/12/91	0			0	0 HY	0	0
20	Ceiling Fans - AUD	4/12/91	0			0	0 HY	0	0
21	2 Economizers	4/12/91	0			0	0 HY	0	0
22	Architectural Plans - AUD	6/01/96	0			0	0 HY	0	0
23	Architectural Plans - AUD	6/01/96	0			0	0 HY	0	0
24	Architectural Plans - AUD	6/01/96	0			0	0 HY	0	0
25	Architectural Plans - BAT	9/30/96	0			0	0 HY	0	0
26	Lighting Plan - AUD	6/01/96	0			0	0 HY	0	0
27	Lighting Plan - AUD	6/01/96	0			0	0 HY	0	0
28	Renovation Permit	6/01/96	0			0	0 HY	0	0
29	General Contractor - AUD	6/01/96	0			0	0 HY	0	0
30	General Contractor - AUD	6/01/96	0			0	0 HY	0	0
31	Electrical - AUD	6/01/96	0			0	0 HY	0	0
32	Electrical - AUD	6/01/96	0			0	0 HY	0	0
33	Sound System - AUD	6/01/96	0			0	0 HY	0	0
34	Theatrical Sound - AUD	6/01/96	0			0	0 HY	0	0
35	Stage Lighting - AUD	6/01/96	0			0	0 HY	0	0
36	Theatrical Curtains - AUD	6/01/96	0			0	0 HY	0	0
37	Refurbished Chairs - AUD	6/01/96	0			0	0 HY	0	0
38	Carpet	5/09/96	0			0	0 HY	0	0
39	Handicap Access - Bath	10/31/96	0			0	0 HY	0	0
40	Wall Gallery	3/06/97	0			0	0 HY	0	0
41	Wall Painting	5/07/99	0			0	0 HY	0	0
42	Phone Work	5/27/99	0			0	0 HY	0	0
43	Stairs to Sound Booth	5/27/99	0			0	0 HY	0	0
44	Carpet	6/04/99	0			0	0 HY	0	0
45	Insulation	7/16/99	0			0	0 HY	0	0
46	Office Renovation	11/26/99	0			0	0 HY	0	0
47	Hallway	12/03/99	0			0	0 HY	0	0
48	Renovations Room 106 107	1/03/00	0			0	0 HY	0	0
49	Fire Door	2/07/00	0			0	0 HY	0	0
50	Ticket Booth	3/10/00	0			0	0 HY	0	0
51	Plumbing Room 107	3/21/00	0			0	0 HY	0	0
52	Gallery Pedestals	5/15/00	0			0	0 HY	0	0
53	Laser Printer	2/15/89	0			0	0 HY	0	0
54	Chair	5/15/89	0			0	0 HY	0	0
55	Credenza	5/15/89	0			0	0 HY	0	0
56	Computer Furniture	6/15/89	0			0	0 HY	0	0
57	CMS SD Hard Disc & Conn	5/11/90	0			0	0 HY	0	0
58	Chair	7/06/90	0			0	0 HY	0	0
59	Desk & 3 Chairs	10/15/92	0			0	0 HY	0	0
60	Office Furniture & Fixture	2/19/93	0			0	0 HY	0	0
61	Panafax PD - 2300	4/01/93	0			0	0 HY	0	0
62	Chair Evry-DY BE-BK	9/24/93	0			0	0 HY	0	0
63	4MB Memory	6/14/96	0			0	0 HY	0	0

