

# Board of Directors Meeting Finance Committee Meeting Audit Committee Meeting AGENDA

July 24, 2024, at 8:30 am.

111 Washington Ave, Suite 100, Albany, NY 12210

Conference Room

1. Welcome Alan Goldberg, Chair a. New Board Members i. Laura Zeliger ii. Mike Cassidy 2. Roll Call for Record Alan Goldberg, Chair 3. Meeting Minutes of May 22, 2024 Alan Goldberg, Chair 4. Committee Reports: a. Finance Committee Alan Alexander, Chair i. Review of June 2024 Narrative and Financials b. Audit Committee Rich Rosen, Chair i. 2023 IRS Form 990 (review/approval to file) 5. CFO Report Amy Thompson, CFO 6. CEO Report Kevin O'Connor, CEO a. Al Tech Steel Site Consultant Report b. AACA New Staff i. Clayton Besch ii. Dylan Turek 7. Other Business Kevin O'Connor, CEO a. (action) Joint Service Agreement (Resolution)

8. Executive Session Alan Goldberg, Chair

b. (action) AACA Cultural and Arts Grant Program (Resolution)

9. Adjournment Alan Goldberg, Chair



## Board of Directors Meeting Roll Call

July 24, 2024, at 8:30 am.

111 Washington Ave, Suite 100, Albany, NY 12210

Conference Room

Board Member	Present/Excused / Absent
Alan Goldberg, Chairman	
Rich Rosen, Vice- Chairman	
Alan Alexander, Treasurer	
Laura Zeliger, Member	
Mike Cassidy, Member	
Michael Cinquanti, Member	
Helen Brooks, Member	
Caitlin O'Brien, Ex-Officio J. Cunningham	
Michael McLaughlin, Ex-Officio, D. McCoy	

### ADVANCE ALBANY COUNTY ALLIANCE LOCAL DEVELOPMENT CORPORATION BOARD OF DIRECTORS

# FINANCE COMMITTEE GOVERNANCE COMMITTEE 5/22/2024 MEETING MINUTES

A Meeting of the Advance Albany County Alliance Local Development Corporation Board, Finance Committee and Governance Committee was held on <u>Wednesday May 22, 2024</u>, at 8:30am at 111 Washington Ave, Albany, NY. Members of the public were able to attend the meetings by attending in person.

The following Directors/Committee Members were present at, and participated in, the meetings:

- Alan Goldberg, Board Chairperson/Committee Member
- Rich Rosen, Board/Committee Member
- Alan D. Alexander, Board Treasurer/Committee Member
- Michael Cinquanti, Committee Member
- Marcia White, Board Secretary/Committee Member

#### Directors/Committee Members excused:

- Tom Nardacci, Board/Committee Member
- Helen Brooks, Board/ Committee Member

### Alliance Staff Present:

- Kevin O'Connor, Director of Economic Development, Albany County and CEO, AACA
- Amy Thompson, CFO, AACA
- Kevin Catalano, Senior Vice-President & Director of Commercial Lending
- Antionette Hedge, Executive Assistant to CEO

### Also present at the meeting:

- Thomas Owens, Esq.
- Lucas Rogers, Economic Development & Sustainability Coordinator, Albany County
- Caitlin O'Brien, Chief of Staff, Albany County Legislature
- Michael McLaughlin, Albany County Deputy County Executive

### The Directors called the meeting to order at 8:33 am.

- 1. The first order of business, Mr. Goldberg made a roll call and confirmed there was quorum.
- 2. Next order of business was the <u>Approval of Minutes</u> from March 27, 2024. After discussion upon a motion made by Mr. Rosen to approve the January 24th Meeting Minutes, seconded by Mr. Cinquanti, the Minutes were approved pursuant to a unanimous vote.
- 3. Next order of business was a meeting of the <u>Governance Committee</u>. The Chairperson of the Committee, Ms. White, discussed the completion of the annual Board Evaluation.
- 4. The next order of business was a meeting of the <u>Finance Committee</u> and the <u>CFO Report</u>. Ms. Thompson provided an update April Narrative and Financials. She confirmed the ARPA Operating Funds.
- 5. The next order of business was the <u>CEO Report.</u> Mr. O'Connor gave an update on the Al Tech Shovel Ready Site Development Program. He presented Resolution 2024-05-01, which outlines the guidelines for the ACBDC Shovel Ready Site Development Program and authorizes the Corporation to administer such program. After discussion upon a motion made by Ms. White to

# ADVANCE ALBANY COUNTY ALLIANCE LOCAL DEVELOPMENT CORPORATION BOARD OF DIRECTORS FINANCE COMMITTEE

### GOVERNANCE COMMITTEE 5/22/2024 MEETING MINUTES

approve Resolution 2024-05-01, seconded by Mr. Rosen, the Resolution was approved pursuant to a unanimous vote.

- 6. The next order of business was <u>Other Business</u>. Mr. O'Connor gave updates to the Al Tech Site agreement with DEC, 106 S. Pearl and the recent wind power conference in New Orleans. Mr. Rogers gave an update from NYSERDA on the bids for Port of Albany and Port of Coeymans.
- 7. The next order of business was <u>Open Discussion</u>. Mr. Goldberg discussed the creation of the Culture & Arts Committee. This will be an internal committee to help make decisions. He provided a list of potential candidates. After further discussion upon a motion made by Ms. White to create a Culture & Arts Committee, seconded by Mr. Cinquanti, the motion was approved pursuant to unanimous vote. Membership will be determined in the near future.
- 8. The next order of business was the Executive Session. No Executive Session was held.
- 9. The meeting was adjourned with unanimous consent of all Board members.

Alan Goldberg, Board President

Board Minutes as Approved by Board on July 24, 2024.

### ADVANCE ALBANY COUNTY ALLIANCE Financial Statement Narrative For the Period Ending June 30, 2024

This narrative provides an overview and analysis of the financial performance of the Advance Albany County Alliance for the YTD June 2024, in its mission to drive economic growth and vitality in the county.

In 2024 the Alliance will continue to execute a robust set of economic development initiatives aimed at attracting businesses, creating job opportunities, and fostering innovation. Projects for 2024 include the former Al Tech Steel site, the former grocery store at 106 S. Pearl, as well as the former Ann Lee Nursing Home and Heritage Park sites. Collaborative efforts with local governments, businesses, and community organizations will be pivotal in achieving these goals.

The Alliance will oversee the Albany County Pine Hills Land Authority to transition the future use of the properties of the College of Saint Rose in a way to promote and stimulate economic development in the county of Albany and city of Albany.

Total revenue for the YTD June is \$5,249,585, with income derived from a combination of reimbursement from ACBDC, operating funds from Albany County, rental income, the IDA/CRC management fees and STAGE Grant funds which are restricted for grant disbursements. The revenue received is considerably greater than what was budgeted as we received an additional \$300,000 from Albany County and we budgeted \$2M for STAGE funds which was split amongst the four quarters in 2024.

Our current cash position is strong at \$5,261,063. We can expect to receive \$200k of ARPA operating funds during the 3rd quarter. In May we moved \$3.5m into a 3 month CD at Key Bank to earn more interest at a higher rate.

Expenses YTD June were \$542,409 with our biggest expense being payroll. We were favorable to budget by \$240,511 due to new budgeted staff positions just being filled in the second quarter as well as being under budget in other business expenses by keeping our costs relatively low for the year.

Our change in net position was \$4,690,068 compared to a budget of \$144,384 mainly due to receiving the \$4M in STAGE funds and additional operating funds from Albany County.

In 2024 the Alliance will also manage a \$1,000,000 fund for Arts and Culture in Albany County which will be reported separately for tracking purposes on the P&L. The purpose of this fund is to support local cultural organizations, promote cultural diversity and inclusion, and enhance arts engagement while leveraging donations from private donors and assist in the recovery from the impact of the pandemic.

The Alliance received \$4m in March (for 2023) and is set to receive \$6m (for 2024) from the Sustainable Technology and Green Energy (STAGE) Grant Program which will be disbursed as applications are approved from Albany County businesses to assist in supporting the retention, expansion, and attraction of clean energy industries. Plug Power has been approved for a \$3m grant for electrical infrastructure upgrade for power delivery and TCI of NY has been approved for \$150,000 grant to assist in their investment in a new oil recycling facility.

The Alliance remains committed to financial transparency and accountability. Rigorous financial controls and reporting mechanisms were in place to ensure the effective and responsible use of funds, in alignment with the organization's mission and objectives.

While there are currently no identifiable significant risks or uncertainties that would impact the Alliance's future financial performance it is **critical** that the Alliance secure a future recurring stream of revenue to ensure there is sufficient funding to enable the Alliance to accomplish the goals set forth by the organization as projects may span multiple years.

