

# IRS e-file Signature Authorization for a Tax Exempt Entity

For calendar year 2021, or fiscal year beginning \_\_\_\_\_, 2021, and ending \_\_\_\_\_, 20\_\_

# 2021

Department of the Treasury  
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**  
▶ **Go to [www.irs.gov/Form8879TE](http://www.irs.gov/Form8879TE) for the latest information.**

Name of filer **GEBBIE FOUNDATION, INC.** EIN or SSN **16-6050287**

Name and title of officer or person subject to tax **NANCY GLEASON  
PRESIDENT**

### Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, 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 type="checkbox"/>            | b Total revenue, if any (Form 990, Part VIII, column (A), line 12)     | 1b  | _____           |
| 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 checked="" type="checkbox"/> | b Tax based on investment income (Form 990-PF, Part V, line 5)         | 4b  | <u>125,624.</u> |
| 5a Form 8868 check here     | <input type="checkbox"/>            | b Balance due (Form 8868, line 3c)                                     | 5b  | _____           |
| 6a Form 990-T check here    | <input type="checkbox"/>            | b Total tax (Form 990-T, Part III, line 4)                             | 6b  | _____           |
| 7a Form 4720 check here     | <input type="checkbox"/>            | b Total tax (Form 4720, Part III, line 1)                              | 7b  | _____           |
| 8a Form 5227 check here     | <input type="checkbox"/>            | b FMV of assets at end of tax year (Form 5227, Item D)                 | 8b  | _____           |
| 9a Form 5330 check here     | <input type="checkbox"/>            | b Tax due (Form 5330, Part II, line 19)                                | 9b  | _____           |
| 10a Form 8038-CP check here | <input type="checkbox"/>            | b Amount of credit payment requested (Form 8038-CP, Part III, line 22) | 10b | _____           |

### Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that  I am an officer of the above entity or  I am a person subject to tax with respect to (name of entity) \_\_\_\_\_, (EIN) \_\_\_\_\_ and that I have examined a copy of the 2021 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 electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the 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 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 electronic return and, if applicable, the consent to electronic funds withdrawal.

#### PIN: check one box only

I authorize **JOHN S. TRUSSALO, CPA, P.C.** to enter my PIN **50287**  
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the tax year 2021 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 or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 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.

Signature of officer or person subject to tax ▶

Date ▶

### 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.

**1606575555**

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return 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 ▶ **JOHN S. TRUSSALO, CPA, P.C.**

Date ▶ **11/10/22**

**ERO Must Retain This Form - See Instructions**  
**Do Not Submit This Form to the IRS Unless Requested To Do So**

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

Department of the Treasury  
Internal Revenue Service

▶ **File a separate application for each return.**  
▶ **Go to [www.irs.gov/Form8868](http://www.irs.gov/Form8868) for the latest information.**

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

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

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

|  |  |   |
|--|--|---|
| <b>Type or print</b>   | Name of exempt organization or other filer, see instructions.<br><b>GEBBIE FOUNDATION, INC.</b>                        | Taxpayer identification number (TIN)<br><b>16-6050287</b> |
| File by the due date for filing your return. See instructions. | Number, street, and room or suite no. If a P.O. box, see instructions.<br><b>215 CHERRY STREET</b>                     |   |
|  | City, town or post office, state, and ZIP code. For a foreign address, see instructions.<br><b>JAMESTOWN, NY 14701</b> |   |

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 4

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

**THE FOUNDATION**

- The books are in the care of ▶ **215 CHERRY STREET - JAMESTOWN, NY 14701**

Telephone No. ▶ **716-487-1062**

Fax No. ▶ **716-484-6401**

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and TINs of all members the extension is for.

**1** I request an automatic 6-month extension of time until **NOVEMBER 15, 2022**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
▶  calendar year **2021** or  
▶  tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_.

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

|   |           |    |                 |
|---|-----------|----|-----------------|
| <b>3a</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.   | <b>3a</b> | \$ | <b>121,484.</b> |
| <b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. | <b>3b</b> | \$ | <b>129,039.</b> |
| <b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.              | <b>3c</b> | \$ | <b>0.</b>       |

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

**Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation

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

**2021**

Open to Public Inspection

Form **990-PF**

Department of the Treasury  
Internal Revenue Service

For calendar year 2021 or tax year beginning

, and ending

|  |  |  |
|--|--|--|
| Name of foundation<br><b>GEBBIE FOUNDATION, INC.</b>   |  | A Employer identification number<br><b>16-6050287</b>  |
| Number and street (or P.O. box number if mail is not delivered to street address)<br><b>215 CHERRY STREET</b>  | Room/suite   | B Telephone number<br><b>716-487-1062</b>  |
| City or town, state or province, country, and ZIP or foreign postal code<br><b>JAMESTOWN, NY 14701</b>   |  | C If exemption application is pending, check here ... <input type="checkbox"/>   |
| G Check all that apply:<br><input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity<br><input type="checkbox"/> Final return <input type="checkbox"/> Amended return<br><input type="checkbox"/> Address change <input type="checkbox"/> Name change |  | D 1. Foreign organizations, check here ... <input type="checkbox"/><br>2. Foreign organizations meeting the 85% test, check here and attach computation ... <input type="checkbox"/> |
| H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation<br><input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation  |  | E If private foundation status was terminated under section 507(b)(1)(A), check here ... <input type="checkbox"/>  |
| I Fair market value of all assets at end of year (from Part II, col. (c), line 16)<br>▶ \$ <b>86,235,311.</b>  | J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual<br><input type="checkbox"/> Other (specify) _____ | F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ... <input type="checkbox"/>   |
| (Part I, column (d), must be on cash basis.)   |  |  |

| Part I Analysis of Revenue and Expenses<br><small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)</small> |   | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|--|---|------------------------------------|---------------------------|-------------------------|---|
| 1 Contributions, gifts, grants, etc., received .....   |   |                                    |                           | N/A                     |   |
| 2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B   |   |                                    |                           |                         |   |
| 3 Interest on savings and temporary cash investments .....   |   | 904.                               | 904.                      |                         | STATEMENT 1   |
| 4 Dividends and interest from securities .....   |   | 1,219,732.                         | 1,216,538.                |                         | STATEMENT 2   |
| 5a Gross rents .....   |   | 2,400.                             | 2,400.                    |                         | STATEMENT 3   |
| b Net rental income or (loss) <b>-33,429.</b>  |   |                                    |                           |                         | STATEMENT 4   |
| 6a Net gain or (loss) from sale of assets not on line 10   |   | 7,589,565.                         |                           |                         |   |
| b Gross sales price for all assets on line 6a <b>21,233,061.</b>   |   |                                    |                           |                         |   |
| 7 Capital gain net income (from Part IV, line 2) .....   |   |                                    | 7,589,565.                |                         |   |
| 8 Net short-term capital gain .....  |   |                                    |                           |                         |   |
| 9 Income modifications .....   |   |                                    |                           |                         |   |
| 10a Gross sales less returns and allowances .....  |   |                                    |                           |                         |   |
| b Less: Cost of goods sold .....   |   |                                    |                           |                         |   |
| c Gross profit or (loss) .....   |   |                                    |                           |                         |   |
| 11 Other income .....  |   | 402,757.                           | 700,571.                  |                         | STATEMENT 5   |
| 12 Total. Add lines 1 through 11 .....   |   | 9,215,358.                         | 9,509,978.                |                         |   |
| Operating and Administrative Expenses  | 13 Compensation of officers, directors, trustees, etc. .... | 0.                                 | 0.                        |                         | 0.  |
|  | 14 Other employee salaries and wages .....                  | 304,421.                           | 76,105.                   |                         | 228,316.  |
|  | 15 Pension plans, employee benefits .....                   | 59,785.                            | 14,947.                   |                         | 44,838.   |
|  | 16a Legal fees <b>STMT 6</b> .....                          | 3,530.                             | 0.                        |                         | 3,530.  |
|  | b Accounting fees <b>STMT 7</b> .....                       | 8,022.                             | 3,726.                    |                         | 4,296.  |
|  | c Other professional fees <b>STMT 8</b> .....               | 331,615.                           | 324,687.                  |                         | 6,928.  |
|  | 17 Interest .....   |                                    |                           |                         |   |
|  | 18 Taxes <b>STMT 9</b> .....                                | 142,918.                           | 5,359.                    |                         | 16,075.   |
|  | 19 Depreciation and depletion .....                         | 882.                               | 882.                      |                         |   |
|  | 20 Occupancy .....  | 42,772.                            | 4,277.                    |                         | 38,495.   |
|  | 21 Travel, conferences, and meetings .....                  | 17,565.                            | 1,757.                    |                         | 15,808.   |
|  | 22 Printing and publications .....                          |                                    |                           |                         |   |
|  | 23 Other expenses <b>STMT 10</b> .....                      | 83,225.                            | 40,551.                   |                         | 42,674.   |
| 24 Total operating and administrative expenses. Add lines 13 through 23 .....  | 994,735.  | 472,291.                           |                           | 400,960.                |   |
| 25 Contributions, gifts, grants paid .....   | 3,263,086.  |                                    |                           | 3,472,112.              |   |
| 26 Total expenses and disbursements. Add lines 24 and 25 .....   | 4,257,821.  | 472,291.                           |                           | 3,873,072.              |   |
| 27 Subtract line 26 from line 12:  |   |                                    |                           |                         |   |
| a Excess of revenue over expenses and disbursements ...  | 4,957,537.  |                                    |                           |                         |   |
| b Net investment income (if negative, enter -0-) .....   |   | 9,037,687.                         |                           |                         |   |
| c Adjusted net income (if negative, enter -0-) .....   |   |                                    | N/A                       |                         |   |

| <b>Part II Balance Sheets</b> <small>Attached schedules and amounts in the description column should be for end-of-year amounts only.</small> |   | Beginning of year | End of year    |                       |
|---|---|-------------------|----------------|-----------------------|
|   |   | (a) Book Value    | (b) Book Value | (c) Fair Market Value |
| <b>Assets</b>   | 1 Cash - non-interest-bearing   | 155,366.          | 96,529.        | 96,529.               |
|   | 2 Savings and temporary cash investments  | 907,410.          | 135,741.       | 135,741.              |
|   | 3 Accounts receivable   |                   |                |                       |
|   | Less: allowance for doubtful accounts   |                   |                |                       |
|   | 4 Pledges receivable  |                   |                |                       |
|   | Less: allowance for doubtful accounts   |                   |                |                       |
|   | 5 Grants receivable   |                   |                |                       |
|   | 6 Receivables due from officers, directors, trustees, and other disqualified persons  |                   |                |                       |
|   | 7 Other notes and loans receivable <b>STMT 11</b>   | 300,000.          |                |                       |
|   | Less: allowance for doubtful accounts   | 0.                | 300,000.       | 300,000.              |
|   | 8 Inventories for sale or use   |                   |                |                       |
|   | 9 Prepaid expenses and deferred charges   |                   |                |                       |
|   | 10a Investments - U.S. and state government obligations   |                   |                |                       |
|   | b Investments - corporate stock   |                   |                |                       |
|   | c Investments - corporate bonds   |                   |                |                       |
|   | 11 Investments - land, buildings, and equipment: basis  | 994,746.          |                |                       |
| Less: accumulated depreciation <b>STMT 12</b>   | 882.  | 994,746.          | 993,864.       |                       |
| 12 Investments - mortgage loans   |   |                   |                |                       |
| 13 Investments - other <b>STMT 13</b>   |   | 76,160,640.       | 84,660,946.    |                       |
| 14 Land, buildings, and equipment: basis  |   |                   |                |                       |
| Less: accumulated depreciation  |   |                   |                |                       |
| 15 Other assets (describe <b>STATEMENT 14</b> )   |   | 45,037.           | 48,231.        |                       |
| 16 <b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I)                                       |   | 78,563,199.       | 86,235,311.    |                       |
| 17 Accounts payable and accrued expenses  |   | 5,015.            | 15,620.        |                       |
| 18 Grants payable   |   | 4,183,414.        | 3,974,388.     |                       |
| 19 Deferred revenue   |   |                   |                |                       |
| 20 Loans from officers, directors, trustees, and other disqualified persons   |   |                   |                |                       |
| 21 Mortgages and other notes payable  |   |                   |                |                       |
| 22 Other liabilities (describe <b>STATEMENT 15</b> )  |   | 37,387.           | 34,251.        |                       |
| 23 <b>Total liabilities</b> (add lines 17 through 22)   |   | 4,225,816.        | 4,024,259.     |                       |
| <b>Net Assets or Fund Balances</b>  | <b>Foundations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 24, 25, 29, and 30.</b> |                   |                |                       |
|   | 24 Net assets without donor restrictions  | 63,759,919.       | 71,633,588.    |                       |
|   | 25 Net assets with donor restrictions   | 10,577,464.       | 10,577,464.    |                       |
|   | <b>Foundations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 26 through 30.</b>          |                   |                |                       |
|   | 26 Capital stock, trust principal, or current funds   |                   |                |                       |
|   | 27 Paid-in or capital surplus, or land, bldg., and equipment fund   |                   |                |                       |
|   | 28 Retained earnings, accumulated income, endowment, or other funds   |                   |                |                       |
| 29 <b>Total net assets or fund balances</b>   |   | 74,337,383.       | 82,211,052.    |                       |
| 30 <b>Total liabilities and net assets/fund balances</b>  |   | 78,563,199.       | 86,235,311.    |                       |

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

|  |   |             |
|--|---|-------------|
| 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) | 1 | 74,337,383. |
| 2 Enter amount from Part I, line 27a   | 2 | 4,957,537.  |
| 3 Other increases not included in line 2 (itemize) <b>NET UNREALIZED GAIN ON INVESTMENTS</b>   | 3 | 2,916,132.  |
| 4 Add lines 1, 2, and 3  | 4 | 82,211,052. |
| 5 Decreases not included in line 2 (itemize)   | 5 | 0.          |
| 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29  | 6 | 82,211,052. |

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

| (a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) | (b) How acquired<br>P - Purchase<br>D - Donation | (c) Date acquired<br>(mo., day, yr.) | (d) Date sold<br>(mo., day, yr.) |
|---|--|--------------------------------------|----------------------------------|
| 1a HIRTLE CALLAGHAN - VARIOUS   | P  | 12/31/20                             | 12/31/21                         |
| b HIRTLE CALLAGHAN ALT - FUND II  | P  | 12/31/20                             | 12/31/21                         |
| c CAPITAL GAINS DIVIDENDS   |  |                                      |                                  |
| d   |  |                                      |                                  |
| e   |  |                                      |                                  |

| (e) Gross sales price | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>((e) plus (f) minus (g)) |
|-----------------------|--|---|--|
| a 13,323,774.         |  | 11,294,712.                                     | 2,029,062.                                     |
| b 3,598,959.          |  | 2,348,784.                                      | 1,250,175.                                     |
| c 4,310,328.          |  |   | 4,310,328.                                     |
| d                     |  |   |  |
| e                     |  |   |  |

| (i) FMV as of 12/31/69 | (j) Adjusted basis<br>as of 12/31/69 | (k) Excess of col. (i)<br>over col. (j), if any | (l) Gains (Col. (h) gain minus<br>col. (k), but not less than -0-) or<br>Losses (from col. (h)) |
|------------------------|--------------------------------------|---|---|
| a                      |                                      |   | 2,029,062.  |
| b                      |                                      |   | 1,250,175.  |
| c                      |                                      |   | 4,310,328.  |
| d                      |                                      |   |   |
| e                      |                                      |   |   |

|  |  |   |            |
|--|--|---|------------|
| 2 Capital gain net income or (net capital loss) <span style="font-size: small;">{ If gain, also enter in Part I, line 7<br/>If (loss), enter -0- in Part I, line 7 }</span>                    |  | 2 | 7,589,565. |
| 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):<br>If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 |  | 3 | N/A        |

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

|  |    |          |
|--|----|----------|
| 1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1.<br>Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instructions) | 1  | 125,624. |
| b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b)  |    |          |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)   | 2  | 0.       |
| 3 Add lines 1 and 2  | 3  | 125,624. |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)   | 4  | 0.       |
| 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-  | 5  | 125,624. |
| 6 Credits/Payments:  |    |          |
| a 2021 estimated tax payments and 2020 overpayment credited to 2021  | 6a | 129,039. |
| b Exempt foreign organizations - tax withheld at source  | 6b | 0.       |
| c Tax paid with application for extension of time to file (Form 8868)  | 6c | 0.       |
| d Backup withholding erroneously withheld  | 6d | 0.       |
| 7 Total credits and payments. Add lines 6a through 6d  | 7  | 129,039. |
| 8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached   | 8  | 0.       |
| 9 Tax due. If the total of lines 5 and 8 is more than 7, enter amount owed   | 9  |          |
| 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid   | 10 | 3,415.   |
| 11 Enter the amount of line 10 to be: Credited to 2022 estimated tax <input type="checkbox"/> 3,415.   Refunded <input type="checkbox"/>   | 11 | 0.       |