22-2187522

AMT Asset Report

FYE: 6/30/2020

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
64	Computers	1/10/97	0			0	0 HY	0	0
65	Signs	2/07/97	0			0	0 HY	0	0
66	Signs	4/15/97	0			0	0 HY	0	0
67	Signs	4/15/97	0			0	0 HY	0	0
68	Telephone Systems	7/01/97	0			0	0 HY	0	0
69	Signs	1/13/98	0			0	0 HY	0	0
70	Shades	6/04/99	0			0	0 HY	0	0
71	Conference Room Chairs	6/11/99	0			0	0 HY	0	0
72	Labeling Machine	3/29/99	0			0	0 HY	0	0
73	Electrical meter	11/10/00	0			0	0 HY	0	0
74	Balcony Lighting	6/30/00	0			0	0 HY	0	0
75	Handicap Entrance	2/02/02	0			0	0 HY	0	0
76	Pottery Kin	9/05/00	0			0	0 HY	0	0
77	Potters Wheel	9/05/00	0			0	0 HY	0	0
78	Kiln Electric	7/16/01	0			0	0 HY	0	0
79	Air Conditioner	5/16/02	0			0	0 HY	0	0
80	Theater Sconces	2/08/02	0			0	0 HY	0	0
81	Potters wheel	7/29/02	0			0	0 HY	0	0
82	Hewlet Packard DC1500	2/27/06	0			0	0 HY	0	0
83	Latitude D620	4/23/07	0			0	0 HY	0	0
84	Shared network Storage	6/29/07	0			0	0 HY	0	0
85	Ticket Printer	2/27/07	0			0	0 HY	0	0
86	3 Flat Screens	2/26/07	0			0	0 HY	0	0
87	2 Hand Held Microphone SY	12/22/06	0			0	0 HY	0	0
88	Conference RM Tables	6/18/99	0			0	0 HY	0	0
89	Speaker Cable	12/22/06	0			0	0 HY	0	0
90	Microphone Cable	12/22/06	0			0	0 HY	0	0
91	Speakers	12/22/06	0			0	0 HY	0	0
92	Speaker Stand	12/22/06	0			0	0 HY	0	0
93	Wireless Mics	6/29/06	0			0	0 HY	0	0
94	Track Lighting	3/05/07	0			0	0 HY	0	0
95	Instillation	6/29/07	0			0	0 HY	0	0
96	Yamaha P700s	12/22/06	0			0	0 HY	0	0
97	Four Phones	3/31/07	0			0	0 HY	0	0
98	Phone Work	9/07/07	0			0	0 HY	0	0
99	Musicians Friend	9/07/07	0			0	0 HY	0	0
100	Phones	11/30/07	0			0	0 HY	0	0
101	Theater Lighting Equip	9/09/08	0			0	0 HY	0	0
102	Theater Sound Equipment	1/08/08	0			0	0 HY	0	0
103	Security System	2/03/09	0			0	0 HY	0	0
104	Dishwasher	3/16/09	0			0	0 HY	0	0
105	Carpet	3/16/09	0			0	0 HY	0	0
106	Office Safe	2/08/10	0			0	0 HY	0	0
107	Dell Computer	11/16/11	0			0	0 HY	0	0
108	24 Nesting Chairs	11/16/12	0			0	0 HY	0	0
109	8 Synthesis Fixed Tables	9/04/12	0			0	0 HY	0	0
110	Cube	2/01/13	0			0	0 HY	0	0
111	Printer	6/26/13	0			0	0 HY	0	0
112	Computers	6/19/13	0			0	0 HY	0	0
113	Auditorium Equipment	8/01/14	0			0	0 HY	0	0
114	Xerox Copier	9/22/15	0			0	0 HY	0	0
	Total Other Depreciation		<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
	Grand Totals		13,999			13,999		374	359
	Less: Dispositions and Transfers		<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
	Net Grand Totals		<u>13,999</u>			<u>13,999</u>		<u>374</u>	<u>359</u>

Depreciation Adjustment Report

All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
<u>MACRS Adjustments:</u>						
Page 1	1	115	Lobby Renovations	359	359	0
				<u>359</u>	<u>359</u>	<u>0</u>