The Alliance is slated to receive ½% of the Albany County Hotel Occupancy Tax beginning in early 2025.

### ADVANCE ALBANY COUNTY ALLIANCE Financial Statement Narrative For the Period Ending June 30, 2024

### **Profit & Loss**

### Operating Revenue -

The ACBDC reimbursement as of June 30, 2024 is \$186,243 while the Shovel Ready Site Development Fund reimbursement is \$16.472.

Management Fees collected from the Albany County CRC and IDA are \$66,666 and \$133,333 respectively.

Interest income is \$23,167.

Albany County Operating funds income is \$800,000.

Rental Income YTD June is \$23,703.

STAGE Grant Income is \$4,000,000.

### Operating Expenses-

Legal fees of \$58,105 include payments to Tom Owens, Young Sommer and Nolan Heller Kauffman.

Professional fees of \$55,940 include Bonadio & Co, GDP Geospatial (reimbursable through ACBDC-Shovel Ready Site Development Fund), PS Property Solutions, Commercial Investigations and Fusco Personnel.

Computer software fees of \$8,678 and computer internet expenses in the amount of \$10,406 include payments to Dropbox, QuickBooks, ITS and Spectrum.

Dues and subscriptions expenses for \$7,699 include membership dues payments to NYSEDC, CIREB, BOMA and CEG, WSJ and Times Union.

Marketing expense of \$8,692 include payments to Modern Press and Baker PR for the production of the annual report.

Rent expense of \$47,407 includes six months of rent payments to 111 Washington Ave. This expense is offset by the \$23,703 received from the Albany County Land Bank for their portion of the rent.

Payroll and benefits expense of \$280,393 are comprised of salaries and benefits for six employees.

### ADVANCE ALBANY COUNTY ALLIANCE Financial Statement Narrative For the Period Ending June 30, 2024

### Balance Sheet Assets –

Cash balance as of June 30, 2024 is \$5,261,063.

Accrued revenue of \$109,516 includes reimbursement from the ACBDC for \$100,976 for operating expenses and the shovel ready site development reimbursement for \$8,540.

Prepaid expenses/insurance of \$33,107 include prepayments for health insurance, general liability and D&O insurance as well as dues and computer software.

### Liabilities -

Accounts payable in the amount of \$13,536 include payments to be made in July to Bonadio, Tom Owens.

Accrued payroll and benefits for \$2,060 is payroll paid in July for days worked in June.

### Advance Albany County Alliance LDC Statement of Net Position

As of June 30, 2024

	Total
ASSETS	
Current Assets	
Bank Accounts	
Key Bank 3 Month CD	3,500,000.00
Key Business Reward Checking (2027)	237,952.03
Key Sweep Account	1,522,611.23
Petty Cash	500.00
Total Bank Accounts	\$ 5,261,063.26
Accounts Receivable	
Accounts Receivable	3,283.34
Total Accounts Receivable	\$ 3,283.34
Other Current Assets	
Accrued Revenue CRC Mgmt Fee	11,111.11
Accrued Revenue - Shovel Ready Site Reimb	8,540.00
Accrued Revenue ACBDC Reimb	100,976.22
Prepaid Expenses	23,133.05
Prepaid Insurance	9,974.21
Total Other Current Assets	\$ 153,734.59
Total Current Assets	\$ 5,418,081.19
Fixed Assets	
Accumulated Depreciation	-62,059.33
Capital Improvements	25,432.75
Computer Equipment	54,094.62
Furniture	47,077.78
ROU Asset	320,064.00
Website	48,000.00
Total Fixed Assets	432,609.82
TOTAL ASSETS	\$ 5,850,691.01
LIABILITIES AND EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	40 500 40
Accounts Payable (A/P)	 13,536.10
Total Accounts Payable	\$ 13,536.10
Credit Cards	
Key Bank Mastercard	 4,258.80
Total Credit Cards	\$ 4,258.80
Other Current Liabilities	
Accrued Expenses	1,200.00
Accrued Payroll	1,918.58
Accrued Payroll Tax	141.29
Panafita Payabla	621.59
Benefits Payable	
Lease liability ST portion	 94,814.00
Lease liability ST portion  Total Other Current Liabilities	\$ 94,814.00 98,695.46
Lease liability ST portion Total Other Current Liabilities Long-Term Liabilities	\$ 
Lease liability ST portion Total Other Current Liabilities Long-Term Liabilities Lease liability LT portion	\$ 
Lease liability ST portion Total Other Current Liabilities Long-Term Liabilities Lease liability LT portion Total Long-Term Liabilities	\$ 98,695.46
Lease liability ST portion Total Other Current Liabilities Long-Term Liabilities Lease liability LT portion Total Long-Term Liabilities Total Liabilities	 <b>98,695.46</b> 225,250.00
Lease liability ST portion Total Other Current Liabilities Long-Term Liabilities Lease liability LT portion Total Long-Term Liabilities Total Liabilities Net Position	\$ 98,695.46 225,250.00 225,250.00
Lease liability ST portion Total Other Current Liabilities Long-Term Liabilities Lease liability LT portion Total Long-Term Liabilities Total Liabilities Net Position Equity	\$ 98,695.46 225,250.00 225,250.00 341,740.36
Lease liability ST portion Total Other Current Liabilities Long-Term Liabilities Lease liability LT portion Total Long-Term Liabilities Total Liabilities Net Position	\$ 98,695.46 225,250.00 225,250.00
Lease liability ST portion Total Other Current Liabilities Long-Term Liabilities Lease liability LT portion Total Long-Term Liabilities Total Liabilities Net Position Equity General Fund Net Income	\$ 98,695.46 225,250.00 225,250.00 341,740.36
Lease liability ST portion Total Other Current Liabilities Long-Term Liabilities Lease liability LT portion Total Long-Term Liabilities Total Liabilities Net Position Equity General Fund	\$ 98,695.46 225,250.00 225,250.00 341,740.36 818,883.01