**Part VI-A Statements Regarding Activities**

|           |  | Yes       | No         |
|-----------|--|-----------|------------|
| <b>1a</b> | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? .....   |           | <b>X</b>   |
| <b>1b</b> | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition .....<br>If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. |           | <b>X</b>   |
| <b>1c</b> | Did the foundation file <b>Form 1120-POL</b> for this year? .....  |           | <b>X</b>   |
| <b>d</b>  | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:<br>(1) On the foundation. ▶ \$ <u>0.</u> (2) On foundation managers. ▶ \$ <u>0.</u>   |           |            |
| <b>e</b>  | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ <u>0.</u>   |           |            |
| <b>2</b>  | Has the foundation engaged in any activities that have not previously been reported to the IRS? .....  |           | <b>X</b>   |
|           | If "Yes," attach a detailed description of the activities.   |           |            |
| <b>3</b>  | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .....   |           | <b>X</b>   |
| <b>4a</b> | Did the foundation have unrelated business gross income of \$1,000 or more during the year? .....  |           | <b>X</b>   |
| <b>4b</b> | If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? .....  |           | <b>N/A</b> |
| <b>5</b>  | Was there a liquidation, termination, dissolution, or substantial contraction during the year? .....   |           | <b>X</b>   |
|           | If "Yes," attach the statement required by <i>General Instruction T</i> .  |           |            |
| <b>6</b>  | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:<br>• By language in the governing instrument, or<br>• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? .....                           | <b>X</b>  |            |
| <b>7</b>  | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV .....   | <b>X</b>  |            |
| <b>8a</b> | Enter the states to which the foundation reports or with which it is registered. See instructions. ▶ <u>NY</u>   |           |            |
| <b>8b</b> | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation .....  | <b>X</b>  |            |
| <b>9</b>  | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2021 or the tax year beginning in 2021? See the instructions for Part XIII. If "Yes," complete Part XIII .....  |           | <b>X</b>   |
| <b>10</b> | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses .....   |           | <b>X</b>   |
| <b>11</b> | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions .....   |           | <b>X</b>   |
| <b>12</b> | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions .....  |           | <b>X</b>   |
| <b>13</b> | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? .....  | <b>X</b>  |            |
|           | Website address ▶ <u>WWW.GEBBIE.ORG</u>  |           |            |
| <b>14</b> | The books are in care of ▶ <u>THE FOUNDATION</u> Telephone no. ▶ <u>716-487-1062</u><br>Located at ▶ <u>215 CHERRY STREET, JAMESTOWN, NY</u> ZIP+4 ▶ <u>14701</u>  |           |            |
| <b>15</b> | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> - check here <input type="checkbox"/><br>and enter the amount of tax-exempt interest received or accrued during the year .....   | <b>15</b> | <b>N/A</b> |
| <b>16</b> | At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? .....  |           | <b>X</b>   |
|           | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶   |           |            |

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

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

|  | Yes   | No                       |
|--|-------|--------------------------|
| <b>1a</b> During the year, did the foundation (either directly or indirectly):   |       |                          |
| (1) Engage in the sale or exchange, or leasing of property with a disqualified person? .....   | 1a(1) | X                        |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? .....   | 1a(2) | X                        |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? .....   | 1a(3) | X                        |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? .....   | 1a(4) | X                        |
| (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? .....  |       |                          |
| (6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) .....  | 1a(5) | X                        |
|  | 1a(6) | X                        |
| <b>b</b> If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .....   | 1b    | N/A                      |
| <b>c</b> Organizations relying on a current notice regarding disaster assistance, check here .....   |       | <input type="checkbox"/> |
| <b>d</b> Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2021? .....   | 1d    | X                        |
| <b>2</b> Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):  |       |                          |
| <b>a</b> At the end of tax year 2021, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2021? .....  | 2a    | X                        |
| If "Yes," list the years ▶ _____, _____, _____, _____  |       |                          |
| <b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement - see instructions.) .....   | 2b    | N/A                      |
| <b>c</b> If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. ▶ _____, _____, _____, _____  |       |                          |
| <b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? .....   | 3a    | X                        |
| <b>b</b> If "Yes," did it have excess business holdings in 2021 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2021.) ..... | 3b    | N/A                      |
| <b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? .....  | 4a    | X                        |
| <b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2021? .....   | 4b    | X                        |

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

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

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

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

| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|----------------------|---|---|---|---------------------------------------|
| SEE STATEMENT 16     |   | 0.  | 0.  | 0.                                    |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |

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

| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---|---|------------------|---|---------------------------------------|
| GREGORY J. EDWARDS - 215 CHERRY STREET, JAMESTOWN, NY 14701   | CEO   | 166,786.         | 28,518.   | 0.                                    |
| KATHY BURCH - 215 CHERRY STREET, JAMESTOWN, NY 14701          | FINANCIAL OFFICER   | 73,350.          | 17,285.   | 0.                                    |
|   |   |                  |   |                                       |
|   |   |                  |   |                                       |
|   |   |                  |   |                                       |

**Total** number of other employees paid over \$50,000 0



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

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

| (a) Name and address of each person paid more than \$50,000               | (b) Type of service   | (c) Compensation |
|---|-----------------------|------------------|
| HIRTLE CALLAGHAN & CO. - 300 BARR HARBOR DRIVE, WEST CONSHOCKEN, PA 19428 | INVESTMENT MANAGEMENT | 273,208.         |
|   |                       |                  |
|   |                       |                  |
|   |                       |                  |
|   |                       |                  |
|   |                       |                  |
|   |                       |                  |
|   |                       |                  |
|   |                       |                  |

Total number of others receiving over \$50,000 for professional services ..... 0

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

| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
|--|----------|
| 1 N/A  |          |
| 2  |          |
| 3  |          |
| 4  |          |

**Part VIII-B** Summary of Program-Related Investments

| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | Amount |
|---|--------|
| 1 N/A   |        |
| 2   |        |
| 3 All other program-related investments. See instructions.  |        |

Total. Add lines 1 through 3 ..... 0.

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

|   |   |    |             |
|---|---|----|-------------|
| 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:     |   |    |             |
| a   | Average monthly fair market value of securities .....   | 1a | 80,951,495. |
| b   | Average of monthly cash balances .....  | 1b | 473,071.    |
| c   | Fair market value of all other assets (see instructions) .....  | 1c | 436,789.    |
| d   | <b>Total</b> (add lines 1a, b, and c) .....   | 1d | 81,861,355. |
| e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) ..... |   | 1e | 0.          |
| 2   | Acquisition indebtedness applicable to line 1 assets .....  | 2  | 0.          |
| 3   | Subtract line 2 from line 1d .....  | 3  | 81,861,355. |
| 4   | Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions) ..... | 4  | 1,227,920.  |
| 5   | <b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 .....                                       | 5  | 80,633,435. |
| 6   | <b>Minimum investment return.</b> Enter 5% (0.05) of line 5 .....   | 6  | 4,031,672.  |

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

|    |  |    |            |
|----|--|----|------------|
| 1  | Minimum investment return from Part IX, line 6 .....   | 1  | 4,031,672. |
| 2a | Tax on investment income for 2021 from Part V, line 5 .....  | 2a | 125,624.   |
| b  | Income tax for 2021. (This does not include the tax from Part V.) .....  | 2b |            |
| c  | Add lines 2a and 2b .....  | 2c | 125,624.   |
| 3  | Distributable amount before adjustments. Subtract line 2c from line 1 .....                                    | 3  | 3,906,048. |
| 4  | Recoveries of amounts treated as qualifying distributions .....  | 4  | 0.         |
| 5  | Add lines 3 and 4 .....  | 5  | 3,906,048. |
| 6  | Deduction from distributable amount (see instructions) .....   | 6  | 0.         |
| 7  | <b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1 ..... | 7  | 3,906,048. |

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

|  |   |    |            |
|--|---|----|------------|
| 1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: |   |    |            |
| a  | Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 .....                             | 1a | 3,873,072. |
| b  | Program-related investments - total from Part VIII-B .....  | 1b | 0.         |
| 2  | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes ..... | 2  |            |
| 3 Amounts set aside for specific charitable projects that satisfy the:                       |   |    |            |
| a  | Suitability test (prior IRS approval required) .....  | 3a |            |
| b  | Cash distribution test (attach the required schedule) .....   | 3b |            |
| 4  | <b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part XII, line 4 .....              | 4  | 3,873,072. |

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

|  | (a)<br>Corpus | (b)<br>Years prior to 2020 | (c)<br>2020 | (d)<br>2021 |
|--|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2021 from Part X, line 7  |               |                            |             | 3,906,048.  |
| 2 Undistributed income, if any, as of the end of 2021:   |               |                            |             |             |
| a Enter amount for 2020 only   |               |                            | 0.          |             |
| b Total for prior years:   |               | 0.                         |             |             |
| 3 Excess distributions carryover, if any, to 2021:   |               |                            |             |             |
| a From 2016  |               |                            |             |             |
| b From 2017  |               |                            |             |             |
| c From 2018  |               | 38,530.                    |             |             |
| d From 2019  |               |                            |             |             |
| e From 2020  |               |                            |             |             |
| f Total of lines 3a through e  | 38,530.       |                            |             |             |
| 4 Qualifying distributions for 2021 from Part XI, line 4: ▶ \$   |               |                            |             | 3,873,072.  |
| a Applied to 2020, but not more than line 2a   |               |                            | 0.          |             |
| b Applied to undistributed income of prior years (Election required - see instructions)  |               | 0.                         |             |             |
| c Treated as distributions out of corpus (Election required - see instructions)  | 0.            |                            |             |             |
| d Applied to 2021 distributable amount   |               |                            |             | 3,873,072.  |
| e Remaining amount distributed out of corpus   | 0.            |                            |             |             |
| 5 Excess distributions carryover applied to 2021 (If an amount appears in column (d), the same amount must be shown in column (a).)  | 32,976.       |                            |             | 32,976.     |
| 6 Enter the net total of each column as indicated below:   |               |                            |             |             |
| a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5  | 5,554.        |                            |             |             |
| b Prior years' undistributed income. Subtract line 4b from line 2b   |               | 0.                         |             |             |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed |               | 0.                         |             |             |
| d Subtract line 6c from line 6b. Taxable amount - see instructions   |               | 0.                         |             |             |
| e Undistributed income for 2020. Subtract line 4a from line 2a. Taxable amount - see instr.  |               |                            | 0.          |             |
| f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2022  |               |                            |             | 0.          |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)       | 0.            |                            |             |             |
| 8 Excess distributions carryover from 2016 not applied on line 5 or line 7   | 0.            |                            |             |             |
| 9 Excess distributions carryover to 2022. Subtract lines 7 and 8 from line 6a  | 5,554.        |                            |             |             |
| 10 Analysis of line 9:   |               |                            |             |             |
| a Excess from 2017   |               |                            |             |             |
| b Excess from 2018   |               | 5,554.                     |             |             |
| c Excess from 2019   |               |                            |             |             |
| d Excess from 2020   |               |                            |             |             |
| e Excess from 2021   |               |                            |             |             |

**Part XIII Private Operating Foundations** (see instructions and Part VI-A, question 9) **N/A**

**1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2021, enter the date of the ruling ▶

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

|  | Tax year |          |          |          | (e) Total |
|--|----------|----------|----------|----------|-----------|
|  | (a) 2021 | (b) 2020 | (c) 2019 | (d) 2018 |           |
| <b>2 a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed                    |          |          |          |          |           |
| <b>b</b> 85% (0.85) of line 2a   |          |          |          |          |           |
| <b>c</b> Qualifying distributions from Part XI, line 4, for each year listed   |          |          |          |          |           |
| <b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities   |          |          |          |          |           |
| <b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c                                   |          |          |          |          |           |
| <b>3</b> Complete 3a, b, or c for the alternative test relied upon:  |          |          |          |          |           |
| <b>a</b> "Assets" alternative test - enter:  |          |          |          |          |           |
| <b>(1)</b> Value of all assets   |          |          |          |          |           |
| <b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)   |          |          |          |          |           |
| <b>b</b> "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed                            |          |          |          |          |           |
| <b>c</b> "Support" alternative test - enter:   |          |          |          |          |           |
| <b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) |          |          |          |          |           |
| <b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)                                      |          |          |          |          |           |
| <b>(3)</b> Largest amount of support from an exempt organization   |          |          |          |          |           |
| <b>(4)</b> Gross investment income   |          |          |          |          |           |

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

**1 Information Regarding Foundation Managers:**

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

NONE

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

NONE

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

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

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

**GREGORY J. EDWARDS, CEO, 716-487-1062, GEDWARDS@GEBBIE.ORG  
215 CHERRY STREET, JAMESTOWN, NY 14701**

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

**LETTER FORM**

**c** Any submission deadlines:

NONE

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

NONE

**Part XIV** Supplementary Information (continued)

| <b>3 Grants and Contributions Paid During the Year or Approved for Future Payment</b>   |   |                                |  |                      |
|---|---|--------------------------------|--|----------------------|
| Recipient   | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution<br>**                               | Amount               |
| Name and address (home or business)   |   |                                |  |                      |
| <b>a Paid during the year</b>   |   |                                |  |                      |
| CHAUTAUQUA FOUNDATION<br>P.O. BOX 28<br>CHAUTAUQUA, NY 14722                            | NONE  | PUB CHAR                       | CEO DISCRETIONARY  | 1,000.               |
| CHAUTAUQUA REGION COMMUNITY FOUNDATION<br>418 SPRING STREET<br>JAMESTOWN, NY 14701      | NONE  | PUB CHAR                       | COMMUNITY SERVICE GRANTS AND NEY/STINEMAN SCHOLARSHIP FUND/BROADBAND | 36,000.              |
| CHAUTAUQUA REGION INDUSTRIAL DEVELOPMENT CORP<br>200 HARRISON ST<br>JAMESTOWN, NY 14701 | NONE  | PUB CHAR                       | CHADAKOIN RIVER STRATEGIC BUSINESS PLAN                              | 115,000.             |
| DIRECTORS DISCRETIONARY GRANTS VARIOUS<br>JAMESTOWN, NY 14701                           | NONE  | PUB CHAR                       | VARIOUS  | 54,760.              |
| DREAM IT DO IT WESTERN NEW YORK INC.<br>300 N. MAIN ST.<br>JAMESTOWN, NY 14701          | NONE  | PUB CHAR                       | URBAN DESIGN AND COMMUNITY EVENTS                                    | 98,220.              |
| <b>Total SEE CONTINUATION SHEET(S)</b>  |   |                                |  | <b>3a 3,472,112.</b> |
| <b>b Approved for future payment</b>  |   |                                |  |                      |
| CHAUTAUQUA INSTITUTION<br>P.O. BOX 28<br>CHAUTAUQUA, NY 14722                           | NONE  | PUB CHAR                       | BELLINGER AWARD  | 1,000.               |
| CHAUTAUQUA REGION COMMUNITY FOUNDATION<br>418 SPRING STREET<br>JAMESTOWN, NY 14701      | NONE  | PUB CHAR                       | COMMUNITY SERVICE GRANTS; NEY STINEMAN SCHOLARSHIP                   | 91,000.              |
| CHAUTAUQUA REGION INDUSTRIAL DEVELOPMENT CORP<br>200 HARRISON ST<br>JAMESTOWN, NY 14701 | NONE  | PUB CHAR                       | CHADAKOIN RIVER STRATEGIC BUSINESS PLAN                              | 40,000.              |
| <b>Total SEE CONTINUATION SHEET(S)</b>  |   |                                |  | <b>3b 2,144,388.</b> |





**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient<br>Name and address (home or business)   | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution   | Amount            |
|--|--|--------------------------------------|---|-------------------|
| INFINITY PERFORMING ARTS PROGRAM INC<br>115 EAST THIRD ST<br>JAMESTOWN, NY 14701                   | NONE   | PUB CHAR                             | INFINITY PEARL CITY<br>CLAY HOUSE   | 100,000.          |
| JAMESTOWN CENTER CITY DEVELOPMENT<br>CORP<br>111 WEST SECOND ST, SUITE 1100<br>JAMESTOWN, NY 14701 | NONE   | PUB CHAR                             | ICE ARENA<br>OPERATIONS/CAPITAL<br>IMPROVEMENTS/DEBT<br>SERVICE/ARENA INFILL<br>PROJECT | 1,827,902.        |
| JAMESTOWN COMMUNITY COLLEGE<br>FOUNDATION INC.<br>525 FALCONER ST<br>JAMESTOWN, NY 14701           | NONE   | PUB CHAR                             | BUILDING FEASIBILITY<br>STUDY   | 57,000.           |
| JAMESTOWN RENAISSANCE CORP<br>19 W. THIRD ST<br>JAMESTOWN, NY 14701                                | NONE   | PUB CHAR                             | OPERATING SUPPORT   | 348,000.          |
| NATIONAL COMEDY CENTER INC<br>203 W. 2ND<br>JAMESTOWN, NY 14701                                    | NONE   | PUB CHAR                             | OPERATING SUPPORT,<br>DEBT SERVICE, STAFFING  | 641,025.          |
| NY FUNDERS ALLIANCE<br>431 E. FAYETTE ST<br>SYRACUSE, NY 13202                                     | NONE   | PUB CHAR                             | ANNUAL GRANT  | 3,226.            |
| REG LENNA CENTER FOR THE ARTS<br>116 EAST THIRD ST<br>JAMESTOWN, NY 14701                          | NONE   | PUB CHAR                             | ROOFING   | 38,979.           |
| THE RESOURCE CENTER<br>200 DUNHAM AVE<br>JAMESTOWN, NY 14701                                       | NONE   | PUB CHAR                             | POP UP SHOP   | 50,000.           |
| UNITED WAY OF SOUTHERN CHAUTAUQUA<br>COUNTY<br>413 N. MAIN ST<br>JAMESTOWN, NY 14701               | NONE   | PUB CHAR                             | CAMPAIGN SUPPORT AND<br>LEADERSHIP CIRCLE   | 101,000.          |
| <b>Total from continuation sheets</b>  |  |                                      |   | <b>3,167,132.</b> |



**Part XIV Supplementary Information**

**3 Grants and Contributions Approved for Future Payment (Continuation)**

| Recipient<br>Name and address (home or business)  | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution                       | Amount            |
|---|--|--------------------------------------|---|-------------------|
| DREAM IT DO IT WESTERN NEW YORK INC.<br>300 N. MAIN ST.<br>JAMESTOWN, NY 14701                    | NONE   | PUB CHAR                             | URBAN DESIGN AND<br>COMMUNITY EVENTS                      | 101,465.          |
| GLENWOOD CEMETERY FOUNDATION INC.<br>325 GLENWOOD AVE<br>LOCKPORT, NY 14094-1730                  | NONE   | PUB CHAR                             | MAINTENANCE   | 2,000.            |
| JAMESTOWN CENTER CITY DEVELOPMENT<br>CORP<br>111 WEST SECOND ST,SUITE 1100<br>JAMESTOWN, NY 14701 | NONE   | PUB CHAR                             | OPERATING AND DEBT<br>SUPPORT; THE ZONE<br>START UP COSTS | 1,442,633.        |
| JAMESTOWN RENAISSANCE CORP<br>19 W. THIRD ST.<br>JAMESTOWN, NY 14701                              | NONE   | PUB CHAR                             | 2022 OPERATING SUPPORT                                    | 360,000.          |
| NY FUNDERS ALLIANCE<br>431 E. FAYETTE ST<br>SYRACUSE, NY 13202                                    | NONE   | PUB CHAR                             | ANNUAL GRANT  | 3,290.            |
| THE RESOURCE CENTER<br>200 DUNHAM AVE<br>JAMESTOWN, NY 14701                                      | NONE   | PUB CHAR                             | POP UP SHOP   | 102,000.          |
| UNITED WAY OF SOUTHERN CHAUTAUQUA<br>COUNTY<br>413 N. MAIN ST<br>JAMESTOWN, NY 14701              | NONE   | PUB CHAR                             | LEADERSHIP CIRCLE   | 1,000.            |
|   |  |                                      |   |                   |
|   |  |                                      |   |                   |
|   |  |                                      |   |                   |
| <b>Total from continuation sheets</b>   |  |                                      |   | <b>2,012,388.</b> |

**Part XIV** Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - CHAUTAUQUA REGION COMMUNITY FOUNDATION

COMMUNITY SERVICE GRANTS AND NEY/STINEMAN SCHOLARSHIP FUND/BROADBAND

FEASIBILITY

# Underpayment of Estimated Tax by Corporations

▶ Attach to the corporation's tax return. **FORM 990-PF**

**2021**

▶ Go to [www.irs.gov/Form2220](http://www.irs.gov/Form2220) for instructions and the latest information.