Asset	Description	Date In Service	Cost	Tax	AMT
Prior MACRS:					
115	Lobby Rennovations	6/30/18	13,999	359	359
			<u>13,999</u>	<u>359</u>	<u>359</u>
Other Depreciation:					
1	Baldwin SF-10 Grand Piano	4/26/96	19,500	0	0
2	Podium	5/30/96	1,743	0	0
3	TV	10/18/96	299	0	0
4	Dressing Room Chairs	9/23/96	670	0	0
5	Samsung SP - Printer	11/15/96	220	0	0
6	IBM	12/31/96	5,879	0	0
7	Stage	2/21/97	2,500	0	0
8	Stage	3/07/97	478	0	0
9	Lighting	5/30/97	467	0	0
10	Piano Dolly	6/26/97	405	0	0
11	Lighting Equipment	5/10/98	8,197	0	0
12	Loft Space	10/15/98	9,538	0	0
13	Auditorium Doors	4/15/89	4,750	40	0
14	HVAC Equipment - AUD	4/12/91	16,430	521	0
15	Ductwork - AUD	4/12/91	8,000	254	0
16	Grilles - AUD	4/12/91	1,500	47	0
17	Gas Piping - AUD	4/12/91	2,000	64	0
18	Electric Service - AUD	4/12/91	5,300	168	0
19	Wire HVAC - AUD	4/12/91	1,500	47	0
20	Ceiling Fans - AUD	4/12/91	2,085	66	0
21	2 Economizers	4/12/91	2,548	81	0
22	Architectural Plans - AUD	6/01/96	13,860	356	0
23	Architectural Plans - AUD	6/01/96	2,520	64	0
24	Architectural Plans - AUD	6/01/96	1,620	41	0
25	Architectural Plans - BAT	9/30/96	339	9	0
26	Lighting Plan - AUD	6/01/96	1,500	39	0
27	Lighting Plan - AUD	6/01/96	500	13	0
28	Renovation Permit	6/01/96	1,410	37	0
29	General Contractor - AUD	6/01/96	10,627	273	0
30	General Contractor - AUD	6/01/96	101,497	2,603	0
31	Electrical - AUD	6/01/96	6,289	161	0
32	Electrical - AUD	6/01/96	36,335	932	0
33	Sound System - AUD	6/01/96	1,000	26	0
34	Theatrical Sound - AUD	6/01/96	37,119	952	0
35	Stage Lighting - AUD	6/01/96	62,460	1,601	0
36	Theatrical Curtains - AUD	6/01/96	31,525	808	0
37	Refurbished Chairs - AUD	6/01/96	61,589	1,579	0
38	Carpet	5/09/96	3,206	82	0
39	Handicap Access - Bath	10/31/96	2,203	57	0
40	Wall Gallery	3/06/97	750	19	0
41	Wall Painting	5/07/99	650	0	0
42	Phone Work	5/27/99	36	0	0
43	Stairs to Sound Booth	5/27/99	673	17	0
44	Carpet	6/04/99	1,228	0	0
45	Insulation	7/16/99	11,760	301	0
46	Office Renovation	11/26/99	6,422	165	0
47	Hallway	12/03/99	992	26	0
48	Renovations Room 106 107	1/03/00	2,425	62	0
49	Fire Door	2/07/00	550	14	0
50	Ticket Booth	3/10/00	1,227	32	0
51	Plumbing Room 107	3/21/00	542	14	0
52	Gallery Pedestals	5/15/00	2,000	51	0
53	Laser Printer	2/15/89	3,275	0	0
54	Chair	5/15/89	175	0	0
55	Credenza	5/15/89	409	0	0
56	Computer Funmiture	6/15/89	397	0	0
57	CMS SD Hard Disc & Conn	5/11/90	534	0	0
58	Chair	7/06/90	215	0	0
59	Desk & 3 Chairs	10/15/92	400	0	0
60	Office Furniture & Fixture	2/19/93	297	0	0