### Advance Albany County Alliance Profit and Loss

YTD June 2024

		Jan-24	-	Feb-24	ı	Mar-24		Apr-24		May-24		Jun-24		Total
Operating Revenue														
ACBDC Reimbursement		25,929.36		25,829.81		33,507.57		43,239.22		28,725.97		29,011.03		186,242.96
CRC Management Fee		11,111.11		11,111.11		11,111.11		11,111.11		11,111.11		11,111.11		66,666.66
IDA Management Fee		22,222.22		22,222.22		22,222.22		22,222.22		22,222.22		22,222.22		133,333.32
Interest Income		883.10		711.51		4,016.81		8,401.66		6,060.82		3,093.30		23,167.20
Received From Albany County		0.00		0.00		800,000.00								800,000.00
Rental Income		3,950.56		3,950.56		3,950.56		3,950.56		3,950.56		3,950.56		23,703.36
Shovel Ready Site Reimbursement		2,990.00		2,896.68		2,045.00		1,275.00		5,340.00		1,925.00		16,471.68
STAGE Grant Income		0.00		0.00	4	,000,000.00							4	,000,000.00
Total Operating Revenue	\$	67,086.35	\$	66,721.89	\$4	,876,853.27	\$	90,199.77	\$	77,410.68	\$	71,313.22	\$ 5	5,249,585.18
Operating Expenses														
Legal & Professional Services														
Legal Fees		9,310.00		7,461.68		22,577.89		(7,196.07)		17,812.49		8,137.75		58,103.74
Professional Fees		1,544.30		0.00		11,078.74		26,013.54		10,403.17		6,900.00		55,939.75
Total Legal & Professional Services	\$	10,854.30	\$	7,461.68	\$	33,656.63	\$	18,817.47	\$	28,215.66	\$	15,037.75	\$	114,043.49
Other Business Expenses														
Bank Charges & Fees		6.00		754.50		9.00		7.50		9.00		0.00		786.00
Charitable Contributions		0.00		1,000.00		0.00		0.00		0.00		0.00		1,000.00
Computer Software		537.02		1,376.71		2,620.35		1,376.71		1,376.71		1,390.62		8,678.12
Computer/Internet		1,692.94		1,109.26		1,100.00		2,917.01		1,708.62		1,878.49		10,406.32
Dues & Subscriptions		2,034.62		909.62		909.62		293.91		2,617.26		933.92		7,698.95
Insurance		883.51		822.25		822.25		822.25		822.25		822.25		4,994.76
Marketing		0.00		0.00		0.00		6,919.95		1,503.76		268.67		8,692.38
Meals & Entertainment		276.41		0.00		102.11		229.16		842.09		247.06		1,696.83
Meeting Expense		368.80		288.44		39.26		677.62		0.00		225.88		1,600.00
Office Supplies		275.88		684.95		151.39		762.00		640.61		1,218.05		3,732.88
Parking		665.00		874.96		1,875.00		590.00		600.00		400.00		5,004.96
Payroll Fee		766.34		397.14		1,089.31		659.90		662.30		662.30		4,237.29
Postage		19.43		44.43		19.43		449.78		19.43		19.43		571.93
Professional Development		4,173.00		4,785.00		-3,161.48		1,692.20		710.00		2,335.00		10,533.72
Rent		7,901.13		7,901.13		7,901.13		7,901.13		7,901.13		7,901.13		47,406.78
Repairs & Maintenance		0.00		0.00		0.00		0.00		0.00		1,285.00		1,285.00
Sponsorship		0.00		8,000.00		2,500.00		0.00		7,000.00		1,250.00		18,750.00
Telephone		42.56		0.00		0.00		0.00		0.00		0.00		42.56
Travel Expenses		676.06		3,661.10		145.99		202.13		3,117.02		987.82		8,790.12
Utilities		344.00		344.00		344.00		344.00		344.00		344.00		2,064.00
Total Other Business Expenses	\$	20,662.70	\$	32,953.49	\$	16,467.36	\$	25,845.25	\$	29,874.18	\$	22,169.62	\$	147,972.60
Payroll Expenses														
Employee Benefits														
401k ER Match		1,436.40		1,548.94		1,489.40		1,489.40		2,257.77		1,386.40		9,608.31
Health Insurance		5,042.94		5,042.94		5,042.94		5,042.94		4,379.86		4,437.59		28,989.21
Payroll Tax - FICA		2,951.93		2,780.02		2,729.26		2,859.22		2,833.90		2,905.28		17,059.61
Payroll Tax - FUTA		472.50		45.81		0.00		0.00		25.17		60.32		603.80
Payroll Tax - SUTA		833.61		556.93		1,106.53		16.73		142.68		501.55		3,158.03
Workers Comp		70.58		73.94		130.49		252.40		147.61		127.79		802.81
Total Employee Benefits	\$	10,807.96	\$	10,048.58	\$	10,498.62	\$	9,660.69	\$	9,786.99	\$	9,418.93		60,221.77
Salaries		38,285.93		35,837.79		35,173.85		36,948.04		36,598.91		37,326.68		220,171.20
Total Payroll Expenses	\$	49,093.89	\$	45,886.37	\$	45,672.47	\$	46,608.73	\$	46,385.90	\$	46,745.61		280,392.97
Total Operating Expenses	\$	80,610.89	\$	86,301.54	\$	95,796.46	\$	91,271.45	\$	104,475.74	\$	83,952.98	\$	542,409.06
Net Operating Income	-\$	13,524.54	-\$	19,579.65	\$4	,781,056.81	-\$	1,071.68	-\$	27,065.06	-\$	12,639.76	4	,707,176.12
Other Expenses														
Depreciation Expense		2,773.54		2,773.54		2,773.54		2,773.54		3,007.16		3,007.16		17,108.48
Total Other Expenses	\$	2,773.54	\$	2,773.54	\$	2,773.54	\$	2,773.54	\$	3,007.16	\$	3,007.16		17,108.48
Change in Net Position		(16,298.08)		(22,353.19)	4	,778,283.27		(3,845.22)		(30,072.22)		(15,646.92)	4	,690,067.64

# **Advance Albany County Alliance Profit and Loss Comparison**

YTD June 2024 vs YTD June 2023

				Total			
	Jan-	May 2024	Jan	-May 2023 (PY)	С	hange	% Change
Income							
ACBDC Reimbursement		186,242.96		158,129.46		28,113.50	17.78%
CRC Fee Income				1,953.64		-1,953.64	-100.00%
CRC Management Fee		66,666.66		0.00		66,666.66	100.00%
IDA Management Fee		133,333.32		0.00		133,333.32	100.00%
Interest Income		23,167.20		18.98		23,148.22	100.00%
Received From Albany County		800,000.00		500,000.00		300,000.00	100.00%
Rental Income		23,703.36		23,703.36		0.00	0.00%
Shovel Ready Site Reimbursement		16,471.68		0.00		16,471.68	
STAGE Grant Income	4,	,000,000.00		0.00	4,	,000,000.00	100.00%
Total Income	5,	249,585.18		683,805.44	4,	,565,779.74	100.00%
Gross Profit	\$ 5,	,249,585.18	\$	683,805.44	\$ 4,	,565,779.74	667.70%
Expenses							
Legal & Professional Services							
Legal Fees		58,103.74		21,307.50		36,796.24	172.69%
Professional Fees		55,939.75		55,692.75		247.00	0.44%
Total Legal & Professional Services	\$	114,043.49	\$	77,000.25	\$	37,043.24	48.11%
Other Business Expenses							
Bank Charges & Fees		786.00		75.00		711.00	948.00%
Cell Phone		0.00		125.64		-125.64	-100.00%
Charitable Contributions		1,000.00		0.00		1,000.00	100.00%
Computer Software		8,678.12		6,146.80		2,531.32	41.18%
Computer/Internet		10,406.32		13,567.06		-3,160.74	-23.30%
Dues & Subscriptions		7,698.95		6,857.59		841.36	12.27%
Filing Fees		0.00		875.00		-875.00	-100.00%
Insurance		4,994.76		4,159.71		835.05	20.07%
Marketing		8,692.38		15,045.85		-6,353.47	100.00%
Meals & Entertainment		1,696.83		121.84		1,574.99	100.00%
Meeting Expense		1,600.00		6,007.47		-4,407.47	-73.37%
Office Supplies		3,732.88		4,300.90		-568.02	-13.21%
Parking		5,004.96		4,281.58		723.38	16.90%
Payroll Fee		4,237.29		4,108.43		128.86	3.14%
Postage		571.93		164.38		407.55	247.93%
Professional Development		10,533.72		0.00		10,533.72	100.00%
Rent		47,406.78		47,406.78		0.00	0.00%
Repairs & Maintenance		1,285.00		1,354.77		-69.77	-5.15%
Sponsorship		18,750.00		21,205.00		-2,455.00	-11.58%

# **Advance Albany County Alliance Profit and Loss Comparison**

YTD June 2024 vs YTD June 2023

				Total			
	Ja	ın-May 2024	Jan-	May 2023 (PY)	(	Change	% Change
Telephone		42.56		42.24		0.32	100.00%
Travel Expenses		8,790.12		3,058.56		5,731.56	187.39%
Utilities		2,064.00		1,758.00		306.00	17.41%
Total Other Business Expenses	\$	147,972.60	\$	140,662.60	\$	7,310.00	5.20%
Payroll Expenses							
Employee Benefits							
401k ER Match		9,608.31		1,759.58		7,848.73	446.06%
Health Insurance		28,989.21		19,128.23		9,860.98	51.55%
Payroll Tax - FICA		17,059.61		13,099.26		3,960.35	30.23%
Payroll Tax - FUTA		603.80		270.17		333.63	123.49%
Payroll Tax - SUTA		3,158.03		1,333.61		1,824.42	136.80%
Workers Comp		802.81		391.71		411.10	104.95%
Total Employee Benefits	\$	60,221.77	\$	35,982.56	\$	24,239.21	67.36%
Salaries		220,171.20		165,966.96		54,204.24	32.66%
Total Payroll Expenses	\$	280,392.97	\$	201,949.52	\$	78,443.45	38.84%
Total Expenses	\$	542,409.06	\$	419,612.37	\$	122,796.69	29.26%
Net Operating Income	\$	4,707,176.12	\$	264,193.07	\$ 4	4,442,983.05	1681.72%
Other Expenses							
Depreciation Expense		17,108.48		11,549.29		5,559.19	48.13%
Total Other Expenses	\$	17,108.48	\$	11,549.29	\$	5,559.19	48.13%
Net Other Income	-5	17,108.48	-\$	11,549.29	-\$	5,559.19	-48.13%
Change in Net Position		4,690,067.64		252,643.78	\$ 4	4,437,423.86	1756.40%

### Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

A F	or the	2023 calendar year, or tax year beginning and er	nding		
<b>B</b> c	heck if pplicable	ADVANCE ALBANY COUNTY ALLIANCE LOCAL		D Employer identifie	cation number
	Addres	DEVELOPMENT CORPORATION			
	□Name □change □Initial			85-42223	
	return Final return/	111 WASHINGTON AVENUE	loom/suite	E Telephone number 518-852-	2209
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		<b>G</b> Gross receipts \$	1,109,856.
	Ameno	ALBANI, NI 12210		H(a) Is this a group re	
	Application pending			for subordinates	? Yes X No
		TILL WASHINGTON AVE, ALBANY, NY 12210		H(b) Are all subordinates in	
		empt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or	527	1 ′	list. See instructions
	Vebsit		T	H(c) Group exemptio	
K	orm of ort I	organization: X Corporation Trust Association Other	L Year	of formation: 2020  N	A State of legal domicile; NY
P		Summary	VENDE	DIIDDOGE EOI	NILLOII MILL
ø	1	Briefly describe the organization's mission or most significant activities: ${f THE}$ ${f E2}$ CORPORATION IS FORMED IS TO RELIEVE AND RE	XEMP.I.	TIMEMOLOWMEN	M TN
au	Ι .				
Activities & Governance	_				9
é		Number of independent voting members of the governing body (Part VI, line 1a)	·····		9
∞ ′°		Total number of individuals employed in calendar year 2023 (Part V, line 2a)			7
ţį		Total number of volunteers (estimate if necessary)			0
Ę		Total unrelated business revenue from Part VIII, column (C), line 12			0.
ĕ		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
				Prior Year	Current Year
•	8	Contributions and grants (Part VIII, line 1h)		525,000.	500,000.
ñ		Program service revenue (Part VIII, line 2g)		200,657.	555,737.
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	4,756.
ď		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		5,952.	49,363.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		731,609.	1,109,856.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		208,248.	451,056.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ď	b b		0.	255 255	440.040
ш	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		266,066.	448,240.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		474,314.	899,296.
	19	Revenue less expenses. Subtract line 18 from line 12		257,295.	210,560. End of Year
Net Assets or		Tabel accords (Dark V. Para 40)		1,041,855.	1,169,618.
SSE Bala	20	Total assets (Part X, line 16)		433,533.	350,736.
let /	21 22	Total liabilities (Part X, line 26)  Net assets or fund balances. Subtract line 21 from line 20		608,322.	818,882.
Pa	rt II	Signature Block		000,522.	010,0021
		Ities of perjury, I declare that I have examined this return, including accompanying schedules a	and stateme	ents, and to the best of my	knowledge and belief, it is
		t, and complete. Declaration of preparer (other than officer) is based on all information of whicl			into though and bone, it is
					_
Sigi	า	Signature of officer		Date	
Her		KEVIN O'CONNOR, CEO			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Paid		KEVIN TESTO KEVIN TESTO	0	05/21/24 self-employ	
Prep	arer	Firm's name BONADIO & CO., LLP		Firm's EIN 1	6-1131146
Use	Only	Firm's address 6 WEMBLEY CT			
		ALBANY, NY 12205		Phone no. (5	18) 464-4080
May	the IF	S discuss this return with the preparer shown above? See instructions			X Yes No

Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	THE EXEMPT PURPOSE FOR WHICH THE CORPORATION IS FORMED IS TO RELI	
	AND REDUCE UNEMPLOYMENT IN ALBANY COUNTY, PROMOTE AND PROVIDE FOR	.2
	ADDITIONAL AND MAXIMUM ADULT EMPLOYMENT IN THE COUNTY BETTER AND	
	MAINTAIN ADULT JOB OPPORTUNITIES IN THE COUNTY, CARRY ON SCIENTIN	<u>FIC                                    </u>
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3		Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by exp	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expe	nses, and
	revenue, if any, for each program service reported.	
4a		<b>609,856.</b> )
	DISTRIBUTION OF GRANTS TO QUALIFYING SMALL BUSINESSES IN ALBANY (	COUNTY
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$	)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$	)
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$	!
4e	Total program service expenses 826,584.	
		Form <b>990</b> (2023)

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### Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u> </u>		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	<b>-</b> '-		
0	, ,			x
•	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			.,
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
		12b		х
12	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
13		14a		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	148		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	4		₩.
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> X</u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			. v
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
		_		

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orm 990 (2	2023	DEAEROLMENT		
Part IV	Ch	ecklist of Required Schedules	(continued)	)

22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, coloring in Section (P. 1974; and all II)  23 Did the organization answer "Vest to Part VII, Section A, line 3, 4, or 6, about compensation of the organization survert and former officiers, direction, rustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 24  24a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the list day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule J 1907 in the 1907 and 1907 in 1				Yes	No
23 Det the organization answer "Yes" to Part VII, Section A, line 3, 4, or 8, about compensation of the organization's current and former officers, directors, trustees, key employees, and rightest compensated employees? "Yes," complete Schedule J.  24 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the list day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If 'No," to a fine 25a Schedule K. If 'No," to a fine 25a C Did the organization minimal and escrive account of the than a refunding scrow at any time during the year to defease any tax-exempt bonds?  24d Did to the organization and the schedule C part I was a fine any time during the year to defease any tax-exempt bonds?  24d Did the organization acts as an 'no hethalf of issuer for bonds outstanding any time during the year to defease any tax-exempt bonds?  24d Did the organization acts as an 'no hethalf of issuer for bonds outstanding any time during the year to defease any tax-exempt bonds?  24d Did the organization acts as an 'no hethalf of issuer for bonds outstanding any time during the year to defease any tax-exempt bonds?  24d Did the organization acts as an 'no hethalf of issuer for bonds outstanding any time during the year?  25d Section 501(501, 501(4)4), and 501(4)2, and 5	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
and former officers, directions, trustees, key employees, and highest compensated employees? If Yes, 'complete Schedule' L. Part IV.  23		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
Schedule / Land Did the organization have a tax-exempt bond issue with an outstranding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No." go to line 25a.  b Did the organization mives any proceeds of tax-exempt bonds beyond a temporary period exception?  c Did the organization mives any proceeds of tax-exempt bonds beyond a temporary period exception?  d Did the organization mives any proceeds of tax-exempt bonds beyond a temporary period exception?  d Did the organization maintain an escrew account other than a refurching escrew at any time during the year?  d Did the organization are at an an "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization are at that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I  b Is the organization are port any amount on Part X, line 5 or 22, for receivables from or payallies to any current or former office, director, truste, key employee, creator or former office, director, truste, key employees, creator or former office, director, truste, key amployees, creator or former offic	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
24a Dd the organization have a tox-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yea," arrawer lines 24th through 2dd and complete Schedule K. If "No," go to line 25a 2dd by the organization mirest any processos of tax-exempt bonds beyond a temporary period exception? 2dd Cold the organization mirest any processos of tax-exempt bonds beyond a temporary period exception? 2dd Cold the organization mirest any processos of tax-exempt bonds? 2dd Dd the organization mirest any processos of tax-exempt bonds? 2dd Dd the organization mirest any processos of tax-exempt bonds? 2dd Dd the organization mirest any processos of the organization expenses of the organization provide organization organization provide organization organization provide organization provide organization provide organization organization provide organization organization provide organization provide organization provide organization provide organization provide organization provide organization organization provide organization organization provide organization provide organization organization organization provide organization organization provide organization		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
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Schedule K. If "No." po to line 25a	24a				
b Dd the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?  c Dd the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tax exempt bonds?  d Dd the organization and at as an 'on behalf of' issuer for bonds outstanding at any time during the year?  d Dd the organization are said as a foreign of the secretary to the organization and a secretary to the organization with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I   25a   X    b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I   25a   X    25b   Schedule L, Part I   25a   X    26c   Dd the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, fustee, key employee, creator or founder, substantial contributor or, or 25: ocntrolled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part I   26   X    27c   Dd the organization provide a grant or other assistance to any current or former officer, director, fustee, key employee, creator or founder, substantial contributor or employee thereofy or family member of any of these persons? If 'Yes,' complete Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions:  a A current or former officer, director, fustee, key employee, creator or founder, substantial contributor? If 'Yes,' complete Schedule L, Part IV   28b   X    b A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV   28b   X    c A 39% controlled entity of one or more individuals and/or organization secribed in line 28a or 'Res,' complete Schedule L, Part IV   28b   X    c A 39% controlled entity of one or more individuals and/or organization secribed in line 28a or 'Res,' complete Schedule L, Part IV   28b   X    D Dd the organization recei		last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any taxe-empt bonds?  d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?  24d   25a Section 501(c/3), 501(c/4), and 501(c/20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "yes," complete Schedule I., Part I   25a   X    b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and the prior of the p					<u> X</u>
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d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  255 Section 501(2)(3), 501(4)(4), and 501(4)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? (if "Yes," complete Schedule L, Part I  25 b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization is prior Former 500 or 990-527 (if "Yes," complete Schedule L, Part I  25 b Did the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Former 500 or 990-527 (if "Yes," complete Schedule L, Part I    26	С				
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? #"Yes," complete Schedule I, Part I 25b X is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization spice Forms 990 or 990-E27. #"Yes," complete Schedule I, Part I 25b X 25b Ut the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? #"Yes," complete Schedule I, Part II 26b X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, or grant selection committee member, or to a 55% controlled entity (including an employee thereof) or family member of any of these persons? #"Yes," complete Schedule I, Part II 27 X 28b Was the organization aperty to a business transaction with one of the following parties? See the Schedule I, Part II 27 X 28b Was the organization of controlled entity of one or more individuals and/or organizations described in line 28a? #"Yes," complete Schedule II, Part IV 28a X 28b X 25b A 4 35% controlled entity of one or more individuals and/or organizations escelled in line 28a #"Yes," complete Schedule M 28b X					
b is the organization ware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior forms 990 or 995-E7? If "Yes," complete Schedule L, Part I		- · · · · · · · · · · · · · · · · · · ·	24d		
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 980 or 930 E27 in "Yes," complete Schedule I, Part I 25b W X 25b Ut the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or former officer, director, trustee, key employee, creator or founder, substantial contributior, or 359% controlled entity or family member of any of these persons? If "Yes," complete Schedule I, Part II 26 W 34 the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributior or employee thereof) or family member of any of these persons? If "Yes," complete Schedule I, Part IV instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, key employee, creator or founder, substantial contributor? If "Yes," complete Schedule I, Part IV 28b X X 28b X 27b A 53% controlled entity of neo or more individuals and/or organizations or substantial contributor? If "Yes," complete Schedule I, Part IV 28b X 2	25a				\ <b>.</b>
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II			25a		<u> </u>
Schedule L, Part II  25b	b				
Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule I, Part II 27 X  28 Was the organization party to a business transaction with one of the following parties? Schedule I, Part II 27 X  28 Was the organization aparty to a business transaction with one of the following parties? See the Schedule I, Part II 27 X  28 Was the organization aparty to a business transaction with one of the following parties? See the Schedule I, Part II 27 X  28 Was the organization aparty to a business transaction with one of the following parties? See the Schedule I, Part II 27 X  28 Was the organization aparty to a business transaction with one of the following parties? See the Schedule I, Part II 28 X  29 A Current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule I, Part IV 28 X  28 A X  29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 29 X  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I 31 X  30 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 31 X  31 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line I 34 X  35 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X  36 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35 X  37 Did t		that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			\ <b>.</b>
or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of family member of any of these persons? If "Yes," complete Schedule L, Part II		, and the second se	25b		<u> </u>
controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26				
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a \$5% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions); and A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If  28a					.,
creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? '/ 'Yes, 'complete Schedule L, Part II.  27  28  Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? '// 18  b A family member of any individual described in line 28a? '// 'Yes, 'complete Schedule L, Part IV.  28b  X  c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? '// 'Yes, 'complete Schedule L, Part IV.  29  29  10 tid the organization receive more than \$25,000 in noncash contributions? '// 'Yes, 'complete Schedule L, Part IV.  29  20  21  23  25  26  26  27  27  28  28  28  29  29  20  20  20  20  21  21  22  23  24  25  26  26  27  27  28  27  28  28  29  20  20  21  23  24  25  26  26  27  27  28  28  27  28  28  29  20  20  20  21  21  22  23  24  25  26  26  27  27  28  28  28  29  20  20  20  21  21  22  23  24  25  26  26  27  27  28  28  27  28  29  20  20  21  21  22  23  23  24  25  26  26  27  27  27  28  28  28  28  28  28  29  29  20  20  20  20  20  20  20  20			26		
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1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable     1a     9       b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable     1b     0       c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?     1c     X		Check if Schedule O contains a response or note to any line in this Part V	<u></u> .		
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable				Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming  (gambling) winnings to prize winners?  1c X	1a	The first transfer reported in 20% of the first transfer approaches			
(gambling) winnings to prize winners?	b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
	С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
		(gambling) winnings to prize winners?	1c	X	