Name **GEBBIE FOUNDATION, INC.** Employer identification number **16-6050287**

**Note:** Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

**Part I Required Annual Payment**

|    |  |    |          |
|----|--|----|----------|
| 1  | Total tax (see instructions) .....   | 1  | 125,624. |
| 2a | Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 .....   | 2a |          |
| 2b | Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method .....  | 2b |          |
| 2c | Credit for federal tax paid on fuels (see instructions) .....  | 2c |          |
| 2d | <b>Total.</b> Add lines 2a through 2c .....  | 2d |          |
| 3  | Subtract line 2d from line 1. If the result is less than \$500, <b>do not</b> complete or file this form. The corporation does not owe the penalty .....   | 3  | 125,624. |
| 4  | Enter the tax shown on the corporation's 2020 income tax return. See instructions. <b>Caution:</b> If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5 ..... | 4  | 82,771.  |
| 5  | <b>Required annual payment.</b> Enter the <b>smaller</b> of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 .....  | 5  | 82,771.  |

**Part II Reasons for Filing** - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

- 6  The corporation is using the adjusted seasonal installment method.
- 7  The corporation is using the annualized income installment method.
- 8  The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

**Part III Figuring the Underpayment**

|   | (a)      | (b)      | (c)      | (d)      |
|---|----------|----------|----------|----------|
| 9 <b>Installment due dates.</b> Enter in columns (a) through (d) the 15th day of the 4th ( <b>Form 990-PF filers:</b> Use 5th month), 6th, 9th, and 12th months of the corporation's tax year .....   | 05/15/21 | 06/15/21 | 09/15/21 | 12/15/21 |
| 10 <b>Required installments.</b> If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column ..... |          |          |          |          |
| 11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions .....  | 42,942.  |          |          | 45,000.  |
| <b>Complete lines 12 through 18 of one column before going to the next column.</b>  |          |          |          |          |
| 12 Enter amount, if any, from line 18 of the preceding column .....   |          | 42,942.  | 42,942.  | 42,942.  |
| 13 Add lines 11 and 12 .....  |          | 42,942.  | 42,942.  | 87,942.  |
| 14 Add amounts on lines 16 and 17 of the preceding column .....   |          |          |          |          |
| 15 Subtract line 14 from line 13. If zero or less, enter -0- .....  | 42,942.  | 42,942.  | 42,942.  | 87,942.  |
| 16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- .....  |          |          |          |          |
| 17 <b>Underpayment.</b> If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18 .....   |          |          |          |          |
| 18 <b>Overpayment.</b> If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column .....  | 42,942.  | 42,942.  | 42,942.  |          |

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

**Part IV Figuring the Penalty**

|  | (a)          | (b) | (c) | (d)   |
|--|--------------|-----|-----|-------|
| <b>19</b> Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier.<br><b>(C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.)</b> See instructions ..... | <b>19</b>    |     |     |       |
| <b>20</b> Number of days from due date of installment on line 9 to the date shown on line 19 .....   | <b>20</b>    |     |     |       |
| <b>21</b> Number of days on line 20 after 4/15/2021 and before 7/1/2021 .....  | <b>21</b>    |     |     |       |
| <b>22</b> Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 3\% (0.03)}{365}$ ...   | <b>22</b> \$ | \$  | \$  | \$    |
| <b>23</b> Number of days on line 20 after 6/30/2021 and before 10/1/2021 .....   | <b>23</b>    |     |     |       |
| <b>24</b> Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 3\% (0.03)}{365}$ ...   | <b>24</b> \$ | \$  | \$  | \$    |
| <b>25</b> Number of days on line 20 after 9/30/2021 and before 1/1/2022 .....  | <b>25</b>    |     |     |       |
| <b>26</b> Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 3\% (0.03)}{365}$ ...   | <b>26</b> \$ | \$  | \$  | \$    |
| <b>27</b> Number of days on line 20 after 12/31/2021 and before 4/1/2022 .....   | <b>27</b>    |     |     |       |
| <b>28</b> Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 3\% (0.03)}{365}$ ...   | <b>28</b> \$ | \$  | \$  | \$    |
| <b>29</b> Number of days on line 20 after 3/31/2022 and before 7/1/2022 .....  | <b>29</b>    |     |     |       |
| <b>30</b> Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{365}$ .....   | <b>30</b> \$ | \$  | \$  | \$    |
| <b>31</b> Number of days on line 20 after 6/30/2022 and before 10/1/2022 .....   | <b>31</b>    |     |     |       |
| <b>32</b> Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{365}$ .....   | <b>32</b> \$ | \$  | \$  | \$    |
| <b>33</b> Number of days on line 20 after 9/30/2022 and before 1/1/2023 .....  | <b>33</b>    |     |     |       |
| <b>34</b> Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{365}$ .....   | <b>34</b> \$ | \$  | \$  | \$    |
| <b>35</b> Number of days on line 20 after 12/31/2022 and before 3/16/2023 .....  | <b>35</b>    |     |     |       |
| <b>36</b> Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{365}$ .....   | <b>36</b> \$ | \$  | \$  | \$    |
| <b>37</b> Add lines 22, 24, 26, 28, 30, 32, 34, and 36 .....   | <b>37</b> \$ | \$  | \$  | \$    |
| <b>38 Penalty.</b> Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns .....   | <b>38</b>    |     |     | \$ 0. |

\* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at [www.irs.gov](http://www.irs.gov). You can also call 1-800-829-4933 to get interest rate information.

**Schedule A Adjusted Seasonal Installment Method and Annualized Income Installment Method**

See instructions.

**Form 1120-S filers:** For lines 1, 2, 3, and 21, "taxable income" refers to excess net passive income or the amount on which tax is imposed under section 1374(a), whichever applies.

**Part I Adjusted Seasonal Installment Method**

**Caution:** Use this method only if the base period percentage for any 6 consecutive months is at least 70%. See instructions.

|  |     | (a)            | (b)            | (c)            | (d)             |
|--|-----|----------------|----------------|----------------|-----------------|
|  |     | First 3 months | First 5 months | First 8 months | First 11 months |
| 1 Enter taxable income for the following periods.  |     |                |                |                |                 |
| a Tax year beginning in 2018 .....   | 1a  |                |                |                |                 |
| b Tax year beginning in 2019 .....   | 1b  |                |                |                |                 |
| c Tax year beginning in 2020 .....   | 1c  |                |                |                |                 |
| 2 Enter taxable income for each period for the tax year beginning in 2021. See the instructions for the treatment of extraordinary items                           | 2   |                |                |                |                 |
| 3 Enter taxable income for the following periods.  |     | First 4 months | First 6 months | First 9 months | Entire year     |
| a Tax year beginning in 2018 .....   | 3a  |                |                |                |                 |
| b Tax year beginning in 2019 .....   | 3b  |                |                |                |                 |
| c Tax year beginning in 2020 .....   | 3c  |                |                |                |                 |
| 4 Divide the amount in each column on line 1a by the amount in column (d) on line 3a .....   | 4   |                |                |                |                 |
| 5 Divide the amount in each column on line 1b by the amount in column (d) on line 3b .....   | 5   |                |                |                |                 |
| 6 Divide the amount in each column on line 1c by the amount in column (d) on line 3c .....   | 6   |                |                |                |                 |
| 7 Add lines 4 through 6 .....  | 7   |                |                |                |                 |
| 8 Divide line 7 by 3.0 .....   | 8   |                |                |                |                 |
| 9a Divide line 2 by line 8 .....   | 9a  |                |                |                |                 |
| b Extraordinary items (see instructions) .....   | 9b  |                |                |                |                 |
| c Add lines 9a and 9b .....  | 9c  |                |                |                |                 |
| 10 Figure the tax on the amt on ln 9c using the instr for Form 1120, Sch J, line 2, or comparable line of corp's return ...  | 10  |                |                |                |                 |
| 11a Divide the amount in columns (a) through (c) on line 3a by the amount in column (d) on line 3a .....   | 11a |                |                |                |                 |
| b Divide the amount in columns (a) through (c) on line 3b by the amount in column (d) on line 3b .....   | 11b |                |                |                |                 |
| c Divide the amount in columns (a) through (c) on line 3c by the amount in column (d) on line 3c .....   | 11c |                |                |                |                 |
| 12 Add lines 11a through 11c .....   | 12  |                |                |                |                 |
| 13 Divide line 12 by 3.0 .....   | 13  |                |                |                |                 |
| 14 Multiply the amount in columns (a) through (c) of line 10 by columns (a) through (c) of line 13. In column (d), enter the amount from line 10, column (d) ..... | 14  |                |                |                |                 |
| 15 Enter any alternative minimum tax (trusts only) for each payment period. See instructions .....   | 15  |                |                |                |                 |
| 16 Enter any other taxes for each payment period. See instr.   | 16  |                |                |                |                 |
| 17 Add lines 14 through 16 .....   | 17  |                |                |                |                 |
| 18 For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions .....   | 18  |                |                |                |                 |
| 19 Total tax after credits. Subtract line 18 from line 17. If zero or less, enter -0- .....  | 19  | 0.             | 0.             | 0.             | 0.              |

**Part II Annualized Income Installment Method**

|     |   | (a)                   | (b)                   | (c)                   | (d)                   |
|-----|---|-----------------------|-----------------------|-----------------------|-----------------------|
|     |   | First _____<br>months | First _____<br>months | First _____<br>months | First _____<br>months |
| 20  | Annualization periods (see instructions) .....  | 20                    |                       |                       |                       |
| 21  | Enter taxable income for each annualization period. See instructions for the treatment of extraordinary items .....                                 | 21                    |                       |                       |                       |
| 22  | Annualization amounts (see instructions) .....  | 22                    |                       |                       |                       |
| 23a | Annualized taxable income. Multiply line 21 by line 22 ...  | 23a                   |                       |                       |                       |
|     | <b>b</b> Extraordinary items (see instructions) .....   | 23b                   |                       |                       |                       |
|     | <b>c</b> Add lines 23a and 23b .....  | 23c                   |                       |                       |                       |
| 24  | Figure the tax on the amount on line 23c using the instructions for Form 1120, Schedule J, line 2, or comparable line of corporation's return ..... | 24                    |                       |                       |                       |
| 25  | Enter any alternative minimum tax (trusts only) for each payment period (see instructions) .....  | 25                    |                       |                       |                       |
| 26  | Enter any other taxes for each payment period. See instr. ....  | 26                    |                       |                       |                       |
| 27  | Total tax. Add lines 24 through 26 .....  | 27                    |                       |                       |                       |
| 28  | For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions .....                                     | 28                    |                       |                       |                       |
| 29  | Total tax after credits. Subtract line 28 from line 27. If zero or less, enter -0- .....  | 29                    |                       |                       |                       |
| 30  | Applicable percentage .....   | 30                    | 25%                   | 50%                   | 75%                   |
| 31  | Multiply line 29 by line 30 .....   | 31                    |                       |                       |                       |

**Part III Required Installments**

|  |  | 1st         | 2nd         | 3rd         | 4th         |          |
|--|--|-------------|-------------|-------------|-------------|----------|
|  |  | installment | installment | installment | installment |          |
| <b>Note:</b> Complete lines 32 through 38 of one column before completing the next column. |  |             |             |             |             |          |
| 32   | If only Part I or Part II is completed, enter the amount in each column from line 19 or line 31. If both parts are completed, enter the <b>smaller</b> of the amounts in each column from line 19 or line 31 ..... | 32          | 0.          | 0.          | 0.          | 0.       |
| 33   | Add the amounts in all preceding columns of line 38. See instructions .....  | 33          |             |             |             |          |
| 34   | <b>Adjusted seasonal or annualized income installments.</b> Subtract line 33 from line 32. If zero or less, enter -0- ...  | 34          |             |             |             |          |
| 35   | Enter 25% (0.25) of line 5 on page 1 of Form 2220 in each column. <b>Note:</b> "Large corporations," see the instructions for line 10 for the amounts to enter .....   | 35          | 20,693.     | 42,119.     | 31,406.     | 31,406.  |
| 36   | Subtract line 38 of the preceding column from line 37 of the preceding column .....  | 36          |             | 20,693.     | 62,812.     | 94,218.  |
| 37   | Add lines 35 and 36 .....  | 37          | 20,693.     | 62,812.     | 94,218.     | 125,624. |
| 38   | <b>Required installments.</b> Enter the <b>smaller</b> of line 34 or line 37 here and on page 1 of Form 2220, line 10. See instructions .....  | 38          | 0.          | 0.          | 0.          | 0.       |

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

| SOURCE                  | (A)<br>REVENUE<br>PER BOOKS | (B)<br>NET INVESTMENT<br>INCOME | (C)<br>ADJUSTED<br>NET INCOME |
|-------------------------|-----------------------------|---------------------------------|-------------------------------|
| LAKESHORE SAVINGS BANK  | 797.                        | 797.                            |                               |
| NORTHWEST BANK          | 107.                        | 107.                            |                               |
| TOTAL TO PART I, LINE 3 | 904.                        | 904.                            |                               |

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

| SOURCE   | GROSS<br>AMOUNT | CAPITAL<br>GAINS<br>DIVIDENDS | (A)<br>REVENUE<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME |
|--|-----------------|-------------------------------|-----------------------------|-----------------------------------|-------------------------------|
| HIRTLE CALLAGHAN &<br>CO                                 | 3,847,137.      | 3,260,030.                    | 587,107.                    | 590,093.                          |                               |
| JAMESTOWN CENTER<br>CITY DEVELOPMENT<br>CORP-DEMAND NOTE | 9,000.          | 0.                            | 9,000.                      | 0.                                |                               |
| WILMINGTON TRUST   | 1,673,923.      | 1,050,298.                    | 623,625.                    | 626,445.                          |                               |
| TO PART I, LINE 4  | 5,530,060.      | 4,310,328.                    | 1,219,732.                  | 1,216,538.                        |                               |

FORM 990-PF RENTAL INCOME STATEMENT 3

| KIND AND LOCATION OF PROPERTY                    | ACTIVITY<br>NUMBER | GROSS<br>RENTAL INCOME |
|--|--------------------|------------------------|
| COMMERCIAL RENTAL - THIRD AND MAIN, JAMESTOWN NY | 1                  | 2,400.                 |
| TOTAL TO FORM 990-PF, PART I, LINE 5A            |                    | 2,400.                 |

| FORM 990-PF                                       | RENTAL EXPENSES | STATEMENT | 4        |
|---|-----------------|-----------|----------|
| DESCRIPTION                                       | ACTIVITY NUMBER | AMOUNT    | TOTAL    |
| DEPRECIATION                                      |                 | 882.      |          |
| REPAIRS   |                 | 11,671.   |          |
| CLEANING AND MAINTENNCE                           |                 | 7,962.    |          |
| REAL ESTATE TAXES                                 |                 | 5,118.    |          |
| ALARM INSTALLATION AND SERVICES                   |                 | 4,914.    |          |
| PRINTING AND RENDERINGS                           |                 | 3,902.    |          |
| INSURANCE   |                 | 1,364.    |          |
| MISCELLANEOUS                                     |                 | 16.       |          |
| - SUBTOTAL -                                      | 1               |           | 35,829.  |
| TOTAL RENTAL EXPENSES                             |                 |           | 35,829.  |
| NET RENTAL INCOME TO FORM 990-PF, PART I, LINE 5B |                 |           | -33,429. |

| FORM 990-PF                                  | OTHER INCOME                | STATEMENT                         | 5                             |
|--|-----------------------------|-----------------------------------|-------------------------------|
| DESCRIPTION                                  | (A)<br>REVENUE<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME |
| HIRTLE CALLAGHAN PRIVATE EQUITY FUND V LP    | 146.                        | 146.                              |                               |
| HIRTLE CALLAGHAN PRIVATE EQUITY FUND VI LP   | 18,338.                     | 18,338.                           |                               |
| HIRTLE CALLAGHAN PRIVATE EQUITY FUND VII LP  | 151,151.                    | 151,151.                          |                               |
| HIRTLE CALLAGHAN PRIVATE EQUITY FUND VIII LP | 54,604.                     | 54,604.                           |                               |
| HIRTLE CALLAGHAN PRIVATE EQUITY FUND X LP    | 118,130.                    | 118,130.                          |                               |
| HIRTLE CALLAGHAN PRIVATE EQUITY FUND X LP    | 60,388.                     | 60,388.                           |                               |
| K-1 HIRTLE CALLAGHAN SELECT EQUITY FUND LP   | 0.                          | 297,814.                          |                               |
| TOTAL TO FORM 990-PF, PART I, LINE 11        | 402,757.                    | 700,571.                          |                               |



| FORM 990-PF                | LEGAL FEES                   |                                   |                               | STATEMENT 6                   |
|----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION                | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
| LEGAL                      | 3,530.                       | 0.                                |                               | 3,530.                        |
| TO FM 990-PF, PG 1, LN 16A | 3,530.                       | 0.                                |                               | 3,530.                        |

| FORM 990-PF                  | ACCOUNTING FEES              |                                   |                               | STATEMENT 7                   |
|------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION                  | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
| AUDIT AND TAX PREP           | 6,890.                       | 3,445.                            |                               | 3,445.                        |
| PAYROLL PROCESSING           | 1,132.                       | 281.                              |                               | 851.                          |
| TO FORM 990-PF, PG 1, LN 16B | 8,022.                       | 3,726.                            |                               | 4,296.                        |

| FORM 990-PF                                 | OTHER PROFESSIONAL FEES      |                                   |                               | STATEMENT 8                   |
|---|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION                                 | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
| INVESTMENT MANAGEMENT AND<br>CUSTODIAL FEES | 324,687.                     | 324,687.                          |                               | 0.                            |
| CONTRACTUAL SERVICES                        | 6,928.                       | 0.                                |                               | 6,928.                        |
| TO FORM 990-PF, PG 1, LN 16C                | 331,615.                     | 324,687.                          |                               | 6,928.                        |

| FORM 990-PF                 | TAXES                        |                                   |                               | STATEMENT 9                   |
|-----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION                 | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
| PAYROLL TAXES               | 21,434.                      | 5,359.                            |                               | 16,075.                       |
| FEDERAL EXCISE TAX          | 121,484.                     | 0.                                |                               | 0.                            |
| TO FORM 990-PF, PG 1, LN 18 | 142,918.                     | 5,359.                            |                               | 16,075.                       |

| FORM 990-PF                              | OTHER EXPENSES               |                                   |                               | STATEMENT 10                  |
|--|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION                              | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
| OFFICE SUPPLIES AND<br>MAINTENANCE       | 10,746.                      | 1,075.                            |                               | 9,671.                        |
| INSURANCE                                | 5,882.                       | 1,471.                            |                               | 4,411.                        |
| TELEPHONE                                | 4,419.                       | 442.                              |                               | 3,977.                        |
| MEMBERSHIPS AND<br>SUBSCRIPTIONS         | 7,465.                       | 1,866.                            |                               | 5,599.                        |
| ECONOMIC DEVELOPMENT<br>PROPERTY EXPENSE | 12,317.                      | 0.                                |                               | 12,317.                       |
| NYS FILING FEE                           | 1,500.                       | 750.                              |                               | 750.                          |
| MISCELLANEOUS                            | 2,000.                       | 0.                                |                               | 2,000.                        |
| WEB SITE                                 | 150.                         | 0.                                |                               | 150.                          |
| EDUCATION AND TRAINING                   | 1,799.                       | 0.                                |                               | 1,799.                        |
| BOND RATING FEES                         | 2,000.                       | 0.                                |                               | 2,000.                        |
| OCCUPANCY - RENTAL PROPERTY              | 34,947.                      | 34,947.                           |                               | 0.                            |
| TO FORM 990-PF, PG 1, LN 23              | 83,225.                      | 40,551.                           |                               | 42,674.                       |