22-2187522

Future Depreciation Report**FYE: 6/30/21**

FYE: 6/30/2020

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
61	Panafax PD - 2300	4/01/93	595	0	0
62	Chair Evry-DY BE-BK	9/24/93	125	0	0
63	4MB Memory	6/14/96	53	0	0
64	Computers	1/10/97	5,879	0	0
65	Signs	2/07/97	548	0	0
66	Signs	4/15/97	372	0	0
67	Signs	4/15/97	88	0	0
68	Telephone Systems	7/01/97	3,500	0	0
69	Signs	1/13/98	3,723	0	0
70	Shades	6/04/99	2,148	0	0
71	Conference Room Chairs	6/11/99	2,072	0	0
72	Labeling Machine	3/29/99	1,500	0	0
73	Electrical meter	11/10/00	516	0	0
74	Balcony Lighting	6/30/00	3,724	0	0
75	Handicap Entrance	2/02/02	28,603	734	0
76	Pottery Kin	9/05/00	1,677	0	0
77	Potters Wheel	9/05/00	684	0	0
78	Kiln Electric	7/16/01	525	0	0
79	Air Conditioner	5/16/02	628	0	0
80	Theater Sconces	2/08/02	1,019	0	0
81	Potters wheel	7/29/02	750	0	0
82	Hewlet Packard DC1500	2/27/06	2,000	0	0
83	Latitude D620	4/23/07	1,136	0	0
84	Shared network Storage	6/29/07	206	0	0
85	Ticket Printer	2/27/07	550	0	0
86	3 Flat Screens	2/26/07	540	0	0
87	2 Hand Held Microphone SY	12/22/06	640	0	0
88	Conference RM Tables	6/18/99	1,926	0	0
89	Speaker Cable	12/22/06	90	0	0
90	Microphone Cable	12/22/06	44	0	0
91	Speakers	12/22/06	600	0	0
92	Speaker Stand	12/22/06	80	0	0
93	Wireless Mics	6/29/06	598	0	0
94	Track Lighting	3/05/07	3,000	77	0
95	Instillation	6/29/07	860	0	0
96	Yamaha P700s	12/22/06	700	0	0
97	Four Phones	3/31/07	381	0	0
98	Phone Work	9/07/07	95	0	0
99	Musicians Friend	9/07/07	1,128	0	0
100	Phones	11/30/07	1,922	0	0
101	Theater Lighting Equip	9/09/08	5,327	0	0
102	Theater Sound Equipment	1/08/08	1,649	0	0
103	Security System	2/03/09	10,505	0	0
104	Dishwasher	3/16/09	850	0	0
105	Carpet	3/16/09	1,562	0	0
106	Office Safe	2/08/10	750	0	0
107	Dell Computer	11/16/11	968	0	0
108	24 Nesting Chairs	11/16/12	5,464	0	0
109	8 Synthesis Fixed Tables	9/04/12	4,418	0	0
110	Cube	2/01/13	300	0	0
111	Printer	6/26/13	1,375	0	0
112	Computers	6/19/13	2,908	0	0
113	Auditorium Equipment	8/01/14	9,162	1,308	0
114	Xerox Copier	9/22/15	3,768	376	0
	Total Other Depreciation		<u>628,796</u>	<u>14,117</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>628,796</u>	<u>14,117</u>	<u>0</u>
	Grand Totals		<u>642,795</u>	<u>14,476</u>	<u>359</u>

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>NY</u>
<u>Prior MACRS:</u>				
115	Lobby Rennovations	6/30/18	13,999	359
			<u>13,999</u>	<u>359</u>
<u>Other Depreciation:</u>				
1	Baldwin SF-10 Grand Piano	4/26/96	19,500	0
2	Podium	5/30/96	1,743	0
3	TV	10/18/96	299	0
4	Dressing Room Chairs	9/23/96	670	0
5	Samsung SP - Printer	11/15/96	220	0
6	IBM	12/31/96	5,879	0
7	Stage	2/21/97	2,500	0
8	Stage	3/07/97	478	0
9	Lighting	5/30/97	467	0
10	Piano Dolly	6/26/97	405	0
11	Lighting Equipment	5/10/98	8,197	0
12	Loft Space	10/15/98	9,538	302
13	Auditorium Doors	4/15/89	4,750	38
14	HVAC Equipment - AUD	4/12/91	16,430	521
15	Ductwork - AUD	4/12/91	8,000	254
16	Grilles - AUD	4/12/91	1,500	48
17	Gas Piping - AUD	4/12/91	2,000	64
18	Electric Service - AUD	4/12/91	5,300	169
19	Wire HVAC - AUD	4/12/91	1,500	48
20	Ceiling Fans - AUD	4/12/91	2,085	66
21	2 Economizers	4/12/91	2,548	81
22	Architectural Plans - AUD	6/01/96	13,860	355
23	Architectural Plans - AUD	6/01/96	2,520	65
24	Architectural Plans - AUD	6/01/96	1,620	42
25	Architectural Plans - BAT	9/30/96	339	9
26	Lighting Plan - AUD	6/01/96	1,500	39
27	Lighting Plan - AUD	6/01/96	500	13
28	Renovation Permit	6/01/96	1,410	36
29	General Contractor - AUD	6/01/96	10,627	273
30	General Contractor - AUD	6/01/96	101,497	2,602
31	Electrical - AUD	6/01/96	6,289	161
32	Electrical - AUD	6/01/96	36,335	931
33	Sound System - AUD	6/01/96	1,000	25
34	Theatrical Sound - AUD	6/01/96	37,119	952
35	Stage Lighting - AUD	6/01/96	62,460	1,602
36	Theatrical Curtains - AUD	6/01/96	31,525	809
37	Refurbished Chairs - AUD	6/01/96	61,589	1,579
38	Carpet	5/09/96	3,206	82
39	Handicap Access - Bath	10/31/96	2,203	56
40	Wall Gallery	3/06/97	750	18
41	Wall Painting	5/07/99	650	0
42	Phone Work	5/27/99	36	0
43	Stairs to Sound Booth	5/27/99	673	17
44	Carpet	6/04/99	1,228	0
45	Insulation	7/16/99	11,760	302
46	Office Renovation	11/26/99	6,422	165
47	Hallway	12/03/99	992	25
48	Renovations Room 106 107	1/03/00	2,425	62
49	Fire Door	2/07/00	550	14
50	Ticket Booth	3/10/00	1,227	31
51	Plumbing Room 107	3/21/00	542	14
52	Gallery Pedestals	5/15/00	2,000	51
53	Laser Printer	2/15/89	3,275	0
54	Chair	5/15/89	175	0
55	Credenza	5/15/89	409	0
56	Computer Funmiture	6/15/89	397	0
57	CMS SD Hard Disc & Conn	5/11/90	534	0
58	Chair	7/06/90	215	0
59	Desk & 3 Chairs	10/15/92	400	0
60	Office Furniture & Fixture	2/19/93	297	0