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

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 7			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b	X	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	4a		X
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccounts (FBAR).			
5a			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction		5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				٦,
	any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributi	· ·			
_	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).		_		v
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser		7a		X
b			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	•			х
لم	to file Form 8282?	7d	7c		Λ
d	If "Yes," indicate the number of Forms 8282 filed during the year		7e		
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit condition by Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7 <del>6</del>		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		
h	If the organization received a contribution of qualified intellectual property, and the organization mered.		79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained				
•			8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the agree of a general and an experience of the first the time of the time		9a		
b	Bid the analysis of a second factor and the first the standard sta		9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
а	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the	المدا			
_	organization is licensed to issue qualified health plans	13b			
	Enter the amount of reserves on hand  Did the organization receive any payments for indoor tanning services during the tax year?	13c	14a		Х
14a h	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu.		14a		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner		1-10		
	excess parachute payment(s) during the year?		15		х
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	: income?	16		х
	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes." complete Form 6069.				

Page 6

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		1	ı
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	l		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	v	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	40	v	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	Х
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40-		х
40	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?	14	21	Х
14 15	Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent	14		22
13	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
•	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b	<del></del> -	Х
~	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NY			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	s only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	AMY THOMPSON - 518-937-5254			
	111 WASHINGTON AVENUE, SUITE 100, ALBANY, NY 12210			

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

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

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

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

Check this box if neither the organization n	or any related	orga	niza	tion	con	nper	nsat	ed any current officer, d	irector, or trustee.	<b>.</b>
(A)	(B)			_ ((	C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos heck			one	Reportable	Reportable	Estimated
	hours per	box	, unle cer ar	ss pe	rson i	is bot	h an	compensation	compensation	amount of
	week		T		10010	1	T	from	from related	other
	(list any hours for	lirecto				L		the organization	organizations (W-2/1099-MISC/	compensation from the
	related	e or 0	stee			satec		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	truste	al trus		yee	mper		1099-NEC)	10001120)	and related
	below	Individual trustee or director	Institutional trustee	e e	Key employee	Highest compensated employee	er			organizations
	line)	Indiv	Insti	Officer	Key	High	Former			
(1) KEVIN CATALANO	37.50					L				
SR VICE PRESIDENT / DIR. C				Х				107,781.	0.	21,213.
(2) AMY THOMPSON	37.50	1								
CFO				X			L	74,779.	0.	12,204.
(3) KEVIN O'CONNOR	1.00	1								_
CEO	1 00			X				12,308.	0.	0.
(4) ALAN GOLDBERG	1.00			7,						
CHAIRMAN	1 00	X		Х			1	0.	0.	0.
(5) ALAN ALEXANDER	1.00			77						
TREASURER	1 00	Х		X		┢		0.	0.	0.
(6) ANDREW JOYCE	1.00	<b>.</b> ,								_
EX-OFFICIO (7) DAN MCCOY	1 00	Х				-	-	0.	0.	0.
(7) DAN MCCOY EX-OFFICIO	1.00	х						0.	0.	0.
(8) MICHAEL CINQUANTI	1.00	Λ				$\vdash$	H	J	0.	· ·
TRUSTEE	1.00	Х						0.	0.	0.
(9) MARCIA WHITE	1.00	Λ				$\vdash$	H	0.	0.	0.
SECRETARY	1.00	Х		Х				0.	0.	0.
(10) RICHARD ROSEN	1.00					$\vdash$			•	•
VICE CHAIRMAN	1100	х						0.	0.	0.
(11) THOMAS NARDACCI	1.00									
TRUSTEE		Х						0.	0.	0.
		1								
						_	<u> </u>			
		4								
										000