FORM 990-PF OTHER NOTES AND LOANS REPORTED SEPARATELY STATEMENT 11

| BORROWER'S NAME                        |               |                      | TERMS OF REPAYMENT           | INTEREST RATE           |             |
|--|---------------|----------------------|------------------------------|-------------------------|-------------|
| JAMESTOWN CENTER CITY DEVELOPMENT CORP |               |                      | ON DEMAND                    | 3.0000%                 |             |
| DATE OF NOTE                           | MATURITY DATE | ORIGINAL LOAN AMOUNT | DESCRIPTION OF CONSIDERATION | FMV OF CONSIDERATION    |             |
| 10/01/02                               |               | 800,000.             | CASH                         | 800,000.                |             |
| SECURITY PROVIDED BY BORROWER          |               | PURPOSE OF LOAN      |                              |                         |             |
| NONE                                   |               | CONSTRUCTION         |                              |                         |             |
| RELATIONSHIP OF BORROWER               |               |                      | BALANCE DUE                  | DOUBTFUL ACCT ALLOWANCE | FMV OF LOAN |
| NONE                                   |               |                      | 300,000.                     | 0.                      | 300,000.    |
| TOTAL TO FORM 990-PF, PART II, LINE 7  |               |                      | 300,000.                     | 0.                      | 300,000.    |

FORM 990-PF DEPRECIATION OF ASSETS HELD FOR INVESTMENT STATEMENT 12

| DESCRIPTION                              | COST OR OTHER BASIS | ACCUMULATED DEPRECIATION | BOOK VALUE |
|--|---------------------|--------------------------|------------|
| LAND 330 W. THIRD ST., JAMESTOWN, NY     | 358,916.            | 0.                       | 358,916.   |
| LAND 318-324 W. THIRD ST., JAMESTOWN, NY | 286,629.            | 0.                       | 286,629.   |
| LAND 110 W. SECOND ST., JAMESTOWN, NY    | 80,441.             | 0.                       | 80,441.    |
| LAND 9 W. MAIN ST., JAMESTOWN, NY        | 87,567.             | 0.                       | 87,567.    |
| BUILDING - 300 N. MAIN ST, JAMESTOWN NY  | 141,193.            | 882.                     | 140,311.   |
| LAND - 300 N. MAIN ST, JAMESTOWN, NY     | 40,000.             | 0.                       | 40,000.    |
| TOTAL TO FM 990-PF, PART II, LN 11       | 994,746.            | 882.                     | 993,864.   |

| FORM 990-PF                            | OTHER INVESTMENTS | STATEMENT   | 13                |
|--|-------------------|-------------|-------------------|
| DESCRIPTION                            | VALUATION METHOD  | BOOK VALUE  | FAIR MARKET VALUE |
| FIXED INCOME SECURITIES                | FMV               | 22,785,033. | 22,785,033.       |
| EQUITY SECURITIES                      | FMV               | 44,726,169. | 44,726,169.       |
| MONEY MARKET-HELD FOR INVESTMENT       | FMV               | 891,648.    | 891,648.          |
| ALTERNATIVE INVESTMENTS                | FMV               | 16,258,096. | 16,258,096.       |
| TOTAL TO FORM 990-PF, PART II, LINE 13 |                   | 84,660,946. | 84,660,946.       |

| FORM 990-PF                      | OTHER ASSETS               | STATEMENT              | 14                |
|----------------------------------|----------------------------|------------------------|-------------------|
| DESCRIPTION                      | BEGINNING OF YR BOOK VALUE | END OF YEAR BOOK VALUE | FAIR MARKET VALUE |
| INTEREST RECEIVABLE              | 44,687.                    | 47,881.                | 47,881.           |
| REFUNDABLE DEPOSITS              | 350.                       | 350.                   | 350.              |
| TO FORM 990-PF, PART II, LINE 15 | 45,037.                    | 48,231.                | 48,231.           |

| FORM 990-PF                            | OTHER LIABILITIES | STATEMENT  | 15 |
|--|-------------------|------------|----|
| DESCRIPTION                            | BOY AMOUNT        | EOY AMOUNT |    |
| PAYROLL LIABILITIES                    | 329.              | 709.       |    |
| ACCRUED FEDERAL EXCISE TAX             | 37,058.           | 33,542.    |    |
| TOTAL TO FORM 990-PF, PART II, LINE 22 | 37,387.           | 34,251.    |    |

FORM 990-PF PART VII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS STATEMENT 16

| NAME AND ADDRESS  | TITLE AND<br>AVRG HRS/WK | COMPEN-<br>SATION | EMPLOYEE<br>BEN PLAN<br>CONTRIB | EXPENSE<br>ACCOUNT |
|---|--------------------------|-------------------|---------------------------------|--------------------|
| NANCY GLEASON<br>215 CHERRY STREET<br>JAMESTOWN, NY 14701     | PRESIDENT<br>5.00        | 0.                | 0.                              | 0.                 |
| DEREK WATKINS<br>215 CHERRY STREET<br>JAMESTOWN, NY 14701     | VICE-PRESIDENT<br>5.00   | 0.                | 0.                              | 0.                 |
| JACQUELINE PHELPS<br>215 CHERRY STREET<br>JAMESTOWN, NY 14701 | TREASURER<br>5.00        | 0.                | 0.                              | 0.                 |
| SIMONE SELLSTROM<br>215 CHERRY STREET<br>JAMESTOWN, NY 14701  | SECRETARY<br>5.00        | 0.                | 0.                              | 0.                 |
| RODNEY DRAKE<br>215 CHERRY STREET<br>JAMESTOWN, NY 14701      | DIRECTOR<br>5.00         | 0.                | 0.                              | 0.                 |
| DR. LYNN DUNHAM<br>215 CHERRY STREET<br>JAMESTOWN, NY 14701   | DIRECTOR<br>5.00         | 0.                | 0.                              | 0.                 |
| THOMAS HOLT<br>215 CHERRY STREET<br>JAMESTOWN, NY 14701       | DIRECTOR<br>5.00         | 0.                | 0.                              | 0.                 |
| JEROME LEE YAW<br>215 CHERRY STREET<br>JAMESTOWN, NY 14701    | DIRECTOR<br>5.00         | 0.                | 0.                              | 0.                 |
| TOTALS INCLUDED ON 990-PF, PAGE 6, PART VII                   |                          | 0.                | 0.                              | 0.                 |

2021 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

| Asset No. | Description                                 | Date Acquired | Method | Life | Conv | Line No. | Unadjusted Cost Or Basis | Bus % Excl | Section 179 Expense | * Reduction In Basis | Basis For Depreciation | Beginning Accumulated Depreciation | Current Sec 179 Expense | Current Year Deduction | Ending Accumulated Depreciation |
|-----------|---|---------------|--------|------|------|----------|--------------------------|------------|---------------------|----------------------|------------------------|------------------------------------|-------------------------|------------------------|---------------------------------|
| 2         | LAND 330 W. THIRD ST.,<br>JAMESTOWN, NY     | 11/15/06      | L      |      |      |          | 358,916.                 |            |                     |                      | 358,916.               |                                    |                         | 0.                     |                                 |
| 3         | LAND 318-324 W. THIRD ST.,<br>JAMESTOWN, NY | 09/30/05      | L      |      |      |          | 286,629.                 |            |                     |                      | 286,629.               |                                    |                         | 0.                     |                                 |
| 7         | LAND 110 W. SECOND ST.,<br>JAMESTOWN, NY    | 07/05/07      | L      |      |      |          | 80,441.                  |            |                     |                      | 80,441.                |                                    |                         | 0.                     |                                 |
| 9         | LAND 9 W. MAIN ST.,<br>JAMESTOWN, NY        | 11/21/12      | L      |      |      |          | 87,567.                  |            |                     |                      | 87,567.                |                                    |                         | 0.                     |                                 |
|           | * TOTAL 990-PF PG 1 DEPR                    |               |        |      |      |          | 813,553.                 |            |                     |                      | 813,553.               | 0.                                 |                         | 0.                     | 0.                              |

**Return of U.S. Persons With Respect to Certain Foreign Partnerships**

**2021**

Department of the Treasury  
Internal Revenue Service

▶ **Go to [www.irs.gov/Form8865](http://www.irs.gov/Form8865) for instructions and the latest information.**

▶ **Attach to your tax return.**

Information furnished for the foreign partnership's tax year

beginning **JAN 1**, 2021, and ending **DEC 31**, 2021

Attachment Sequence No. **865**

|   |  |
|---|--|
| Name of person filing this return<br><br><b>GEBBIE FOUNDATION, INC.</b> | Filer's identification number<br><b>16-6050287</b> |
|---|--|

|  |  |
|--|--|
| Filer's address (if you aren't filing this form with your tax return)                    | <b>A</b> Category of filer (see Categories of Filers in the instructions and check applicable box(es):<br>1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input checked="" type="checkbox"/> 4 <input type="checkbox"/> |
| <b>B</b> Filer's tax year beginning <b>JAN 1</b> , 2021, and ending <b>DEC 31</b> , 2021 |  |

**C** Filer's share of liabilities: Nonrecourse \$ \_\_\_\_\_ Qualified nonrecourse financing \$ \_\_\_\_\_ Other \$ \_\_\_\_\_

**D** If filer is a member of a consolidated group but not the parent, enter the following information about the parent:

|         |     |
|---------|-----|
| Name    | EIN |
| Address |     |

**E** Check if any excepted specified foreign financial assets are reported on this form. See instructions

**F** Information about certain other partners (see instructions)

| (1) Name | (2) Address | (3) Identification number | (4) Check applicable box(es) |            |                    |
|----------|-------------|---------------------------|------------------------------|------------|--------------------|
|          |             |                           | Category 1                   | Category 2 | Constructive owner |
|          |             |                           |                              |            |                    |
|          |             |                           |                              |            |                    |

**G1** Name and address of foreign partnership  
**CLOCKTOWER CSF I LP**

**225 SANTA MONICA BLVD 10TH FLOOR**  
**SANTA MONICA, CA 90401**

|   |                       |
|---|-----------------------|
| <b>2(a)</b> EIN (if any)                    |                       |
| <b>2(b)</b> Reference ID number             | <b>981476106</b>      |
| <b>3</b> Country under whose laws organized | <b>CAYMAN ISLANDS</b> |

|  |   |   |  |   |  |
|--|---|---|--|---|--|
| <b>4</b> Date of organization<br><b>12/31/2020</b> | <b>5</b> Principal place of business<br><b>CAYMAN ISLANDS</b> | <b>6</b> Principal business activity code number<br><b>523900</b> | <b>7</b> Principal business activity<br><b>INVESTING</b> | <b>8a</b> Functional currency<br><b>USD</b> | <b>8b</b> Exchange rate (see instructions) |
|--|---|---|--|---|--|

**H** Provide the following information for the foreign partnership's tax year:

|  |  |
|--|--|
| <b>1</b> Name, address, and identification number of agent (if any) in the United States | <b>2</b> Check if the foreign partnership must file:<br><input type="checkbox"/> Form 1042 <input type="checkbox"/> Form 8804 <input type="checkbox"/> Form 1065<br>Service Center where Form 1065 is filed: |
|--|--|

|   |   |
|---|---|
| <b>3</b> Name and address of foreign partnership's agent in country of organization, if any | <b>4</b> Name and address of person(s) with custody of the books and records of the foreign partnership, and the location of such books and records, if different |
|---|---|

**5** During the tax year, did the foreign partnership pay or accrue any interest or royalty for which the deduction is not allowed under section 267A? See instructions  Yes  No  
 If "Yes," enter the total amount of the disallowed deductions \$ \_\_\_\_\_

**6** Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1(b)(14)?  Yes  No

**7** Were any special allocations made by the foreign partnership?  Yes  No

**8** Enter the number of Forms 8858, Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), attached to this return. See instructions

**9** How is this partnership classified under the law of the country in which it's organized? **EXEMPTED LIMITED P**

**10 a** Does the filer have an interest in the foreign partnership, or an interest indirectly through the foreign partnership, that's a separate unit under Regulations section 1.1503(d)-1(b)(4) or part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii)? If "No," skip question 10b  Yes  No

**b** If "Yes," does the separate unit or combined separate unit have a dual consolidated loss, as defined in Regulations section 1.1503(d)-1(b)(5)(ii)?  Yes  No

**11** Does this partnership meet **both** of the following requirements?  Yes  No

1. The partnership's total receipts for the tax year were less than \$250,000.

2. The value of the partnership's total assets at the end of the tax year was less than \$1 million.

If "Yes," **don't** complete Schedules L, M-1, and M-2.

- 12 a** Is the filer of this Form 8865 claiming a foreign-derived intangible income deduction (under section 250) with respect to any amounts listed on Schedule N?  Yes  No
- b** If "Yes," enter the amount of gross income derived from sales, leases, exchanges, or other dispositions (but not licenses) from transactions with or by the foreign partnership that the filer included in its computation of foreign-derived deduction eligible income (FDDEI) ▶ \_\_\_\_\_
- c** If "Yes," enter the amount of gross income derived from a license of property to or by the foreign partnership that the filer included in its computation of FDDEI ▶ \_\_\_\_\_
- d** If "Yes," enter the amount of gross income derived from services provided to or by the foreign partnership that the filer included in its computation of FDDEI ▶ \_\_\_\_\_
- 13** Enter the number of foreign partners subject to section 864(c)(8) as a result of transferring all or a portion of an interest in the partnership or of receiving a distribution from the partnership ▶ \_\_\_\_\_
- 14** At any time during the tax year were any transfers between the partnership and its partners subject to the disclosure requirements of Regulations section 1.707-8?  Yes  No
- 15 a** Were there any transfers of property or money within a 2-year period between the partnership and any of its partners that would require disclosure under Regulations section 1.703-3 or 1.707-6? If "Yes," attach a statement identifying the transfers, the amount or value of each transfer, and an explanation of the tax treatment. See instructions for exceptions  Yes  No
- b** Did the partnership assume a liability or receive property subject to a liability where such liability was incurred by a partner within a 2-year period of transferring the property to the partnership? If "Yes," attach a statement identifying the property transferred, the amount or value of each transfer, the debt assumed or taken by the partnership, and an explanation of the tax treatment  Yes  No

Sign Here Only if You're Filing This Form Separately and Not With Your Tax Return. 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 general partner or limited liability company member) is based on all information of which preparer has any knowledge.

▶ \_\_\_\_\_ Signature of general partner or limited liability company member ▶ \_\_\_\_\_ Date

|                               |                            |                      |      |   |              |
|-------------------------------|----------------------------|----------------------|------|---|--------------|
| <b>Paid Preparer Use Only</b> | Print/Type preparer's name | Preparer's signature | Date | Check <input type="checkbox"/> if self-employed | PTIN         |
|                               | Firm's name ▶              |                      |      |   | Firm's EIN ▶ |
|                               | Firm's address ▶           |                      |      |   | Phone no.    |

**Schedule A Constructive Ownership of Partnership Interest.** Check the boxes that apply to the filer. If you check box **b**, enter the name, address, and U.S. taxpayer identification number (if any) of the person(s) whose interest you constructively own. See instructions.