Asset	Description	Date In Service	Cost	NY
61	Panafax PD - 2300	4/01/93	595	0
62	Chair Evry-DY BE-BK	9/24/93	125	0
63	4MB Memory	6/14/96	53	0
64	Computers	1/10/97	5,879	0
65	Signs	2/07/97	548	0
66	Signs	4/15/97	372	0
67	Signs	4/15/97	88	0
68	Telephone Systems	7/01/97	3,500	0
69	Signs	1/13/98	3,723	0
70	Shades	6/04/99	2,148	0
71	Conference Room Chairs	6/11/99	2,072	0
72	Labeling Machine	3/29/99	1,500	0
73	Electrical meter	11/10/00	516	0
74	Balcony Lighting	6/30/00	3,724	0
75	Handicap Entrance	2/02/02	28,603	733
76	Pottery Kin	9/05/00	1,677	0
77	Potters Wheel	9/05/00	684	0
78	Kiln Electric	7/16/01	525	0
79	Air Conditioner	5/16/02	628	0
80	Theater Sconces	2/08/02	1,019	0
81	Potters wheel	7/29/02	750	0
82	Hewlet Packard DC1500	2/27/06	2,000	0
83	Latitude D620	4/23/07	1,136	0
84	Shared network Storage	6/29/07	206	0
85	Ticket Printer	2/27/07	550	0
86	3 Flat Screens	2/26/07	540	0
87	2 Hand Held Microphone SY	12/22/06	640	0
88	Conference RM Tables	6/18/99	1,926	0
89	Speaker Cable	12/22/06	90	0
90	Microphone Cable	12/22/06	44	0
91	Speakers	12/22/06	600	0
92	Speaker Stand	12/22/06	80	0
93	Wireless Mics	6/29/06	598	0
94	Track Lighting	3/05/07	3,000	77
95	Instillation	6/29/07	860	0
96	Yamaha P700s	12/22/06	700	0
97	Four Phones	3/31/07	381	0
98	Phone Work	9/07/07	95	0
99	Musicians Friend	9/07/07	1,128	0
100	Phones	11/30/07	1,922	0
101	Theater Lighting Equip	9/09/08	5,327	0
102	Theater Sound Equipment	1/08/08	1,649	0
103	Security System	2/03/09	10,505	0
104	Dishwasher	3/16/09	850	0
105	Carpet	3/16/09	1,562	0
106	Office Safe	2/08/10	750	0
107	Dell Computer	11/16/11	968	0
108	24 Nesting Chairs	11/16/12	5,464	0
109	8 Synthesis Fixed Tables	9/04/12	4,418	0
110	Cube	2/01/13	300	0
111	Printer	6/26/13	1,375	0
112	Computers	6/19/13	2,908	0
113	Auditorium Equipment	8/01/14	9,162	1,309
114	Xerox Copier	9/22/15	3,768	188
Total Other Depreciation			<u>628,796</u>	<u>14,228</u>
Total ACRS and Other Depreciation			<u>628,796</u>	<u>14,228</u>
Grand Totals			<u>642,795</u>	<u>14,587</u>