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Part VII   Section A. Officers, Directors, Trust	tees, Key Emp	oloy	ees,	anc	l Hig	ghes	t C	ompensated Employee	s (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do		Pos		<b>1</b> than c	ne	Reportable	Reportable	Estimated
	hours per week	box	, unles	ss per	rson i	is both	an	compensation	compensation	amount of
	(list any					Π	,	from the	from related organizations	other compensation
	hours for	Individual trustee or director				þ		organization	(W-2/1099-MISC/	from the
	related	tee or	trustee			ensate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	al trus	onal tr		loyee	comp		1099-NEC)		and related
	below line)	dividu	Institutional t	Officer	Key employee	Highest compensated employee	Former			organizations
		드	드	JO	- <del>S</del>	글등	요			
							5			
1b Subtotal		l		7				194,868.	0.	33,417.
c Total from continuation sheets to Part VII							- 1	0.	0 .	
							_	194,868.	0.	33,417.
2 Total number of individuals (including but no	ot limited to the	ose	liste	d ab	ove	e) wh	o re	eceived more than \$100,	000 of reportable	4
compensation from the organization		-			_					Yes No
3 Did the organization list any <b>former</b> officer,	director truste	20 k	·0\/ 0	mnl	01/0	0 Or	hia	hast companyated ampl	ovec on	165 140
line 1a? If "Yes," complete Schedule J for su								nest compensated empi		3 X
4 For any individual listed on line 1a, is the su										
and related organizations greater than \$150	•		•					•	•	4 X
5 Did any person listed on line 1a receive or a										
rendered to the organization? If "Yes." com	plete Schedule	J fo	or su	ıch <u>ı</u>	oers	on .				5 X
Section B. Independent Contractors		laur i	- ام م	.1 -					100,000 of a con-	akian fuan-
1 Complete this table for your five highest cor the organization. Report compensation for t	=	-							•	auon irom
(A)	oalondar ye	<i>-</i> ui	IGII	. <u>y</u> w	(	۷۷۱ ا	1	(B)	Jul	(C)
Name and business	address	NC	ONE	C				Description of s	ervices	Compensation
							$\exists$			
							$\dashv$			
							$\dashv$			
							1			
2. Total number of independent control of	oludina E	S# 15	nito	1+-	the	20 11:0	+0.51	abovo) who resting the	ore then	
2 Total number of independent contractors (ir \$100,000 of compensation from the organiz		JL IIN	iiitec	1 (0 )	tnos )	_	ıea	above) who received mo	ne man	
Trooper of compensation from the organiz						_				Form <b>990</b> (2023

Form 990 (2023)

Part VIII Statement of Revenue

		Check if Schedule O contains a response of	or note to any lin	e in this Part VIII			
				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
					iunction revenue	business revenue	sections 512 - 514
SΩ	1 a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues 1b					
9		Fundraising events 1c					
Ę,							
ig ig			500,000.				
ons,	•	• • • • • • • • • • • • • • • • • • • •	300,000.				
utio	T	All other contributions, gifts, grants, and					
들 된		similar amounts not included above 1f					
o d	9	Noncash contributions included in lines 1a-1f		E00 000			
Og	r	Total. Add lines 1a-1f		500,000.			
		A CENTON FEED	Business Code	255 727	255 727		
Se	2 a	AGENCY FEES	900099	355,737.	355,737.		
Program Service Revenue	b	MANAGEMENT FEES	900099	200,000.	200,000.		
S	C						
ar.	c						
о Б	e	·					
₫	f	All other program service revenue					
	g	Total. Add lines 2a-2f		555,737.			
	3	Investment income (including dividends, interes	st, and				
		other similar amounts)		4,756.	4,756.		
	4	Income from investment of tax-exempt bond pr					
	5	Royalties					
		(i) Real	(ii) Personal	V A			
	6 a	Gross rents 6a 47,407.					
		Less: rental expenses 6b 0.					
		Rental income or (loss) 6c 47,407.					
		Net rental income or (loss)		47,407.	47,407.		
		Gross amount from sales of (i) Securities	(ii) Other	11,72070	27,7207		
	, ,	assets other than inventory <b>7a</b>	()				
		Less: cost or other basis					
a)	L.						
ther Revenue	_	and sales expenses 7b Gain or (loss) 7c					
eve		· /					
Æ		Net gain or (loss)					
‡	8 a	Gross income from fundraising events (not					
0		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 188a					
		Less: direct expenses 8b					
		Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See					
		Part IV, line 199a					
		Less: direct expenses 9b					
	c	Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns					
		and allowances 10a					
	b	Less: cost of goods sold10b					
		Net income or (loss) from sales of inventory					
<u>"</u> [			Business Code				
Miscellaneous Revenue	11 a	CRC FEE INCOME	900099	1,956.	1,956.		
ane Due	b						
elle eve	c						
lisc Be	c	All other revenue					
2	e	Total. Add lines 11a-11d		1,956.			
	12	Total revenue. See instructions		1,109,856.	609,856.	0.	0.

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### Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (**D**) Fundraising Do not include amounts reported on lines 6b. Program service expenses Total expenses Management and general expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 ....... Benefits paid to or for members ..... Compensation of current officers, directors, 194,473. 228,285. 33,812. trustees, and key employees ..... Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 222,771. 211,474. 11,297. Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 10 Payroll taxes Fees for services (nonemployees): Management 95,016. 95,016. Legal Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees ..... Other. (If line 11g amount exceeds 10% of line 25, 77,176. 77,176. column (A), amount, list line 11g expenses on Sch O.) 20,476.18,428. 2,048. Advertising and promotion 12 43,499. 39,149. 4,350. Office expenses 13 538. 484. 54. Information technology 14 15 Royalties 98,687. 88,818. 9,869. 16 Occupancy 14,446. 13,001. 1,445. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 9,297. 8,367. 930. Conferences, conventions, and meetings 19 20 Payments to affiliates 21 27,868. 25,081. 2,787. Depreciation, depletion, and amortization 22 8,174. 7,357. 817. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 24,706. 2,471. 22,235. SPONSORSHIP 1,608. DUES AND SUBSCRIPTIONS 16,077. 14,469. 10,032. 11,142. 1,110. **MISCELLANEOUS** 1,138. 1,024. 114. FILING FEES e All other expenses 899,296. 826,584. 72,712. 0. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Form 990 (2023)
Part X Balance Sheet

Part	ίλ	Balance Sneet					
		Check if Schedule O contains a response or n	ote to an	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			534,206.	1	623,804
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			49,697.	4	90,214
	5	Loans and other receivables from any current	or former	officer, director,			
		trustee, key employee, creator or founder, sub	stantial c	contributor, or 35%			
		controlled entity or family member of any of the	ese pers	ons		5	
	6	Loans and other receivables from other disqua	-	·			
		under section 4958(f)(1)), and persons describ				6	
ţ2	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	10.000
`	9				6,622.	9	19,899
	10a	Land, buildings, and equipment: cost or other		160 500			
		basis. Complete Part VI of Schedule D		160,588.	26 452		115 (27
		Less: accumulated depreciation		44,951.	36,452.	10c	115,637
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line		4		12	
	13	Investments - program-related. See Part IV, lin				13	
	14	Intangible assets	414,878.	14	320,064		
	15	Other assets. See Part IV, line 11			1,041,855.	15 16	1,169,618
	<u>16</u> 17	Total assets. Add lines 1 through 15 (must ed Accounts payable and accrued expenses			14,704.	17	30,672
	18	Grants payable			11,701.	18	30,012
	19	Deferred revenue		3,951.	19	0	
	20	Tax-exempt bond liabilities	3,7521	20			
- 1	21	Escrow or custodial account liability. Complet				21	
	22	Loans and other payables to any current or fo					
ţi.		trustee, key employee, creator or founder, sub					
Liabilities		controlled entity or family member of any of the				22	
<u>ا</u> ڌ	23	Secured mortgages and notes payable to unre				23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on lin	es 17-24)	. Complete Part X			
		of Schedule D			414,878.	25	320,064
	26	Total liabilities. Add lines 17 through 25			433,533.	26	350,736
		Organizations that follow FASB ASC 958, cl	heck her	e 🗌			
Ses		and complete lines 27, 28, 32, and 33.					
<u>a</u>	27					27	
Ba	28	Net assets with donor restrictions				28	
בו		Organizations that do not follow FASB ASC	958, che	eck here X			
F		and complete lines 29 through 33.					
its (	29	Capital stock or trust principal, or current fund			0.	29	0
sse	30	Paid-in or capital surplus, or land, building, or			0.	30	010 003
₩	31	Retained earnings, endowment, accumulated			608,322.	31	818,882
	32	Total net assets or fund balances			608,322.	32	818,882
L	33	Total liabilities and net assets/fund balances			1,041,855.	33	1,169,618

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		
				_	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,10		
2	Total expenses (must equal Part IX, column (A), line 25)	2			96.
3	Revenue less expenses. Subtract line 2 from line 1	3			<u>60.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	60	<u>8,3</u>	<u>22.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	81	8,8	82.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	an audite annulaire who are Caluadula O and describe any atoms to be to underso analysis and its		امدا		I

332012 12-21-23

### **SCHEDULE A**

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

### **Public Charity Status and Public Support**

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

Open to Public Inspection

Go to www.irs.gov/Form990 for instructions and the latest information. ADVANCE ALBANY COUNTY ALLIANCE LOCAL