**a**  Owns a direct interest **b**  Owns a constructive interest

| Name | Address | Identification number (if any) | Check if foreign person | Check if direct partner |
|------|---------|--------------------------------|-------------------------|-------------------------|
|      |         |                                |                         |                         |

**Schedule A-1 Certain Partners of Foreign Partnership** (see instructions)

| Name | Address | Identification number (if any) | Check if foreign person |
|------|---------|--------------------------------|-------------------------|
|      |         |                                |                         |

**Schedule A-2 Foreign Partners of Section 721(c) Partnership** (see instructions)

| Name of foreign partner | Address | Country of organization (if any) | U.S. taxpayer identification number (if any) | Check if related to U.S. transferor | Percentage interest |         |
|-------------------------|---------|----------------------------------|--|-------------------------------------|---------------------|---------|
|                         |         |                                  |  |                                     | Capital             | Profits |
|                         |         |                                  |  | <input type="checkbox"/>            | %                   | %       |
|                         |         |                                  |  | <input type="checkbox"/>            | %                   | %       |

Does the partnership have any other foreign person as a direct partner?  Yes  No

**Schedule A-3 Affiliation Schedule.** List all partnerships (foreign or domestic) in which the foreign partnership owns a direct interest or indirectly owns a 10% interest.

| Name | Address | EIN (if any) | Total ordinary income or loss | Check if foreign partnership |
|------|---------|--------------|-------------------------------|------------------------------|
|      |         |              |                               |                              |



**SCHEDULE O  
(Form 8865)**

(Rev. October 2021)  
Department of the Treasury  
Internal Revenue Service

**Transfer of Property to a Foreign Partnership  
(Under Section 6038B)**

▶ **Attach to Form 8865. See the Instructions for Form 8865.**  
▶ **Go to [www.irs.gov/Form8865](http://www.irs.gov/Form8865) for instructions and the latest information.**

OMB No. 1545-1668

Name of transferor **GEBBIE FOUNDATION, INC.** Filer's identifying number **16-6050287**

Name of foreign partnership **CLOCKTOWER CSF I LP** EIN (if any) Reference ID number (see instr) **981476106**

- 1 a** Is the partnership a section 721(c) partnership (as defined in Regulations section 1.721(c)-1(b)(14))? See instructions  Yes  No  
**b** If "Yes," was the gain deferral method applied to avoid the recognition of gain upon the contribution of property?  Yes  No  
**2** Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?  Yes  No

**Part I Transfers Reportable Under Section 6038B**

| Type of property   | (a)<br>Date of transfer | (b)<br>Description of property | (c)<br>Fair market value on date of transfer | (d)<br>Cost or other basis | (e)<br>Recovery period | (f)<br>Section 704(c) allocation method | (g)<br>Gain recognized on transfer |
|--|-------------------------|--------------------------------|--|----------------------------|------------------------|---|------------------------------------|
| Cash   | 12/31/21                |                                | 206,335.                                     |                            |                        |   |                                    |
| Stock, notes receivable and payable, and other securities                          |                         |                                |  |                            |                        |   |                                    |
| Inventory  |                         |                                |  |                            |                        |   |                                    |
| Tangible property used in trade or business  |                         |                                |  |                            |                        |   |                                    |
| Intangible property described in section 197(f)(9)                                 |                         |                                |  |                            |                        |   |                                    |
| Intangible property, other than intangible property described in section 197(f)(9) |                         |                                |  |                            |                        |   |                                    |
| Other property   |                         |                                |  |                            |                        |   |                                    |
| <b>Totals</b>  |                         |                                | <b>206,335.</b>                              |                            |                        |   |                                    |

**3** Enter the transferor's percentage interest in the partnership: (a) Before the transfer % (b) After the transfer %

**Supplemental Information Required To Be Reported** (see instructions):

**Part II Dispositions Reportable Under Section 6038B**

| (a)<br>Type of property | (b)<br>Date of original transfer | (c)<br>Date of disposition | (d)<br>Manner of disposition | (e)<br>Gain recognized by partnership | (f)<br>Depreciation recapture recognized by partnership | (g)<br>Gain allocated to partner | (h)<br>Depreciation recapture allocated to partner |
|-------------------------|----------------------------------|----------------------------|------------------------------|---------------------------------------|---|----------------------------------|--|
|                         |                                  |                            |                              |                                       |   |                                  |  |
|                         |                                  |                            |                              |                                       |   |                                  |  |
|                         |                                  |                            |                              |                                       |   |                                  |  |

**Part III** Is any transfer reported on this schedule subject to gain recognition under section 904(f)(3) or section 904(f)(5)(F)?  Yes  No

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 8865.

Schedule O (Form 8865) 10-2021

**SCHEDULE G  
(Form 8865)**

(December 2021)

Department of the Treasury  
Internal Revenue Service

**Statement of Application of the Gain Deferral Method  
Under Section 721(c)**

OMB No. 1545-1668

▶ **Attach to Form 8865. See the Instructions for Form 8865.**

▶ **Go to [www.irs.gov/Form8865](http://www.irs.gov/Form8865) for instructions and the latest information.**

|  |  |  |  |
|--|--|--|--|
| Name of person filing Form 8865<br><b>GEBBIE FOUNDATION, INC.</b>                  |  | Filer's identification number<br><b>16-6050287</b>   |  |
| Name of partnership<br><b>CLOCKTOWER CSF I LP</b>                                  | <input type="checkbox"/> Successor partnership     | EIN (if any)   | Reference ID number (see instructions)<br><b>981476106</b> |
| Name of U.S. transferor (see instructions)<br><b>HC TOTAL RETURN OFFSHORE FUND</b> | <input type="checkbox"/> Successor U.S. transferor | Filing year: (see instructions)<br><input type="checkbox"/> Tax year of gain deferral contribution <input type="checkbox"/> Annual reporting |  |

**Part I Section 721(c) Property** (see instructions)

| 1.<br>Tax year of contribution | 2.<br>Description of property               | 3.<br>Recovery period | 4.<br>Section 197(f)(9) property | 5.<br>Effectively connected income property | 6. On the date of contribution |              |                      | 7. Events  |                          |                          |   |                             |
|--------------------------------|---|-----------------------|----------------------------------|---|--------------------------------|--------------|----------------------|--|--------------------------|--------------------------|---|-----------------------------|
|                                |   |                       |                                  |   | (a)<br>Fair market value       | (b)<br>Basis | (c)<br>Built-in gain | (a)<br>Acceleration (including partial acceleration event) | (b)<br>Termination       | (c)<br>Successor         | (d)<br>Tax disposition of a portion of partnership interest | (e)<br>Section 367 transfer |
| 1 2019                         | SECURITIES                                  |                       | <input type="checkbox"/>         | <input type="checkbox"/>                    | 338,648.                       | 296,521.     | 42,127.              | <input type="checkbox"/>                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                                    | <input type="checkbox"/>    |
| 2                              |   |                       | <input type="checkbox"/>         | <input type="checkbox"/>                    |                                |              |                      | <input type="checkbox"/>                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                                    | <input type="checkbox"/>    |
| 3                              |   |                       | <input type="checkbox"/>         | <input type="checkbox"/>                    |                                |              |                      | <input type="checkbox"/>                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                                    | <input type="checkbox"/>    |
| 4                              |   |                       | <input type="checkbox"/>         | <input type="checkbox"/>                    |                                |              |                      | <input type="checkbox"/>                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                                    | <input type="checkbox"/>    |
| 4a                             | From Part I additional statement(s), if any |                       | <input type="checkbox"/>         | <input type="checkbox"/>                    |                                |              |                      | <input type="checkbox"/>                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                                    | <input type="checkbox"/>    |

Do the tiered partnership rules of Regulations section 1.721(c)-3(d) apply to this partnership? See instructions .....  Yes  No

**Part II Remaining Built-in Gain, Remedial Income, and Gain Recognition** (see instructions)

| Part I, line number | (a)<br>Remaining built-in gain at beginning of tax year | (b)<br>Remaining built-in gain at end of tax year | (c)<br>Remedial income allocated to U.S. transferor | (d)<br>Gain recognized due to acceleration event | (e)<br>Gain recognized due to section 367 transfer |
|---------------------|---|---|---|--|--|
| 1                   |   |   |   |  |  |
| 2                   |   |   |   |  |  |
| 3                   |   |   |   |  |  |
| 4                   |   |   |   |  |  |
| <b>Total*</b>       |   |   |   |  |  |

\* Total must include any amounts included on an attached statement. See instructions.

For Paperwork Reduction Act Notice, see the Instructions for Form 8865.

Schedule G (Form 8865) (Rev. 12-2021)

| <b>Part III Allocation Percentages of Partnership Items With Respect to Section 721(c) Property</b> (see instructions) |                     |                               |                              |                     |                               |                              |                     |                               |                              |                     |                               |                              |
|--|---------------------|-------------------------------|------------------------------|---------------------|-------------------------------|------------------------------|---------------------|-------------------------------|------------------------------|---------------------|-------------------------------|------------------------------|
| Part I, line number  | 1. Income           |                               |                              | 2. Gain             |                               |                              | 3. Deduction        |                               |                              | 4. Loss             |                               |                              |
|  | (a) U.S. transferor | (b) Related domestic partners | (c) Related foreign partners | (a) U.S. transferor | (b) Related domestic partners | (c) Related foreign partners | (a) U.S. transferor | (b) Related domestic partners | (c) Related foreign partners | (a) U.S. transferor | (b) Related domestic partners | (c) Related foreign partners |
| 1  | %                   | %                             | %                            | %                   | %                             | %                            | %                   | %                             | %                            | %                   | %                             | %                            |
| 2  | %                   | %                             | %                            | %                   | %                             | %                            | %                   | %                             | %                            | %                   | %                             | %                            |
| 3  | %                   | %                             | %                            | %                   | %                             | %                            | %                   | %                             | %                            | %                   | %                             | %                            |
| 4  | %                   | %                             | %                            | %                   | %                             | %                            | %                   | %                             | %                            | %                   | %                             | %                            |

| <b>Part IV Allocation of Items to U.S. Transferor With Respect to Section 721(c) Property</b> (see instructions) |           |         |          |         |              |         |          |         |  |
|--|-----------|---------|----------|---------|--------------|---------|----------|---------|--|
| Part I, line number  | 1. Income |         | 2. Gain  |         | 3. Deduction |         | 4. Loss  |         |  |
|  | (a) Book  | (b) Tax | (a) Book | (b) Tax | (a) Book     | (b) Tax | (a) Book | (b) Tax |  |
| 1  |           |         |          |         |              |         |          |         |  |
| 2  |           |         |          |         |              |         |          |         |  |
| 3  |           |         |          |         |              |         |          |         |  |
| 4  |           |         |          |         |              |         |          |         |  |

| <b>Part V Additional Information</b> (see instructions). If "Yes" to any question 1 through 6b below, complete Schedule H. |   |  | Yes | No |
|--|---|--|-----|----|
| 1  | During the tax year, did an acceleration event or partial acceleration event (as described in Regulations section 1.721(c)-4 or Regulations section 1.721(c)-5(d)) occur with respect to one or more section 721(c) properties? .....   |  |     |    |
| 2  | During the tax year, did a termination event (as described in Regulations section 1.721(c)-5(b)) occur with respect to one or more section 721(c) properties? .....   |  |     |    |
| 3  | During the tax year, did a successor event (as described in Regulations section 1.721(c)-5(c)) occur with respect to one or more section 721(c) properties? .....   |  |     |    |
| 4  | During the tax year, was there a tax disposition of a portion of an interest in the partnership (as described in Regulations section 1.721(c)-5(f))? .....  |  |     |    |
| 5  | During the tax year, was there a direct or indirect transfer of section 721(c) property to a foreign corporation subject to section 367 (as described in Regulations section 1.721(c)-5(e))? .....  |  |     |    |
| 6a   | Was any additional section 721(c) property contributed to the section 721(c) partnership during the tax year? If "Yes," complete Schedule O, include each contributed property in Part I above and information with respect to the property in Parts II-IV above, and complete line 6b .....  |  |     |    |
| b  | Is the gain deferral method applied with respect to one or more of such additional section 721(c) property contributed? .....   |  |     |    |
| 7a   | Was a copy of the waiver of treaty benefits (as described in Regulations section 1.721(c)-6(b)(2)(iii)) filed with respect to each section 721(c) property contribution to the section 721(c) partnership? If "Yes," complete line 7b .....   |  |     |    |
| b  | With respect to each section 721(c) property for which a waiver of treaty benefits was filed, after exercising reasonable diligence, has the U.S. transferor determined that to the best of its knowledge and belief, all income from section 721(c) property allocated to the partners during the tax year remained subject to taxation as income effectively connected with the conduct of a trade or business within the United States (under either section 871 or 882) for all direct or indirect partners that are related foreign persons with respect to the U.S. transferor (regardless of whether any such partner was a partner at the time of the gain deferral contribution), and that neither the section 721(c) partnership nor any such partner has made any claim under an income tax convention to an exemption from U.S. income tax or a reduced rate of U.S. income taxation on income derived from the use of section 721(c) property? See Regulations section 1.721-6(b)(3)(vi) ..... |  |     |    |

**Part VI Supplemental Information** (see instructions)

**Return by a U.S. Transferor of Property  
 to a Foreign Corporation**

OMB No. 1545-0026

▶ Go to [www.irs.gov/Form926](http://www.irs.gov/Form926) for instructions and the latest information.  
 ▶ Attach to your income tax return for the year of the transfer or distribution.

Attachment  
 Sequence No. **128**

**Part I U.S. Transferor Information** (see instructions)

|  |  |
|--|--|
| Name of transferor<br><b>GEBBIE FOUNDATION, INC.</b> | Identifying number (see instructions)<br><b>16-6050287</b> |
|--|--|

- 1** Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation?  Yes  No
- 2** If the transferor was a corporation, complete questions 2a through 2d.
- a** If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) by five or fewer domestic corporations?  Yes  No
- b** Did the transferor remain in existence after the transfer?  Yes  No  
 If not, list the controlling shareholder(s) and their identifying number(s).

| Controlling shareholder | Identifying number |
|-------------------------|--------------------|
|                         |                    |
|                         |                    |
|                         |                    |
|                         |                    |
|                         |                    |
|                         |                    |
|                         |                    |
|                         |                    |

- c** If the transferor was a member of an affiliated group filing a consolidated return, was it the parent corporation?  Yes  No  
 If not, list the name and employer identification number (EIN) of the parent corporation.

| Name of parent corporation | EIN of parent corporation |
|----------------------------|---------------------------|
|                            |                           |

- d** Have basis adjustments under section 367(a)(4) been made?  Yes  No

- 3** If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such under section 367), complete questions 3a through 3d.
- a** List the name and EIN of the transferor's partnership.

| Name of partnership | EIN of partnership |
|---------------------|--------------------|
|                     |                    |

- b** Did the partner pick up its pro rata share of gain on the transfer of partnership assets?  Yes  No
- c** Is the partner disposing of its **entire** interest in the partnership?  Yes  No
- d** Is the partner disposing of an interest in a limited partnership that is regularly traded on an established securities market?  Yes  No

**Part II Transferee Foreign Corporation Information** (see instructions)

|  |  |
|--|--|
| 4 Name of transferee (foreign corporation)<br><b>HIRTLE CALLAGHAN PRIVATE EQUITY OFFSHORE FUND XII</b> | 5a Identifying number, if any<br><b>94-1443088</b> |
|--|--|

|  |                        |
|--|------------------------|
| 6 Address (including country)<br><b>PO BOX 309 GT UGLAND HOUSE, SOUTH CHURCH STREET<br/>   GEORGETOWN, KY1-1104 CAYMAN ISLANDS</b> | 5b Reference ID number |
|--|------------------------|

7 Country code of country of incorporation or organization  
**CJ**

8 Foreign law characterization (see instructions)  
**CORPORATION**

- 9** Is the transferee foreign corporation a controlled foreign corporation?  Yes  No

**Part III Information Regarding Transfer of Property** (see instructions)

**Section A - Cash**

| Type of property | (a)<br>Date of transfer | (b)<br>Description of property | (c)<br>Fair market value on date of transfer | (d)<br>Cost or other basis | (e)<br>Gain recognized on transfer |
|------------------|-------------------------|--------------------------------|--|----------------------------|------------------------------------|
| Cash             | 12/31/2021              |                                | 819,803.                                     |                            |                                    |

**10** Was cash the only property transferred?  Yes  No  
 If "Yes," skip the remainder of Part III and go to Part IV.

**Section B - Other Property (other than intangible property subject to section 367(d))**

| Type of property                                   | (a)<br>Date of transfer | (b)<br>Description of property | (c)<br>Fair market value on date of transfer | (d)<br>Cost or other basis | (e)<br>Gain recognized on transfer |
|--|-------------------------|--------------------------------|--|----------------------------|------------------------------------|
| Stock and securities                               |                         |                                |  |                            |                                    |
| Inventory  |                         |                                |  |                            |                                    |
| Other property (not listed under another category) |                         |                                |  |                            |                                    |
| Property with built-in loss                        |                         |                                |  |                            |                                    |
| Totals   |                         |                                |  |                            |                                    |

**11** Did the transferor transfer stock or securities subject to section 367(a) with respect to which a gain recognition agreement was filed?  Yes  No

**12 a** Were any assets of a foreign branch (including a branch that is a foreign disregarded entity) transferred to a foreign corporation?  Yes  No  
 If "Yes," go to line 12b.

**b** Was the transferor a domestic corporation that transferred substantially all of the assets of a foreign branch (including a branch that is a foreign disregarded entity) to a specified 10%-owned foreign corporation?  Yes  No  
 If "Yes," continue to line 12c. If "No," skip lines 12c and 12d, and go to line 13.

**c** Immediately after the transfer, was the domestic corporation a U.S. shareholder with respect to the transferee foreign corporation?  Yes  No  
 If "Yes," continue to line 12d. If "No," skip line 12d, and go to line 13.

**d** Enter the transferred loss amount included in gross income as required under section 91 ► \$ \_\_\_\_\_

**13** Did the transferor transfer property described in section 367(d)(4)?  Yes  No  
 If "No," skip Section C and questions 14a through 15.