Form 990		Two Year Comparison Report		2018 & 2019	
Name		For calendar year 2019, or tax year beginning		, ending	
Chenango County Council of the Arts, Inc		07/01/19		06/30/20	
		Taxpayer Identification Number		22-2187522	
		2018	2019	Differences	
Revenue	1. Contributions, gifts, grants	1. 89,877	92,625	2,748	
	2. Membership dues and assessments	2. 7,438	4,865	-2,573	
	3. Government contributions and grants	3. 178,000	165,000	-13,000	
	4. Program service revenue	4. 25,914	11,397	-14,517	
	5. Investment income	5. 14,125	14,855	730	
	6. Proceeds from tax exempt bonds	6.			
	7. Net gain or (loss) from sale of assets other than inventory	7. 76	-2,739	-2,815	
	8. Net income or (loss) from fundraising events	8. 40,125	16,038	-24,087	
	9. Net income or (loss) from gaming	9.			
	10. Net gain or (loss) on sales of inventory	10.			
	11. Other revenue	11. 22,331	26,971	4,640	
	12. Total revenue. Add lines 1 through 11	12. 377,886	329,012	-48,874	
Expenses	13. Grants and similar amounts paid	13. 138,564	130,591	-7,973	
	14. Benefits paid to or for members	14.			
	15. Compensation of officers, directors, trustees, etc.	15. 35,000		-35,000	
	16. Salaries, other compensation, and employee benefits	16. 95,426	115,778	20,352	
	17. Professional fundraising fees	17.			
	18. Other professional fees	18. 56,339	37,588	-18,751	
	19. Occupancy, rent, utilities, and maintenance	19. 13,865	12,154	-1,711	
	20. Depreciation and Depletion	20. 16,721	15,653	-1,068	
	21. Other expenses	21. 59,304	44,677	-14,627	
	22. Total expenses. Add lines 13 through 21	22. 415,219	356,441	-58,778	
	23. Excess or (Deficit). Subtract line 22 from line 12	23. -37,333	-27,429	9,904	
Other Information	24. Total exempt revenue	24. 377,886	329,012	-48,874	
	25. Total unrelated revenue	25.			
	26. Total excludable revenue	26. 102,571	66,522	-36,049	
	27. Total assets	27. 925,301	923,303	-1,998	
	28. Total liabilities	28. 14,259	20,410	6,151	
	29. Retained earnings	29. 911,042	902,893	-8,149	
	30. Number of voting members of governing body	30. 13	10		
31. Number of independent voting members of governing body	31. 13	10			
32. Number of employees	32. 5	5			
33. Number of volunteers	33. 4	4			

Form 990	Tax Return History	2019
Name Chenango County Council of the Arts, Inc		Employer Identification Number 22-2187522

	2015	2016	2017	2018	2019	2020
Contributions, gifts, grants			285,941	267,877	257,625	
Membership dues			7,973	7,438	4,865	
Program service revenue			19,591	25,914	11,397	
Capital gain or loss			103,547	76	-2,739	
Investment income			15,252	14,125	14,855	
Fundraising revenue (income/loss)			24,891	40,125	16,038	
Gaming revenue (income/loss)						
Other revenue			42,537	22,331	26,971	
Total revenue			499,732	377,886	329,012	
Grants and similar amounts paid			139,019	138,564	130,591	
Benefits paid to or for members						
Compensation of officers, etc.			35,217	35,000		
Other compensation			124,799	95,426	115,778	
Professional fees			73,150	56,339	37,588	
Occupancy costs			12,777	13,865	12,154	
Depreciation and depletion			17,406	16,721	15,653	
Other expenses			60,786	59,304	44,677	
Total expenses			463,154	415,219	356,441	
Excess or (Deficit)			36,578	-37,333	-27,429	
Total exempt revenue			499,732	377,886	329,012	
Total unrelated revenue						
Total excludable revenue			205,818	102,571	66,522	
Total Assets			943,667	925,301	923,303	
Total Liabilities			204	14,259	20,410	
Net Fund Balances			943,463	911,042	902,893	