Employer identification number 85-4222366

OMB No. 1545-0047

		DEVE	LOPMENT CO	RPORATION				8	5-4222366
Pa	rt I	Reason for Public (	Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions.		
The	organ	ization is not a private found							
1		A church, convention of ch	urches, or associatio	n of churches described	in <b>sectio</b>	n 170(b)(1	I)(A)(i).		
2		A school described in sect	ion 170(b)(1)(A)(ii). (	Attach Schedule E (Form	า 990).)				
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	ii).		
4		A medical research organiz	ation operated in cor	njunction with a hospital	described	in <b>sectio</b>	n 170(b)(1)(A)(i	ii). Enter	the hospital's name,
		city, and state:							
5		An organization operated for	or the benefit of a col	llege or university owned	l or operate	ed by a go	vernmental uni	t describe	ed in
		section 170(b)(1)(A)(iv).							
6		A federal, state, or local government	•				• •		
7	X	An organization that norma	-	ntial part of its support fr	rom a gove	ernmental	unit or from the	general <sub>l</sub>	public described in
		section 170(b)(1)(A)(vi). (C							
8	Щ	A community trust describe							
9		An agricultural research org	•					-	-
	or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or								
40		university:			1.5	1.79 11		,	
10		An organization that norma							
		activities related to its exen							
		income and unrelated busin		(less section 511 tax) iro	om busines	sses acqui	red by the orga	nization a	arter June 30, 1975.
11		See section 509(a)(2). (Con An organization organized a	•	vely to test for public sat	foty See	section 50	)Q(a)(A)		
12	H	An organization organized a						v out the	nurnoses of one or
12	ш	more publicly supported or	· ·						
		lines 12a through 12d that	-						SHOOK THE BOX OH
а		Type I. A supporting orga							aivina
		the supported organization			7				
		organization. You must o			,, -				9
b		Type II. A supporting org	-		ion with its	s supporte	ed organization(	s), by hav	/ing
		control or management o							
		organization(s). You mus			·		· ·		
c		Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functionally	integrate	ed with,
		its supported organization	n(s) (see instructions)	). You must complete i	Part IV, Se	ctions A,	D, and E.		
d		Type III non-functionally	<b>/ integrated.</b> A supp	orting organization oper	ated in cor	nnection v	vith its supporte	ed organi:	zation(s)
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distr	ibution red	quirement and a	ın attentiv	veness
		requirement (see instructi	ions). <b>You must con</b>	nplete Part IV, Sections	A and D,	and Part	V.		
е		Check this box if the orga					Type I, Type II,	Type III	
		functionally integrated, or	r Type III non-function	nally integrated supporting	ng organiz	ation.			
		er the number of supported of	•						
		vide the following information (i) Name of supported	about the supporte	d organization(s). (iii) Type of organization	(iv) Is the orga	anization listed	(v) Amount of n	nonetany	(vi) Amount of other
	,	organization	(II) LIIV	(described on lines 1-10	in your governi	ng document?	support (see inst	•	support (see instructions)
				above (see instructions))	Yes	No			, ,
Tota	al								

332021 12-21-23

85-4222366 Page 2

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

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

2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4. 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions)  12 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here	Sec	tion A. Public Support						
membership fees received. (Do not include any "unusual grants.")  1000000. 121,976. 525,000. 500,000. 2146976.  Tax revenues levide for the organization of benefit and either paid to or expended on its behalf control in the behalf of the organization without charge  4 Total, Add lines 1 through 3  The value of services or facilities furnished by a governmental unit to the organization without charge  4 Total, Add lines 1 through 3  The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  6 Public support, Sobestine's from real scenarios, and income from interest, dividends, payments received on securities learn, rents, royalties, and income from unrelated business activities, whether or not the business in singularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI),  11 Total support Add lines 7 through 10  12 Gross receipts from related activities, etc. (see instructions)  13 First 5 years, if the Form 980 or 2023 (fire 5, column (f), divided by line 11, column (f))  14 Public support percentage for 2023 (fire 6, column (f), divided by line 11, column (f))  15 Public support percentage for 2023 (fire 6, column (f), divided by line 11, column (f))  16 Section C. Computation of Public Support Percentage  17 Public support percentage for 2023 (fire 6, column (f), divided by line 11, column (f))  18 Ja 1/3% support test - 2023. If the organization oid not check the box on line 13, 16a, or 16b, and line 14 is 100 0.00 organization meets the facts and circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts and circumstances test, the organization oid not check the box on line 13, 16a, or 16b, and line 14 is 10% or	Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
include any "unusual grants"   1000000 . 121,976 . 525,000 . 500,000 . 2146976 .  2 Tax reverues levied for the organization's benefit and either paid to or expended on its behalf and either paid to or expended on its behalf and either paid to or expended on its behalf and either paid to or expended on its behalf and either paid to or expended on its behalf and either paid to or expended on its behalf and either paid to or expended on its behalf and the paid to the organization without charge the provision of total contributions by each person (other than a governmental unit or publicly supported organization included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .  3 Public support, contractive from the 4	1	Gifts, grants, contributions, and						
2 Tax revenues levied for the organization's benefit and either paid to or expanded on its behalf 3. The value of services or facilities furnished by a governmental unit to the organization without charge 4. Total. Add lines 1 through 3. 5. The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). 6. Public support, service two throm times 4. 8. Gross income from interest, dividends, payments received on securities loans, rents, reyatiles, and income from similar sources. 9. Net income from unrelated business activities, whether or not the business is regularly carried on 10. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI). 11. Total support. Add lines 7 through 10. 12. Gross receipts from related activities, etc. (see instructions). 13. First 5 years. If the Form 990 is for the organization is first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.  Section C. Computation of Public Support Percentage 14. Public support percentage from 2022 Scheduley supported organization. In each of the source of the public support percentage from 2022 Scheduley supported organization of the the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization meets the facts and circumstances test. 2022. If the organization did not check a box on line 13, file, or 16a, and line 14 is 10% or more, and if the organization meets the facts and circumstances test. 2022. If the organization did not check a box on line 13, 16a, or 17a, and line 14 is 10% or more, and if the organization meets the facts and circumstances test. 2022. If the organization did not check a box on line 13, 16a, or 17a, and line 15 is 10% or more, and if the organization meets the facts and circumstances test. 2022. If the organization did n		membership fees received. (Do not						
ization's benefit and either paid to or expended on its behalf  3. The value of services or facilities furnished by a governmental unit to the organization without charge  4. Total. Add lines 1 through 3  5. The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  6. Public support, Societive's fun line  Section B. Total Support  Calendar year (or fiscal year beginning in)  7. Amounts from line 4  8. Gross income from interest, dividends, payments received on securities loans, rents, reysities, and income from interest, dividends, payments received on securities loans, rents, reysities, and income from interest, dividends, payments received on securities loans, rents, reysities, and income from include gain or loss from the sale of capital assets (Explain in Part VI)  11. Total support. Add lines 7 through 10  12. Gross receipts from related activities, etc. (see instructions)  13. First 5 years, if the Form 990 is for the organization of Public Support Percentage  14. Public support percentage for 2023 (ine 6, column (f), divided by line 11, column (fi)  15. Public support percentage for 2023 (ine 6, column (f), divided by line 11, column (fi)  16. 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization  15. Public support percentage for 2022 (line 6, column (f), divided by line 11, column (fi)  16. 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization  15. Public support degradates est - 1022. If the organization did not check a box on line 13, 16a, or 16b, and line 15 is 10% or more, and if the organization meets the facts and circumstances test, the organization did n		include any "unusual grants.")		1000000.	121,976.	525,000.	500,000.	2146976.
or expended on its behalf  3. The value of services or facilities furnished by a governmental unit to the organization without charge  4. Total. Add lines 1 through 3.  5. The portion of total contributions by such person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  6. Public support. Secretime 5 from line 4.  8. Section B. Total Support.  Callendar year (or fissel year beginning in)  7. Amounts from line 4.  8. Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources  9. Net income from unrelated business activities, whether or not the business is regularly carried on  10. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI).  11. Total support. Add lines 7 through 10.  12. Gross receipts from related activities, etc. (see instructions)  13. First 8 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.  Section C. Computation of Public Support Percentage  14. Public support percentage from 2022 Schedule A, Part II, line 14  15. Public support percentage from 2022 Schedule A, Part II, line 14  16. 33 173% support test - 2023. If the organization did not check the box on line 13, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization less the facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test. The organization on line 15 is 10% or more, and if the organization meets the facts-and-circumstances test. The organization on line 15 is 450 purported organization.  10. 170 '64'-6acts-and-circumstances test. The organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 i	2	Tax revenues levied for the organ-						
3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total, Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Solutract live 5 from live 4.  Section B. Total Support Calendar year (or fiscal year beginning in) 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support, dark files 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  Section C. Computation of Public Support Percentage 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.  Section C. Computation of Public Support Percentage  14 Public support percentage from 2022 Schedule A, Part II, line 14  15 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. The organization qualifies as a publicly supported organization  15 a 17% support percentage from 2022 Schedule A, Part II, line 14  16 a 31 17% support percentage from 2022 Schedule A, Part II, line 14  17 a 10% -facts-and-circumstances test - torganization did not check a box on line 13, 15a, 15b, and line 14 is 10% or more, and if the organization meets the facts-and-circums		ization's benefit and either paid to						
furnished by a governmental unit to the organization without charge to the portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) support. Serious port serious person (other than a governmental unit or publicly supported organization included on line 1 that exceeds 2% of the amount shown on line 11, column (f) and the public support. Serious person pers		or expended on its behalf						
the organization without charge 4 Total, Add lines 1 through 3 1000000. 121,976. 525,000. 500,000. 2146976. The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) 7 Amounts from line 4 Gross income from innetes, dividends, payments received on securities loans, rents, royallies, and income from innetes, and income from innetes, and income from innetes, dividends, payments received on securities loans, rents, royallies, and income from innetest, dividends, payments received on securities loans, rents, royallies, and income from innetest of the business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assesses (Explain in Part VI.) 11 Total support. Add lines? through 10 12 Gross receipts from related activities, etc. (see instructions) 12 First 5 years. If the Form 900 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) 15 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) 16 33 1/3% support test - 2022. If the organization of the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test, check this box on line 13, 16a, 16b,	3	The value of services or facilities						
4 Total. Add lines 1 through 3  5 The portion of total contributions by each person (other than a governmental unit or publicity supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  6 Public support. Subsectives 5 from line 4.  8 Cection B. Total Support  6 Section B. Total Support  7 Amounts from line 4  9 1000000. 121,976. 525,000. 500,000. 2146976.  8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources  9 Net income from unrelated business activities, whether or not the business is regularly carried on  10 Other income. Do not include gain or loss from the sale of capital assest (Styplain in Part VI).  11 Total support. Add lines 7 through 10  2 Gross receipts from related activities, etc. (see instructions)  12 Gross receipts from related activities, etc. (see instructions)  13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(o)(3) organization, check this box and stop here  5 Section C. Computation of Public Support Percentage  14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))  15 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))  16 3 31/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization  17 10% -facts-and-circumstances test. The organization qualifies as a publicly supported organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization meets the facts-and-circumstances test. The organization qualifies as a publicly		furnished by a governmental unit to						
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by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)  6 Public support, Subtract line 5 from line 4  8 Postcion B. Total Support  Calendar year (or fiscal year beginning in)  7 Amounts from line 4  8 Gross income from interest, dividends, payments received on securities (loans, rents, royalties, and income from unrelated business activities, whether or not the business is regularly carried on  10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI).  11 Total support. Add lines 7 through 10  2 Gross receipts from related activities, etc. (see instructions)  12 Gross receipts from related activities, etc. (see instructions)  13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  24 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))  15 Public support percentage from 2022 Schedule A, Part II, line 14  1 2 10 0 0 0 9  15 Public support percentage from 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization  10 a 17% support test - 2022. If the organization did not check the box on line 13, fea, or 16a, and line 14 is 10% or more, and if the organization meets the facts and circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts and circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts and circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts and circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts and circumstances test, check this box and stop here. Explain in Part VI how the organ	4	Total. Add lines 1 through 3		1000000.	121,976.	525,000.	500,000.	2146976.
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Schedule A (Form 990) 2023	18	Private foundation. If the organization	n did not check a l	box on line 13, 16a	ı, 16b, 17a, or 17b	, check this box ar		