**Section C - Intangible Property Subject to Section 367(d)**

| Type of property                     | (a)<br>Date of transfer | (b)<br>Description of property | (c)<br>Useful life | (d)<br>Arm's length price on date of transfer | (e)<br>Cost or other basis | (f)<br>Income inclusion for year of transfer |
|--------------------------------------|-------------------------|--------------------------------|--------------------|---|----------------------------|--|
| Property described in sec. 367(d)(4) |                         |                                |                    |   |                            |  |
| Totals                               |                         |                                |                    |   |                            |  |

- 14 a Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life reasonably anticipated to exceed 20 years?  Yes  No
- b At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?  Yes  No
- c Did the transferor choose to apply the 20-year inclusion period provided under Regulations section 1.367(d)-1(c)(3)(ii) for any intangible property?  Yes  No
- d If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in Regulations section 1.367(d)-1(c)(3)(ii) ► \$ \_\_\_\_\_
- 15 Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?  Yes  No

**Supplemental Part III Information Required To Be Reported** (see instructions)

**Part IV Additional Information Regarding Transfer of Property** (see instructions)

- 16 Enter the transferor's interest in the transferee foreign corporation before and after the transfer.  
(a) Before \_\_\_\_\_ % (b) After \_\_\_\_\_ %
- 17 Type of nonrecognition transaction (see instructions) ► \_\_\_\_\_
- 18 Indicate whether any transfer reported in Part III is subject to any of the following.
  - a Gain recognition under section 904(f)(3)  Yes  No
  - b Gain recognition under section 904(f)(5)(F)  Yes  No
  - c Recapture under section 1503(d)  Yes  No
  - d Exchange gain under section 987  Yes  No
- 19 Did this transfer result from a change in entity classification?  Yes  No
- 20 a Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions)  Yes  No  
If "Yes," complete lines 20b and 20c.
- b Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) ► \$ \_\_\_\_\_
- c Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)?  Yes  No
- 21 Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation covered by section 367(e)(1)? See instructions  Yes  No

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

STATE COPY

# CHAR500

NYS Annual Filing for Charitable Organizations  
www.CharitiesNYS.com

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

**2021**  
**Open to Public Inspection**

## 1. General Information

|   |   |  |  |
|---|---|--|--|
| For Fiscal Year Beginning (mm/dd/yyyy) <b>01/01/2021</b> and Ending (mm/dd/yyyy) <b>12/31/2021</b>  |   |  |  |
| Check if Applicable:<br><input type="checkbox"/> Address Change<br><input type="checkbox"/> Name Change<br><input type="checkbox"/> Initial Filing<br><input type="checkbox"/> Final Filing<br><input type="checkbox"/> Amended Filing<br><input type="checkbox"/> Reg ID Pending   | Name of Organization:<br><b>GEBBIE FOUNDATION, INC.</b> | Employer Identification Number (EIN):<br><b>16-6050287</b> |  |
|   | Mailing Address:<br><b>215 CHERRY STREET</b>            | NY Registration Number:<br><b>00-43-16</b>                 |  |
|   | City / State / ZIP:<br><b>JAMESTOWN, NY 14701</b>       | Telephone:<br><b>716 487-1062</b>                          |  |
|   | Website:<br><b>WWW.GEBBIE.ORG</b>                       | Email:<br><b>GEDWARDS@GEBBIE.ORG</b>                       |  |
| Check your organization's registration category: <input type="checkbox"/> 7A only <input checked="" type="checkbox"/> EPTL only <input type="checkbox"/> DUAL (7A & EPTL) <input type="checkbox"/> EXEMPT* Confirm your Registration Category in the Charities Registry at <a href="http://www.CharitiesNYS.com">www.CharitiesNYS.com</a> . |   |  |  |

## 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:      | <u>NANCY GLEASON</u>     | Print Name and Title | Date |
|                                       | Signature                | <u>PRESIDENT</u>     |      |
| Chief Financial Officer or Treasurer: | <u>JACQUELINE PHELPS</u> | Print Name and Title | Date |
|                                       | Signature                | <u>TREASURER</u>     |      |

## 3. Annual Reporting Exemption

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

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

## 4. Schedules and Attachments

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

## 5. Fee

|   |                            |                                      |                                |  |
|---|----------------------------|--------------------------------------|--------------------------------|--|
| See the checklist on the next page to calculate your fee(s). Indicate fee(s) you are submitting here: | 7A filing fee:<br>\$ _____ | EPTL filing fee:<br>\$ <u>1,500.</u> | Total fee:<br>\$ <u>1,500.</u> | Make a single check or money order payable to:<br><b>"Department of Law"</b> |
|---|----------------------------|--------------------------------------|--------------------------------|--|

CHAR500 Annual Filing for Charitable Organizations (Updated January 2022)

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



# CHAR500

## Annual Filing Checklist

Simply submit the certified CHAR500 with no fee, schedule, or additional attachments IF:

- Your organization is registered as 7A only and you marked the 7A filing exemption in Part 3.
- Your organization is registered as EPTL only and you marked the EPTL filing exemption in Part 3.
- Your organization is registered as DUAL and you marked both the 7A and EPTL filing exemption in Part 3.

### Checklist of Schedules and Attachments

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

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

Check the financial attachments you must submit with your CHAR500:

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

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

- Review Report if you received total revenue and support greater than \$250,000 and up to \$1,000,000
- Audit Report if you received total revenue and support greater than \$1,000,000 and the fiscal year begins on or after July 1, 2021.  
If the fiscal year begins before that date, an Audit Report is required if total revenue and support is 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](http://www.CharitiesNYS.com)  
Call: (212) 416-8401  
Email: [Charities.Bureau@ag.ny.gov](mailto: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](http://www.CharitiesNYS.com).

#### Where do I find my organization's NET WORTH?

NET WORTH for fee purposes is calculated on:

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

**Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation

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

**2021**

Open to Public Inspection

Form **990-PF**

Department of the Treasury  
Internal Revenue Service

For calendar year 2021 or tax year beginning

, and ending

|  |  |  |
|--|--|--|
| Name of foundation<br><b>GEBBIE FOUNDATION, INC.</b>   |  | A Employer identification number<br><b>16-6050287</b>  |
| Number and street (or P.O. box number if mail is not delivered to street address)<br><b>215 CHERRY STREET</b>  | Room/suite   | B Telephone number<br><b>716-487-1062</b>  |
| City or town, state or province, country, and ZIP or foreign postal code<br><b>JAMESTOWN, NY 14701</b>   |  | C If exemption application is pending, check here ... <input type="checkbox"/>   |
| G Check all that apply:<br><input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity<br><input type="checkbox"/> Final return <input type="checkbox"/> Amended return<br><input type="checkbox"/> Address change <input type="checkbox"/> Name change |  | D 1. Foreign organizations, check here ... <input type="checkbox"/><br>2. Foreign organizations meeting the 85% test, check here and attach computation ... <input type="checkbox"/> |
| H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation<br><input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation  |  | E If private foundation status was terminated under section 507(b)(1)(A), check here ... <input type="checkbox"/>  |
| I Fair market value of all assets at end of year (from Part II, col. (c), line 16)<br>▶ \$ <b>86,235,311.</b>  | J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual<br><input type="checkbox"/> Other (specify) _____ | F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ... <input type="checkbox"/>   |
| (Part I, column (d), must be on cash basis.)   |  |  |

| Part I Analysis of Revenue and Expenses<br><small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)</small> |  | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|--|--|------------------------------------|---------------------------|-------------------------|---|
| 1 Contributions, gifts, grants, etc., received   |  |                                    |                           | N/A                     |   |
| 2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B   |  |                                    |                           |                         |   |
| 3 Interest on savings and temporary cash investments   |  | 904.                               | 904.                      |                         | STATEMENT 1   |
| 4 Dividends and interest from securities   |  | 1,219,732.                         | 1,216,538.                |                         | STATEMENT 2   |
| 5a Gross rents   |  | 2,400.                             | 2,400.                    |                         | STATEMENT 3   |
| b Net rental income or (loss) <b>-33,429.</b>  |  |                                    |                           |                         | STATEMENT 4   |
| 6a Net gain or (loss) from sale of assets not on line 10   |  | 7,589,565.                         |                           |                         |   |
| b Gross sales price for all assets on line 6a <b>21,233,061.</b>   |  |                                    |                           |                         |   |
| 7 Capital gain net income (from Part IV, line 2)   |  |                                    | 7,589,565.                |                         |   |
| 8 Net short-term capital gain  |  |                                    |                           |                         |   |
| 9 Income modifications   |  |                                    |                           |                         |   |
| 10a Gross sales less returns and allowances  |  |                                    |                           |                         |   |
| b Less: Cost of goods sold   |  |                                    |                           |                         |   |
| c Gross profit or (loss)   |  |                                    |                           |                         |   |
| 11 Other income  |  | 402,757.                           | 700,571.                  |                         | STATEMENT 5   |
| 12 Total. Add lines 1 through 11   |  | 9,215,358.                         | 9,509,978.                |                         |   |
| 13 Compensation of officers, directors, trustees, etc.   |  | 0.                                 | 0.                        |                         | 0.  |
| 14 Other employee salaries and wages   |  | 304,421.                           | 76,105.                   |                         | 228,316.  |
| 15 Pension plans, employee benefits  |  | 59,785.                            | 14,947.                   |                         | 44,838.   |
| 16a Legal fees <b>STMT 6</b>   |  | 3,530.                             | 0.                        |                         | 3,530.  |
| b Accounting fees <b>STMT 7</b>  |  | 8,022.                             | 3,726.                    |                         | 4,296.  |
| c Other professional fees <b>STMT 8</b>  |  | 331,615.                           | 324,687.                  |                         | 6,928.  |
| 17 Interest  |  |                                    |                           |                         |   |
| 18 Taxes <b>STMT 9</b>   |  | 142,918.                           | 5,359.                    |                         | 16,075.   |
| 19 Depreciation and depletion  |  | 882.                               | 882.                      |                         |   |
| 20 Occupancy   |  | 42,772.                            | 4,277.                    |                         | 38,495.   |
| 21 Travel, conferences, and meetings   |  | 17,565.                            | 1,757.                    |                         | 15,808.   |
| 22 Printing and publications   |  |                                    |                           |                         |   |
| 23 Other expenses <b>STMT 10</b>   |  | 83,225.                            | 40,551.                   |                         | 42,674.   |
| 24 Total operating and administrative expenses. Add lines 13 through 23  |  | 994,735.                           | 472,291.                  |                         | 400,960.  |
| 25 Contributions, gifts, grants paid   |  | 3,263,086.                         |                           |                         | 3,472,112.  |
| 26 Total expenses and disbursements. Add lines 24 and 25   |  | 4,257,821.                         | 472,291.                  |                         | 3,873,072.  |
| 27 Subtract line 26 from line 12:  |  |                                    |                           |                         |   |
| a Excess of revenue over expenses and disbursements  |  | 4,957,537.                         |                           |                         |   |
| b Net investment income (if negative, enter -0-)   |  |                                    | 9,037,687.                |                         |   |
| c Adjusted net income (if negative, enter -0-)   |  |                                    |                           | N/A                     |   |

| <b>Part II Balance Sheets</b> <small>Attached schedules and amounts in the description column should be for end-of-year amounts only.</small> |   | Beginning of year | End of year    |                       |
|---|---|-------------------|----------------|-----------------------|
|   |   | (a) Book Value    | (b) Book Value | (c) Fair Market Value |
| <b>Assets</b>   | 1 Cash - non-interest-bearing .....   | 155,366.          | 96,529.        | 96,529.               |
|   | 2 Savings and temporary cash investments .....  | 907,410.          | 135,741.       | 135,741.              |
|   | 3 Accounts receivable ▶<br>Less: allowance for doubtful accounts ▶  |                   |                |                       |
|   | 4 Pledges receivable ▶<br>Less: allowance for doubtful accounts ▶   |                   |                |                       |
|   | 5 Grants receivable .....   |                   |                |                       |
|   | 6 Receivables due from officers, directors, trustees, and other disqualified persons .....  |                   |                |                       |
|   | 7 Other notes and loans receivable <b>STMT 11</b> ▶ 300,000.<br>Less: allowance for doubtful accounts ▶ 0.                                | 300,000.          | 300,000.       | 300,000.              |
|   | 8 Inventories for sale or use .....   |                   |                |                       |
|   | 9 Prepaid expenses and deferred charges .....   |                   |                |                       |
|   | 10a Investments - U.S. and state government obligations .....   |                   |                |                       |
|   | b Investments - corporate stock .....   |                   |                |                       |
|   | c Investments - corporate bonds .....   |                   |                |                       |
|   | 11 Investments - land, buildings, and equipment: basis ▶ 994,746.<br>Less: accumulated depreciation <b>STMT 12</b> ▶ 882.                 | 994,746.          | 993,864.       | 993,864.              |
|   | 12 Investments - mortgage loans .....   |                   |                |                       |
|   | 13 Investments - other <b>STMT 13</b> .....   | 76,160,640.       | 84,660,946.    | 84,660,946.           |
|   | 14 Land, buildings, and equipment: basis ▶<br>Less: accumulated depreciation ▶  |                   |                |                       |
| 15 Other assets (describe ▶ <b>STATEMENT 14</b> ) .....   | 45,037.   | 48,231.           | 48,231.        |                       |
| 16 <b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I) .....                                 | 78,563,199.   | 86,235,311.       | 86,235,311.    |                       |
| <b>Liabilities</b>  | 17 Accounts payable and accrued expenses .....  | 5,015.            | 15,620.        |                       |
|   | 18 Grants payable .....   | 4,183,414.        | 3,974,388.     |                       |
|   | 19 Deferred revenue .....   |                   |                |                       |
|   | 20 Loans from officers, directors, trustees, and other disqualified persons .....   |                   |                |                       |
|   | 21 Mortgages and other notes payable .....  |                   |                |                       |
|   | 22 Other liabilities (describe ▶ <b>STATEMENT 15</b> ) .....  | 37,387.           | 34,251.        |                       |
| 23 <b>Total liabilities</b> (add lines 17 through 22) .....   | 4,225,816.  | 4,024,259.        |                |                       |
| <b>Net Assets or Fund Balances</b>  | <b>Foundations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 24, 25, 29, and 30.</b> |                   |                |                       |
|   | 24 Net assets without donor restrictions .....  | 63,759,919.       | 71,633,588.    |                       |
|   | 25 Net assets with donor restrictions .....   | 10,577,464.       | 10,577,464.    |                       |
|   | <b>Foundations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 26 through 30.</b>          |                   |                |                       |
|   | 26 Capital stock, trust principal, or current funds .....   |                   |                |                       |
|   | 27 Paid-in or capital surplus, or land, bldg., and equipment fund .....   |                   |                |                       |
|   | 28 Retained earnings, accumulated income, endowment, or other funds .....   |                   |                |                       |
| 29 <b>Total net assets or fund balances</b> .....   | 74,337,383.   | 82,211,052.       |                |                       |
| 30 <b>Total liabilities and net assets/fund balances</b> .....  | 78,563,199.   | 86,235,311.       |                |                       |

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

|   |   |             |
|---|---|-------------|
| 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29<br>(must agree with end-of-year figure reported on prior year's return) ..... | 1 | 74,337,383. |
| 2 Enter amount from Part I, line 27a .....  | 2 | 4,957,537.  |
| 3 Other increases not included in line 2 (itemize) ▶ <b>NET UNREALIZED GAIN ON INVESTMENTS</b> .....  | 3 | 2,916,132.  |
| 4 Add lines 1, 2, and 3 .....   | 4 | 82,211,052. |
| 5 Decreases not included in line 2 (itemize) ▶ .....  | 5 | 0.          |
| 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 .....   | 6 | 82,211,052. |

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

| (a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) | (b) How acquired<br>P - Purchase<br>D - Donation | (c) Date acquired<br>(mo., day, yr.) | (d) Date sold<br>(mo., day, yr.) |
|---|--|--------------------------------------|----------------------------------|
| 1a HIRTLE CALLAGHAN - VARIOUS   | P  | 12/31/20                             | 12/31/21                         |
| b HIRTLE CALLAGHAN ALT - FUND II  | P  | 12/31/20                             | 12/31/21                         |
| c CAPITAL GAINS DIVIDENDS   |  |                                      |                                  |
| d   |  |                                      |                                  |
| e   |  |                                      |                                  |

| (e) Gross sales price | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>((e) plus (f) minus (g)) |
|-----------------------|--|---|--|
| a 13,323,774.         |  | 11,294,712.                                     | 2,029,062.                                     |
| b 3,598,959.          |  | 2,348,784.                                      | 1,250,175.                                     |
| c 4,310,328.          |  |   | 4,310,328.                                     |
| d                     |  |   |  |
| e                     |  |   |  |

| (i) FMV as of 12/31/69 | (j) Adjusted basis<br>as of 12/31/69 | (k) Excess of col. (i)<br>over col. (j), if any | (l) Gains (Col. (h) gain minus<br>col. (k), but not less than -0-) or<br>Losses (from col. (h)) |
|------------------------|--------------------------------------|---|---|
| a                      |                                      |   | 2,029,062.  |
| b                      |                                      |   | 1,250,175.  |
| c                      |                                      |   | 4,310,328.  |
| d                      |                                      |   |   |
| e                      |                                      |   |   |

|   |   |   |            |
|---|---|---|------------|
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.  |   |   |            |
| 2 Capital gain net income or (net capital loss)   | { If gain, also enter in Part I, line 7<br>If (loss), enter -0- in Part I, line 7 | 2 | 7,589,565. |
| 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):<br>If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in<br>Part I, line 8 |   | 3 | N/A        |

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

|  |    |    |          |
|--|----|----|----------|
| 1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1.<br>Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instructions) |    | 1  | 125,624. |
| b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations,<br>enter 4% (0.04) of Part I, line 12, col. (b)   |    |    |          |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)   |    | 2  | 0.       |
| 3 Add lines 1 and 2  |    | 3  | 125,624. |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)   |    | 4  | 0.       |
| 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-  |    | 5  | 125,624. |
| 6 Credits/Payments:  |    |    |          |
| a 2021 estimated tax payments and 2020 overpayment credited to 2021  | 6a |    | 129,039. |
| b Exempt foreign organizations - tax withheld at source  | 6b |    | 0.       |
| c Tax paid with application for extension of time to file (Form 8868)  | 6c |    | 0.       |
| d Backup withholding erroneously withheld  | 6d |    | 0.       |
| 7 Total credits and payments. Add lines 6a through 6d  |    | 7  | 129,039. |
| 8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached   |    | 8  | 0.       |
| 9 Tax due. If the total of lines 5 and 8 is more than 7, enter amount owed   |    | 9  |          |
| 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid   |    | 10 | 3,415.   |
| 11 Enter the amount of line 10 to be: Credited to 2022 estimated tax <input type="checkbox"/> 3,415.   Refunded <input checked="" type="checkbox"/>  |    | 11 | 0.       |