Federal Statements

Taxable Interest on Investments

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
Interest	\$ 161			18		
Total	\$ <u>161</u>					

Taxable Dividends from Securities

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
Dividends	\$ 10,305			18		
Total	\$ <u>10,305</u>					

Federal Statements

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses	Program Service	Management & General	Fund Raising
Artistic Fees	\$ 2,224	\$	\$ 2,224	\$
Other Operating Expenses	4,848	1,265	3,056	527
Artistic Fees	15,071	15,071		
Other Operating Expenses	2,319	2,319		
Other Operating Expenses	1,475	1,475		
Other Operating Expenses	1,897	1,897		
Total	\$ <u>27,834</u>	\$ <u>22,027</u>	\$ <u>5,280</u>	\$ <u>527</u>

New York Diagnostics

Critical Messages

None

Informational Messages

- Electronic filing for the federal return is indicated; Form CHAR500 must be paper filed; The form is not available for electronic filing by software providers through the New York Department of Taxation
- Date of tax exemption claimed from is required entry for Form CT-247

<h1 style="margin: 0;">CHAR500</h1> <p style="margin: 0;">NYS Annual Filing for Charitable Organizations www.CharitiesNYS.com</p>	<p style="margin: 0;"><u>Send with fee and attachments to:</u> NYS Office of the Attorney General Charities Bureau Registration Section 28 Liberty Street New York, NY 10005</p>	<h2 style="margin: 0;">2019</h2> <h3 style="margin: 0;">Open to Public Inspection</h3>
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1. General Information

For Fiscal Year Beginning (mm/dd/yyyy) 07/01/2019 and Ending (mm/dd/yyyy) 06/30/2020		
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: CHENANGO COUNTY COUNCIL OF THE ARTS, INC Mailing Address: 27 W MAIN STREET #8 City / State / Zip: NORWICH NY 13815 Website: WWW.CHENANGOARTS.ORG	Employer Identification Number (EIN): 22-2187522 NY Registration Number: 03-19-40 Telephone: 607-336-2787 Email: ALECIA.ONEILL@CHENANGOARTS.ORG
Check your organization's registration category: <input type="checkbox"/> 7A only <input type="checkbox"/> EPTL only <input checked="" type="checkbox"/> DUAL (7A & EPTL) <input type="checkbox"/> 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	Print Name and Title	Date
Chief Financial Officer or Treasurer:	Signature	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 checked="" type="checkbox"/> Yes <input 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: \$ _____ 25	EPTL filing fee: \$ _____ 100	Total fee: \$ _____ 125	Make a single check or money order payable to: "Department of Law"
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CHENANGO COUNTY COUNCIL OF THE 22-2187522

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)).

<h1 style="margin: 0;">CHAR500</h1> <p style="margin: 0;">Schedule 4b: Government Grants www.CharitiesNYS.com</p>	<p style="margin: 0;">2019 Open to Public Inspection</p>
<p style="margin: 0;">If you checked the box in question 4b in Part 4, complete this schedule and list EACH government grant award by a domestic (federal, state or local) agency; interstate or intergovernmental agency (for example Port Authority of New York and New Jersey); and state or local authorities. Use additional pages if necessary. Include this schedule with your certified CHAR500 NYS Annual Filing for Charitable Organizations.</p>	

1. Organization Information

Name of Organization: CHENANGO COUNTY COUNCIL OF THE	NY Registration Number: 03-19-40
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2. Government Grants

Name of Government Agency	Amount of Grant
1. NYS COUNCIL OF THE ARTS	1. 10,000
2. CHENANGO COUNTY	2. 10,000
3. NYS DEC REGRANT	3. 145,000
4.	4.
5.	5.
6.	6.
7.	7.
8.	8.
9.	9.
10.	10.
11.	11.
12.	12.
13.	13.
14.	14.
15.	15.
Total Government Grants:	Total: 165,000