**Part VI-A Statements Regarding Activities**

|  | Yes                                 | No                                  |
|--|-------------------------------------|-------------------------------------|
| <b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? .....   |                                     | <input checked="" type="checkbox"/> |
| <b>1b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition .....<br>If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. |                                     | <input checked="" type="checkbox"/> |
| <b>1c</b> Did the foundation file <b>Form 1120-POL</b> for this year? .....  |                                     | <input checked="" type="checkbox"/> |
| <b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:<br>(1) On the foundation. ▶ \$ <u>0.</u> (2) On foundation managers. ▶ \$ <u>0.</u>  |                                     |                                     |
| <b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ <u>0.</u>  |                                     |                                     |
| <b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? .....   |                                     | <input checked="" type="checkbox"/> |
| If "Yes," attach a detailed description of the activities.   |                                     |                                     |
| <b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .....  |                                     | <input checked="" type="checkbox"/> |
| <b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? .....  |                                     | <input checked="" type="checkbox"/> |
| <b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? .....   |                                     | <b>N/A</b>                          |
| <b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? .....  |                                     | <input checked="" type="checkbox"/> |
| If "Yes," attach the statement required by <i>General Instruction T</i> .  |                                     |                                     |
| <b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:<br>• By language in the governing instrument, or<br>• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? .....                            | <input checked="" type="checkbox"/> |                                     |
| <b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV .....  | <input checked="" type="checkbox"/> |                                     |
| <b>8a</b> Enter the states to which the foundation reports or with which it is registered. See instructions. ▶ <u>NY</u>   |                                     |                                     |
| <b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation .....   | <input checked="" type="checkbox"/> |                                     |
| <b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2021 or the tax year beginning in 2021? See the instructions for Part XIII. If "Yes," complete Part XIII .....   |                                     | <input checked="" type="checkbox"/> |
| <b>10</b> Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses .....   |                                     | <input checked="" type="checkbox"/> |
| <b>11</b> At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions .....   |                                     | <input checked="" type="checkbox"/> |
| <b>12</b> Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions .....  |                                     | <input checked="" type="checkbox"/> |
| <b>13</b> Did the foundation comply with the public inspection requirements for its annual returns and exemption application? .....  | <input checked="" type="checkbox"/> |                                     |
| Website address ▶ <u>WWW.GEBBIE.ORG</u>  |                                     |                                     |
| <b>14</b> The books are in care of ▶ <u>THE FOUNDATION</u> Telephone no. ▶ <u>716-487-1062</u><br>Located at ▶ <u>215 CHERRY STREET, JAMESTOWN, NY</u> ZIP+4 ▶ <u>14701</u>  |                                     |                                     |
| <b>15</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> - check here <input type="checkbox"/><br>and enter the amount of tax-exempt interest received or accrued during the year .....   | <input type="checkbox"/>            | <b>N/A</b>                          |
| <b>16</b> At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? .....  |                                     | <input checked="" type="checkbox"/> |
| See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶   |                                     |                                     |

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

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

|  | Yes   | No                       |
|--|-------|--------------------------|
| <b>1a</b> During the year, did the foundation (either directly or indirectly):   |       |                          |
| (1) Engage in the sale or exchange, or leasing of property with a disqualified person? .....   | 1a(1) | X                        |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? .....   | 1a(2) | X                        |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? .....   | 1a(3) | X                        |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? .....   | 1a(4) | X                        |
| (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? .....  |       |                          |
| (6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) .....  | 1a(5) | X                        |
|  | 1a(6) | X                        |
| <b>b</b> If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .....   | 1b    | N/A                      |
| <b>c</b> Organizations relying on a current notice regarding disaster assistance, check here .....   |       | <input type="checkbox"/> |
| <b>d</b> Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2021? .....   | 1d    | X                        |
| <b>2</b> Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):  |       |                          |
| <b>a</b> At the end of tax year 2021, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2021? .....  | 2a    | X                        |
| If "Yes," list the years ▶ _____, _____, _____, _____  |       |                          |
| <b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement - see instructions.) .....   | 2b    | N/A                      |
| <b>c</b> If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. ▶ _____, _____, _____, _____  |       |                          |
| <b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? .....   | 3a    | X                        |
| <b>b</b> If "Yes," did it have excess business holdings in 2021 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2021.) ..... | 3b    | N/A                      |
| <b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? .....  | 4a    | X                        |
| <b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2021? .....   | 4b    | X                        |

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

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

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

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

| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|----------------------|---|---|---|---------------------------------------|
| SEE STATEMENT 16     |   | 0.  | 0.  | 0.                                    |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |

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

| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---|---|------------------|---|---------------------------------------|
| GREGORY J. EDWARDS - 215 CHERRY STREET, JAMESTOWN, NY 14701   | CEO   | 166,786.         | 28,518.   | 0.                                    |
| KATHY BURCH - 215 CHERRY STREET, JAMESTOWN, NY 14701          | FINANCIAL OFFICER   | 73,350.          | 17,285.   | 0.                                    |
|   |   |                  |   |                                       |
|   |   |                  |   |                                       |
|   |   |                  |   |                                       |

Total number of other employees paid over \$50,000 0

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

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

| (a) Name and address of each person paid more than \$50,000               | (b) Type of service   | (c) Compensation |
|---|-----------------------|------------------|
| HIRTLE CALLAGHAN & CO. - 300 BARR HARBOR DRIVE, WEST CONSHOCKEN, PA 19428 | INVESTMENT MANAGEMENT | 273,208.         |
|   |                       |                  |
|   |                       |                  |
|   |                       |                  |
|   |                       |                  |
|   |                       |                  |
|   |                       |                  |
|   |                       |                  |

Total number of others receiving over \$50,000 for professional services ..... **0**

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

| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
|--|----------|
| 1 N/A  |          |
| 2  |          |
| 3  |          |
| 4  |          |

**Part VIII-B Summary of Program-Related Investments**

| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | Amount |
|---|--------|
| 1 N/A   |        |
| 2   |        |
| 3 All other program-related investments. See instructions.  |        |

**Total.** Add lines 1 through 3 ..... **0.**



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

|   |   |    |             |
|---|---|----|-------------|
| 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: |   |    |             |
| a   | Average monthly fair market value of securities .....   | 1a | 80,951,495. |
| b   | Average of monthly cash balances .....  | 1b | 473,071.    |
| c   | Fair market value of all other assets (see instructions) .....  | 1c | 436,789.    |
| d   | <b>Total</b> (add lines 1a, b, and c) .....   | 1d | 81,861,355. |
| e   | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) .....       | 1e | 0.          |
| 2   | Acquisition indebtedness applicable to line 1 assets .....  | 2  | 0.          |
| 3   | Subtract line 2 from line 1d .....  | 3  | 81,861,355. |
| 4   | Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions) ..... | 4  | 1,227,920.  |
| 5   | <b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 .....                                       | 5  | 80,633,435. |
| 6   | <b>Minimum investment return.</b> Enter 5% (0.05) of line 5 .....   | 6  | 4,031,672.  |

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

|    |  |    |            |
|----|--|----|------------|
| 1  | Minimum investment return from Part IX, line 6 .....   | 1  | 4,031,672. |
| 2a | Tax on investment income for 2021 from Part V, line 5 .....  | 2a | 125,624.   |
| b  | Income tax for 2021. (This does not include the tax from Part V.) .....  | 2b |            |
| c  | Add lines 2a and 2b .....  | 2c | 125,624.   |
| 3  | Distributable amount before adjustments. Subtract line 2c from line 1 .....                                    | 3  | 3,906,048. |
| 4  | Recoveries of amounts treated as qualifying distributions .....  | 4  | 0.         |
| 5  | Add lines 3 and 4 .....  | 5  | 3,906,048. |
| 6  | Deduction from distributable amount (see instructions) .....   | 6  | 0.         |
| 7  | <b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1 ..... | 7  | 3,906,048. |

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

|  |   |    |            |
|--|---|----|------------|
| 1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: |   |    |            |
| a  | Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 .....                             | 1a | 3,873,072. |
| b  | Program-related investments - total from Part VIII-B .....  | 1b | 0.         |
| 2  | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes ..... | 2  |            |
| 3  | Amounts set aside for specific charitable projects that satisfy the:  |    |            |
| a  | Suitability test (prior IRS approval required) .....  | 3a |            |
| b  | Cash distribution test (attach the required schedule) .....   | 3b |            |
| 4  | <b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part XII, line 4 .....              | 4  | 3,873,072. |

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

|  | (a)<br>Corpus | (b)<br>Years prior to 2020 | (c)<br>2020 | (d)<br>2021 |
|--|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2021 from Part X, line 7  |               |                            |             | 3,906,048.  |
| 2 Undistributed income, if any, as of the end of 2021:   |               |                            |             |             |
| a Enter amount for 2020 only   |               |                            | 0.          |             |
| b Total for prior years:   |               | 0.                         |             |             |
| 3 Excess distributions carryover, if any, to 2021:   |               |                            |             |             |
| a From 2016  |               |                            |             |             |
| b From 2017  |               |                            |             |             |
| c From 2018  | 38,530.       |                            |             |             |
| d From 2019  |               |                            |             |             |
| e From 2020  |               |                            |             |             |
| f Total of lines 3a through e  | 38,530.       |                            |             |             |
| 4 Qualifying distributions for 2021 from Part XI, line 4: ▶ \$   | 3,873,072.    |                            |             |             |
| a Applied to 2020, but not more than line 2a   |               |                            | 0.          |             |
| b Applied to undistributed income of prior years (Election required - see instructions)  |               | 0.                         |             |             |
| c Treated as distributions out of corpus (Election required - see instructions)  | 0.            |                            |             |             |
| d Applied to 2021 distributable amount   |               |                            |             | 3,873,072.  |
| e Remaining amount distributed out of corpus   | 0.            |                            |             |             |
| 5 Excess distributions carryover applied to 2021 (If an amount appears in column (d), the same amount must be shown in column (a).)  | 32,976.       |                            |             | 32,976.     |
| 6 Enter the net total of each column as indicated below:   |               |                            |             |             |
| a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5  | 5,554.        |                            |             |             |
| b Prior years' undistributed income. Subtract line 4b from line 2b   |               | 0.                         |             |             |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed |               | 0.                         |             |             |
| d Subtract line 6c from line 6b. Taxable amount - see instructions   |               | 0.                         |             |             |
| e Undistributed income for 2020. Subtract line 4a from line 2a. Taxable amount - see instr.  |               |                            | 0.          |             |
| f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2022  |               |                            |             | 0.          |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)       | 0.            |                            |             |             |
| 8 Excess distributions carryover from 2016 not applied on line 5 or line 7   | 0.            |                            |             |             |
| 9 Excess distributions carryover to 2022. Subtract lines 7 and 8 from line 6a  | 5,554.        |                            |             |             |
| 10 Analysis of line 9:   |               |                            |             |             |
| a Excess from 2017   |               |                            |             |             |
| b Excess from 2018   | 5,554.        |                            |             |             |
| c Excess from 2019   |               |                            |             |             |
| d Excess from 2020   |               |                            |             |             |
| e Excess from 2021   |               |                            |             |             |

**Part XIII Private Operating Foundations** (see instructions and Part VI-A, question 9) **N/A**

**1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2021, enter the date of the ruling ▶

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

|  | Tax year |          |          |          | (e) Total |
|--|----------|----------|----------|----------|-----------|
|  | (a) 2021 | (b) 2020 | (c) 2019 | (d) 2018 |           |
| <b>2 a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed                    |          |          |          |          |           |
| <b>b</b> 85% (0.85) of line 2a   |          |          |          |          |           |
| <b>c</b> Qualifying distributions from Part XI, line 4, for each year listed   |          |          |          |          |           |
| <b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities   |          |          |          |          |           |
| <b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c                                   |          |          |          |          |           |
| <b>3</b> Complete 3a, b, or c for the alternative test relied upon:  |          |          |          |          |           |
| <b>a</b> "Assets" alternative test - enter:  |          |          |          |          |           |
| <b>(1)</b> Value of all assets   |          |          |          |          |           |
| <b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)   |          |          |          |          |           |
| <b>b</b> "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed                            |          |          |          |          |           |
| <b>c</b> "Support" alternative test - enter:   |          |          |          |          |           |
| <b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) |          |          |          |          |           |
| <b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)                                      |          |          |          |          |           |
| <b>(3)</b> Largest amount of support from an exempt organization   |          |          |          |          |           |
| <b>(4)</b> Gross investment income   |          |          |          |          |           |

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

**1 Information Regarding Foundation Managers:**  
**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)  
**NONE**

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.  
**NONE**

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**  
 Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed:  
**GREGORY J. EDWARDS, CEO, 716-487-1062, GEDWARDS@GEBBIE.ORG**  
**215 CHERRY STREET, JAMESTOWN, NY 14701**

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

**c** Any submission deadlines:  
**NONE**

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:  
**NONE**

**Part XIV** Supplementary Information (continued)

| <b>3 Grants and Contributions Paid During the Year or Approved for Future Payment</b>   |   |                                |  |                      |
|---|---|--------------------------------|--|----------------------|
| Recipient   | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution<br>* *                              | Amount               |
| Name and address (home or business)   |   |                                |  |                      |
| <b>a Paid during the year</b>   |   |                                |  |                      |
| CHAUTAUQUA FOUNDATION<br>P.O. BOX 28<br>CHAUTAUQUA, NY 14722                            | NONE  | PUB CHAR                       | CEO DISCRETIONARY  | 1,000.               |
| CHAUTAUQUA REGION COMMUNITY FOUNDATION<br>418 SPRING STREET<br>JAMESTOWN, NY 14701      | NONE  | PUB CHAR                       | COMMUNITY SERVICE GRANTS AND NEY/STINEMAN SCHOLARSHIP FUND/BROADBAND | 36,000.              |
| CHAUTAUQUA REGION INDUSTRIAL DEVELOPMENT CORP<br>200 HARRISON ST<br>JAMESTOWN, NY 14701 | NONE  | PUB CHAR                       | CHADAKOIN RIVER STRATEGIC BUSINESS PLAN                              | 115,000.             |
| DIRECTORS DISCRETIONARY GRANTS VARIOUS<br>JAMESTOWN, NY 14701                           | NONE  | PUB CHAR                       | VARIOUS  | 54,760.              |
| DREAM IT DO IT WESTERN NEW YORK INC.<br>300 N. MAIN ST.<br>JAMESTOWN, NY 14701          | NONE  | PUB CHAR                       | URBAN DESIGN AND COMMUNITY EVENTS                                    | 98,220.              |
| <b>Total SEE CONTINUATION SHEET(S)</b>  |   |                                |  | <b>3a</b> 3,472,112. |
| <b>b Approved for future payment</b>  |   |                                |  |                      |
| CHAUTAUQUA INSTITUTION<br>P.O. BOX 28<br>CHAUTAUQUA, NY 14722                           | NONE  | PUB CHAR                       | BELLINGER AWARD  | 1,000.               |
| CHAUTAUQUA REGION COMMUNITY FOUNDATION<br>418 SPRING STREET<br>JAMESTOWN, NY 14701      | NONE  | PUB CHAR                       | COMMUNITY SERVICE GRANTS; NEY STINEMAN SCHOLARSHIP                   | 91,000.              |
| CHAUTAUQUA REGION INDUSTRIAL DEVELOPMENT CORP<br>200 HARRISON ST<br>JAMESTOWN, NY 14701 | NONE  | PUB CHAR                       | CHADAKOIN RIVER STRATEGIC BUSINESS PLAN                              | 40,000.              |
| <b>Total SEE CONTINUATION SHEET(S)</b>  |   |                                |  | <b>3b</b> 2,144,388. |





**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient<br>Name and address (home or business)   | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution  | Amount            |
|--|---|--------------------------------|---|-------------------|
| INFINITY PERFORMING ARTS PROGRAM INC<br>115 EAST THIRD ST<br>JAMESTOWN, NY 14701                   | NONE  | PUB CHAR                       | INFINITY PEARL CITY<br>CLAY HOUSE   | 100,000.          |
| JAMESTOWN CENTER CITY DEVELOPMENT<br>CORP<br>111 WEST SECOND ST, SUITE 1100<br>JAMESTOWN, NY 14701 | NONE  | PUB CHAR                       | ICE ARENA<br>OPERATIONS/CAPITAL<br>IMPROVEMENTS/DEBT<br>SERVICE/ARENA INFILL<br>PROJECT | 1,827,902.        |
| JAMESTOWN COMMUNITY COLLEGE<br>FOUNDATION INC.<br>525 FALCONER ST<br>JAMESTOWN, NY 14701           | NONE  | PUB CHAR                       | BUILDING FEASIBILITY<br>STUDY   | 57,000.           |
| JAMESTOWN RENAISSANCE CORP<br>19 W. THIRD ST<br>JAMESTOWN, NY 14701                                | NONE  | PUB CHAR                       | OPERATING SUPPORT   | 348,000.          |
| NATIONAL COMEDY CENTER INC<br>203 W. 2ND<br>JAMESTOWN, NY 14701                                    | NONE  | PUB CHAR                       | OPERATING SUPPORT,<br>DEBT SERVICE, STAFFING  | 641,025.          |
| NY FUNDERS ALLIANCE<br>431 E. FAYETTE ST<br>SYRACUSE, NY 13202                                     | NONE  | PUB CHAR                       | ANNUAL GRANT  | 3,226.            |
| REG LENNA CENTER FOR THE ARTS<br>116 EAST THIRD ST<br>JAMESTOWN, NY 14701                          | NONE  | PUB CHAR                       | ROOFING   | 38,979.           |
| THE RESOURCE CENTER<br>200 DUNHAM AVE<br>JAMESTOWN, NY 14701                                       | NONE  | PUB CHAR                       | POP UP SHOP   | 50,000.           |
| UNITED WAY OF SOUTHERN CHAUTAUQUA<br>COUNTY<br>413 N. MAIN ST<br>JAMESTOWN, NY 14701               | NONE  | PUB CHAR                       | CAMPAIGN SUPPORT AND<br>LEADERSHIP CIRCLE   | 101,000.          |
| <b>Total from continuation sheets</b>  |   |                                |   | <b>3,167,132.</b> |

**Part XIV** Supplementary Information

**3 Grants and Contributions Approved for Future Payment (Continuation)**

| Recipient<br>Name and address (home or business)   | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution                    | Amount            |
|--|---|--------------------------------|---|-------------------|
| DREAM IT DO IT WESTERN NEW YORK INC.<br>300 N. MAIN ST.<br>JAMESTOWN, NY 14701                 | NONE  | PUB CHAR                       | URBAN DESIGN AND COMMUNITY EVENTS                   | 101,465.          |
| GLENWOOD CEMETERY FOUNDATION INC.<br>325 GLENWOOD AVE<br>LOCKPORT, NY 14094-1730               | NONE  | PUB CHAR                       | MAINTENANCE   | 2,000.            |
| JAMESTOWN CENTER CITY DEVELOPMENT CORP<br>111 WEST SECOND ST,SUITE 1100<br>JAMESTOWN, NY 14701 | NONE  | PUB CHAR                       | OPERATING AND DEBT SUPPORT; THE ZONE START UP COSTS | 1,442,633.        |
| JAMESTOWN RENAISSANCE CORP<br>19 W. THIRD ST.<br>JAMESTOWN, NY 14701                           | NONE  | PUB CHAR                       | 2022 OPERATING SUPPORT                              | 360,000.          |
| NY FUNDERS ALLIANCE<br>431 E. FAYETTE ST<br>SYRACUSE, NY 13202                                 | NONE  | PUB CHAR                       | ANNUAL GRANT  | 3,290.            |
| THE RESOURCE CENTER<br>200 DUNHAM AVE<br>JAMESTOWN, NY 14701                                   | NONE  | PUB CHAR                       | POP UP SHOP   | 102,000.          |
| UNITED WAY OF SOUTHERN CHAUTAUQUA COUNTY<br>413 N. MAIN ST<br>JAMESTOWN, NY 14701              | NONE  | PUB CHAR                       | LEADERSHIP CIRCLE                                   | 1,000.            |
|  |   |                                |   |                   |
|  |   |                                |   |                   |
|  |   |                                |   |                   |
| <b>Total from continuation sheets</b>  |   |                                |   | <b>2,012,388.</b> |



**Part XIV** Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - CHAUTAUQUA REGION COMMUNITY FOUNDATION

COMMUNITY SERVICE GRANTS AND NEY/STINEMAN SCHOLARSHIP FUND/BROADBAND

FEASIBILITY

**2021 DEPRECIATION AND AMORTIZATION REPORT**

COMMERCIAL RENTAL - THIRD AND MAIN, JA

RENT 1

| Asset No.             | Description                             | Date Acquired | Method | Life  | Conv | Line No. | Unadjusted Cost Or Basis | Bus % Excl | Section 179 Expense | * Reduction In Basis | Basis For Depreciation | Beginning Accumulated Depreciation | Current Sec 179 Expense | Current Year Deduction | Ending Accumulated Depreciation |
|-----------------------|---|---------------|--------|-------|------|----------|--------------------------|------------|---------------------|----------------------|------------------------|------------------------------------|-------------------------|------------------------|---------------------------------|
| 11                    | BUILDING - 300 N. MAIN ST, JAMESTOWN NY | 10/01/21      | SL     | 40.00 |      | 16       | 141,193.                 |            |                     |                      | 141,193.               |                                    |                         | 882.                   | 882.                            |
| 12                    | LAND - 300 N. MAIN ST, JAMESTOWN, NY    | 10/01/21      | L      |       |      |          | 40,000.                  |            |                     |                      | 40,000.                |                                    |                         | 0.                     |                                 |
|                       | * 990-PF RENTAL TOTAL OTHER             |               |        |       |      |          | 181,193.                 |            |                     |                      | 181,193.               | 0.                                 |                         | 882.                   | 882.                            |
| CURRENT YEAR ACTIVITY |   |               |        |       |      |          |                          |            |                     |                      |                        |                                    |                         |                        |                                 |
|                       | BEGINNING BALANCE                       |               |        |       |      |          | 0.                       |            |                     | 0.                   | 0.                     | 0.                                 |                         |                        | 0.                              |
|                       | ACQUISITIONS                            |               |        |       |      |          | 181,193.                 |            |                     | 0.                   | 181,193.               | 0.                                 |                         |                        | 882.                            |
|                       | DISPOSITIONS/RETIRED                    |               |        |       |      |          | 0.                       |            |                     | 0.                   | 0.                     | 0.                                 |                         |                        | 0.                              |
|                       | ENDING BALANCE                          |               |        |       |      |          | 181,193.                 |            |                     | 0.                   | 181,193.               | 0.                                 |                         |                        | 882.                            |
|                       | ENDING ACCUM DEPR                       |               |        |       |      |          |                          |            |                     |                      |                        | 882.                               |                         |                        |                                 |
|                       | ENDING BOOK VALUE                       |               |        |       |      |          |                          |            |                     |                      |                        | 180,311.                           |                         |                        |                                 |



FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

| SOURCE                  | (A)<br>REVENUE<br>PER BOOKS | (B)<br>NET INVESTMENT<br>INCOME | (C)<br>ADJUSTED<br>NET INCOME |
|-------------------------|-----------------------------|---------------------------------|-------------------------------|
| LAKESHORE SAVINGS BANK  | 797.                        | 797.                            |                               |
| NORTHWEST BANK          | 107.                        | 107.                            |                               |
| TOTAL TO PART I, LINE 3 | 904.                        | 904.                            |                               |

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

| SOURCE   | GROSS<br>AMOUNT | CAPITAL<br>GAINS<br>DIVIDENDS | (A)<br>REVENUE<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME |
|--|-----------------|-------------------------------|-----------------------------|-----------------------------------|-------------------------------|
| HIRTLE CALLAGHAN &<br>CO                                 | 3,847,137.      | 3,260,030.                    | 587,107.                    | 590,093.                          |                               |
| JAMESTOWN CENTER<br>CITY DEVELOPMENT<br>CORP-DEMAND NOTE | 9,000.          | 0.                            | 9,000.                      | 0.                                |                               |
| WILMINGTON TRUST   | 1,673,923.      | 1,050,298.                    | 623,625.                    | 626,445.                          |                               |
| TO PART I, LINE 4  | 5,530,060.      | 4,310,328.                    | 1,219,732.                  | 1,216,538.                        |                               |

FORM 990-PF RENTAL INCOME STATEMENT 3

| KIND AND LOCATION OF PROPERTY                    | ACTIVITY<br>NUMBER | GROSS<br>RENTAL INCOME |
|--|--------------------|------------------------|
| COMMERCIAL RENTAL - THIRD AND MAIN, JAMESTOWN NY | 1                  | 2,400.                 |
| TOTAL TO FORM 990-PF, PART I, LINE 5A            |                    | 2,400.                 |

| FORM 990-PF                                       | RENTAL EXPENSES | STATEMENT | 4        |
|---|-----------------|-----------|----------|
| DESCRIPTION                                       | ACTIVITY NUMBER | AMOUNT    | TOTAL    |
| DEPRECIATION                                      |                 | 882.      |          |
| REPAIRS   |                 | 11,671.   |          |
| CLEANING AND MAINTENNCE                           |                 | 7,962.    |          |
| REAL ESTATE TAXES                                 |                 | 5,118.    |          |
| ALARM INSTALLATION AND SERVICES                   |                 | 4,914.    |          |
| PRINTING AND RENDERINGS                           |                 | 3,902.    |          |
| INSURANCE   |                 | 1,364.    |          |
| MISCELLANEOUS                                     |                 | 16.       |          |
| - SUBTOTAL -                                      | 1               |           | 35,829.  |
| TOTAL RENTAL EXPENSES                             |                 |           | 35,829.  |
| NET RENTAL INCOME TO FORM 990-PF, PART I, LINE 5B |                 |           | -33,429. |

| FORM 990-PF                                     | OTHER INCOME                | STATEMENT                         | 5                             |
|---|-----------------------------|-----------------------------------|-------------------------------|
| DESCRIPTION                                     | (A)<br>REVENUE<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME |
| HIRTLE CALLAGHAN PRIVATE EQUITY<br>FUND V LP    | 146.                        | 146.                              |                               |
| HIRTLE CALLAGHAN PRIVATE EQUITY<br>FUND VI LP   | 18,338.                     | 18,338.                           |                               |
| HIRTLE CALLAGHAN PRIVATE EQUITY<br>FUND VII LP  | 151,151.                    | 151,151.                          |                               |
| HIRTLE CALLAGHAN PRIVATE EQUITY<br>FUND VIII LP | 54,604.                     | 54,604.                           |                               |
| HIRTLE CALLAGHAN PRIVATE EQUITY<br>FUND X LP    | 118,130.                    | 118,130.                          |                               |
| HIRTLE CALLAGHAN PRIVATE EQUITY<br>FUND X LP    | 60,388.                     | 60,388.                           |                               |
| K-1 HIRTLE CALLAGHAN SELECT EQUITY<br>FUND LP   | 0.                          | 297,814.                          |                               |
| TOTAL TO FORM 990-PF, PART I, LINE 11           | 402,757.                    | 700,571.                          |                               |

| FORM 990-PF                | LEGAL FEES                   |                                   |                               | STATEMENT 6                   |
|----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION                | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
| LEGAL                      | 3,530.                       | 0.                                |                               | 3,530.                        |
| TO FM 990-PF, PG 1, LN 16A | 3,530.                       | 0.                                |                               | 3,530.                        |

| FORM 990-PF                  | ACCOUNTING FEES              |                                   |                               | STATEMENT 7                   |
|------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION                  | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
| AUDIT AND TAX PREP           | 6,890.                       | 3,445.                            |                               | 3,445.                        |
| PAYROLL PROCESSING           | 1,132.                       | 281.                              |                               | 851.                          |
| TO FORM 990-PF, PG 1, LN 16B | 8,022.                       | 3,726.                            |                               | 4,296.                        |

| FORM 990-PF                                 | OTHER PROFESSIONAL FEES      |                                   |                               | STATEMENT 8                   |
|---|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION                                 | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
| INVESTMENT MANAGEMENT AND<br>CUSTODIAL FEES | 324,687.                     | 324,687.                          |                               | 0.                            |
| CONTRACTUAL SERVICES                        | 6,928.                       | 0.                                |                               | 6,928.                        |
| TO FORM 990-PF, PG 1, LN 16C                | 331,615.                     | 324,687.                          |                               | 6,928.                        |

| FORM 990-PF                 | TAXES                        |                                   |                               | STATEMENT 9                   |
|-----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION                 | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
| PAYROLL TAXES               | 21,434.                      | 5,359.                            |                               | 16,075.                       |
| FEDERAL EXCISE TAX          | 121,484.                     | 0.                                |                               | 0.                            |
| TO FORM 990-PF, PG 1, LN 18 | 142,918.                     | 5,359.                            |                               | 16,075.                       |

| FORM 990-PF                              | OTHER EXPENSES               |                                   |                               | STATEMENT 10                  |
|--|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION                              | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
| OFFICE SUPPLIES AND<br>MAINTENANCE       | 10,746.                      | 1,075.                            |                               | 9,671.                        |
| INSURANCE                                | 5,882.                       | 1,471.                            |                               | 4,411.                        |
| TELEPHONE                                | 4,419.                       | 442.                              |                               | 3,977.                        |
| MEMBERSHIPS AND<br>SUBSCRIPTIONS         | 7,465.                       | 1,866.                            |                               | 5,599.                        |
| ECONOMIC DEVELOPMENT<br>PROPERTY EXPENSE | 12,317.                      | 0.                                |                               | 12,317.                       |
| NYS FILING FEE                           | 1,500.                       | 750.                              |                               | 750.                          |
| MISCELLANEOUS                            | 2,000.                       | 0.                                |                               | 2,000.                        |
| WEB SITE                                 | 150.                         | 0.                                |                               | 150.                          |
| EDUCATION AND TRAINING                   | 1,799.                       | 0.                                |                               | 1,799.                        |
| BOND RATING FEES                         | 2,000.                       | 0.                                |                               | 2,000.                        |
| OCCUPANCY - RENTAL PROPERTY              | 34,947.                      | 34,947.                           |                               | 0.                            |
| TO FORM 990-PF, PG 1, LN 23              | 83,225.                      | 40,551.                           |                               | 42,674.                       |

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**FORM 990-PF**                      **OTHER NOTES AND LOANS REPORTED SEPARATELY**                      **STATEMENT 11**


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| <u>BORROWER'S NAME</u>                    | <u>TERMS OF REPAYMENT</u> | <u>INTEREST RATE</u> |
|---|---------------------------|----------------------|
| JAMESTOWN CENTER CITY DEVELOPMENT<br>CORP | ON DEMAND                 | 3.0000%              |

| <u>DATE OF NOTE</u> | <u>MATURITY DATE</u> | <u>ORIGINAL LOAN AMOUNT</u> | <u>DESCRIPTION OF CONSIDERATION</u> | <u>FMV OF CONSIDERATION</u> |
|---------------------|----------------------|-----------------------------|-------------------------------------|-----------------------------|
| 10/01/02            |                      | 800,000.                    | CASH                                | 800,000.                    |

| <u>SECURITY PROVIDED BY BORROWER</u> | <u>PURPOSE OF LOAN</u> |
|--------------------------------------|------------------------|
| NONE                                 | CONSTRUCTION           |

| <u>RELATIONSHIP OF BORROWER</u> | <u>BALANCE DUE</u> | <u>DOUBTFUL ACCT ALLOWANCE</u> | <u>FMV OF LOAN</u> |
|---------------------------------|--------------------|--------------------------------|--------------------|
| NONE                            | 300,000.           | 0.                             | 300,000.           |

|                                       |          |    |          |
|---------------------------------------|----------|----|----------|
| TOTAL TO FORM 990-PF, PART II, LINE 7 | 300,000. | 0. | 300,000. |
|---------------------------------------|----------|----|----------|

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**FORM 990-PF**                      **DEPRECIATION OF ASSETS HELD FOR INVESTMENT**                      **STATEMENT 12**


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| <u>DESCRIPTION</u>                          | <u>COST OR OTHER BASIS</u> | <u>ACCUMULATED DEPRECIATION</u> | <u>BOOK VALUE</u> |
|---|----------------------------|---------------------------------|-------------------|
| LAND 330 W. THIRD ST.,<br>JAMESTOWN, NY     | 358,916.                   | 0.                              | 358,916.          |
| LAND 318-324 W. THIRD ST.,<br>JAMESTOWN, NY | 286,629.                   | 0.                              | 286,629.          |
| LAND 110 W. SECOND ST.,<br>JAMESTOWN, NY    | 80,441.                    | 0.                              | 80,441.           |
| LAND 9 W. MAIN ST., JAMESTOWN,<br>NY        | 87,567.                    | 0.                              | 87,567.           |
| BUILDING - 300 N. MAIN ST,<br>JAMESTOWN NY  | 141,193.                   | 882.                            | 140,311.          |
| LAND - 300 N. MAIN ST,<br>JAMESTOWN, NY     | 40,000.                    | 0.                              | 40,000.           |
| TOTAL TO FM 990-PF, PART II, LN 11          | 994,746.                   | 882.                            | 993,864.          |

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| FORM 990-PF                            | OTHER INVESTMENTS | STATEMENT   | 13                |
|--|-------------------|-------------|-------------------|
| DESCRIPTION                            | VALUATION METHOD  | BOOK VALUE  | FAIR MARKET VALUE |
| FIXED INCOME SECURITIES                | FMV               | 22,785,033. | 22,785,033.       |
| EQUITY SECURITIES                      | FMV               | 44,726,169. | 44,726,169.       |
| MONEY MARKET-HELD FOR INVESTMENT       | FMV               | 891,648.    | 891,648.          |
| ALTERNATIVE INVESTMENTS                | FMV               | 16,258,096. | 16,258,096.       |
| TOTAL TO FORM 990-PF, PART II, LINE 13 |                   | 84,660,946. | 84,660,946.       |

| FORM 990-PF                      | OTHER ASSETS               | STATEMENT              | 14                |
|----------------------------------|----------------------------|------------------------|-------------------|
| DESCRIPTION                      | BEGINNING OF YR BOOK VALUE | END OF YEAR BOOK VALUE | FAIR MARKET VALUE |
| INTEREST RECEIVABLE              | 44,687.                    | 47,881.                | 47,881.           |
| REFUNDABLE DEPOSITS              | 350.                       | 350.                   | 350.              |
| TO FORM 990-PF, PART II, LINE 15 | 45,037.                    | 48,231.                | 48,231.           |

| FORM 990-PF                            | OTHER LIABILITIES | STATEMENT  | 15 |
|--|-------------------|------------|----|
| DESCRIPTION                            | BOY AMOUNT        | EOY AMOUNT |    |
| PAYROLL LIABILITIES                    | 329.              | 709.       |    |
| ACCRUED FEDERAL EXCISE TAX             | 37,058.           | 33,542.    |    |
| TOTAL TO FORM 990-PF, PART II, LINE 22 | 37,387.           | 34,251.    |    |

FORM 990-PF

PART VII - LIST OF OFFICERS, DIRECTORS  
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 16

| NAME AND ADDRESS  | TITLE AND<br>AVRG HRS/WK | COMPEN-<br>SATION | EMPLOYEE<br>BEN PLAN<br>CONTRIB | EXPENSE<br>ACCOUNT |
|---|--------------------------|-------------------|---------------------------------|--------------------|
| NANCY GLEASON<br>215 CHERRY STREET<br>JAMESTOWN, NY 14701     | PRESIDENT<br>5.00        | 0.                | 0.                              | 0.                 |
| DEREK WATKINS<br>215 CHERRY STREET<br>JAMESTOWN, NY 14701     | VICE-PRESIDENT<br>5.00   | 0.                | 0.                              | 0.                 |
| JACQUELINE PHELPS<br>215 CHERRY STREET<br>JAMESTOWN, NY 14701 | TREASURER<br>5.00        | 0.                | 0.                              | 0.                 |
| SIMONE SELLSTROM<br>215 CHERRY STREET<br>JAMESTOWN, NY 14701  | SECRETARY<br>5.00        | 0.                | 0.                              | 0.                 |
| RODNEY DRAKE<br>215 CHERRY STREET<br>JAMESTOWN, NY 14701      | DIRECTOR<br>5.00         | 0.                | 0.                              | 0.                 |
| DR. LYNN DUNHAM<br>215 CHERRY STREET<br>JAMESTOWN, NY 14701   | DIRECTOR<br>5.00         | 0.                | 0.                              | 0.                 |
| THOMAS HOLT<br>215 CHERRY STREET<br>JAMESTOWN, NY 14701       | DIRECTOR<br>5.00         | 0.                | 0.                              | 0.                 |
| JEROME LEE YAW<br>215 CHERRY STREET<br>JAMESTOWN, NY 14701    | DIRECTOR<br>5.00         | 0.                | 0.                              | 0.                 |
| TOTALS INCLUDED ON 990-PF, PAGE 6, PART VII                   |                          | 0.                | 0.                              | 0.                 |