Schedule A (Form 990) 2023

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

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

Sec	ction A. Public Support	<u> </u>					
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 512						
4	Tax revenues levied for the organization's benefit and either paid to						
5	or expended on its behalf  The value of services or facilities furnished by a governmental unit to						
_	the organization without charge					+	_
	<b>Total.</b> Add lines 1 through 5					+	
	3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6						,,
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)				1	1	
14	First 5 years. If the Form 990 is for the	-					
<u></u>							
	ction C. Computation of Publi		<u>-</u>			T I	
	Public support percentage for 2023 (I		•			15	<u>%</u>
16 Se	Public support percentage from 2022 ction D. Computation of Inves					16	<u>%</u>
				10 l (f)		47	0/
	Investment income percentage for 20						<u>%</u>
18	Investment income percentage from 3			on line 14 and line		18	% 7 is not
198	33 1/3% support tests - 2023. If the						
L	more than 33 1/3%, check this box ar 33 1/3% support tests - 2022. If the						
L	line 18 is not more than 33 1/3%, che						
20	Private foundation If the organization						

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### Part IV | Supporting Organizations

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

### Section A. All Supporting Organizations

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

	Yes	No
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Pa	TIV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)	).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction	s).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
_	trustees of each of the supported organizations? If "Yes" or "No" provide details in <b>Part VI.</b>	За		
b				
_	of its supported organizations? If "Yes." describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

Schedule A (Form 990) 2023

DEVELOPMENT CORPORATION

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Pai	Type III Non-Functionally Integrated 509(a)(3) Supporting	Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying t	rust o	n Nov. 20, 1970 ( explain in <b>I</b>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must co			
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
_	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
	ion B - Minimum Asset Amount	_	(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount	•		Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally i	ntegra	ited Type III supporting orga	nization (see
	instructions).	·		•

DEVELOPMENT CORPORATION Schedule A (Form 990) 2023 DEVELOPMENT CORPORATION

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (A) 85-4222366 Page 7

rai	Type in Non-Functionally integrated 509	(a)(b) Supporting Orga	ilizations (continu	<u>iea)      </u>			
<u>Secti</u>	on D - Distributions				Current Year		
_1_	Amounts paid to supported organizations to accomplish exe	mpt purposes		1			
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported					
	organizations, in excess of income from activity			2			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3			
_4_	Amounts paid to acquire exempt-use assets			4			
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5			
_6_	Other distributions (describe in Part VI). See instructions.			6			
_7_	<b>Total annual distributions.</b> Add lines 1 through 6.			7			
8	Distributions to attentive supported organizations to which the	ne organization is responsive					
	(provide details in Part VI). See instructions.			8			
_9_	Distributable amount for 2023 from Section C, line 6	,					
10	Line 8 amount divided by line 9 amount	1	10				
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023	ıs	(iii) Distributable Amount for 2023		
1	Distributable amount for 2023 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2023 (reason-			I			
	able cause required - explain in Part VI). See instructions.						
3	Excess distributions carryover, if any, to 2023						
a	From 2018						
b	From 2019						
с	From 2020						
d	From 2021						
е	From 2022						
f	Total of lines 3a through 3e						
g	Applied to underdistributions of prior years						
<u>h</u>	Applied to 2023 distributable amount						
i_	Carryover from 2018 not applied (see instructions)						
i_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.						
4	Distributions for 2023 from Section D,						
	line 7: \$						
<u>a</u>	Applied to underdistributions of prior years						
b	Applied to 2023 distributable amount						
c	Remainder. Subtract lines 4a and 4b from line 4.						
5	Remaining underdistributions for years prior to 2023, if						
	any. Subtract lines 3g and 4a from line 2. For result greater						
	than zero, explain in Part VI. See instructions.						
6	Remaining underdistributions for 2023. Subtract lines 3h						
	and 4b from line 1. For result greater than zero, explain in						
	Part VI. See instructions.						
7	Excess distributions carryover to 2024. Add lines 3j						
	and 4c.						
8	Breakdown of line 7:						
	Excess from 2019						
	Excess from 2020						
	Excess from 2021						
	Excess from 2022						
е	Excess from 2023						

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

(Form 990)

### **Schedule of Contributors**

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

2023

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Name of the organization

ADVANCE ALBANY COUNTY ALLIANCE LOCAL

Employer identification number

DEVELOPMENT CORPORATION 85-4222366
Organization type (check one):

Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	covered by the <b>General Rule</b> or a <b>Special Rule</b> .  7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
Note: Only a section 30 f(c)(	7), (b), of (10) diganization can check boxes for both the decleral hale and a Special hale. See instructions.					
General Rule						
For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.						
Special Rules						
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
contributor, during literary, or education	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purpose. Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions totaling \$5,000 or more during the year\$						
Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).						

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

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)

Name of organization

ADVANCE ALBANY COUNTY ALLIANCE LOCAL

DEVELOPMENT CORPORATION

Employer identification number

Page 2

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Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	ALBANY COUNTY  112 STATE ST  ALBANY, NY 12207	\$\$	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)			

Name of organization

ADVANCE ALBANY COUNTY ALLIANCE LOCAL

Employer identification number

DEVELOPMENT CORPORATION 85-4222366 Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I (a) (c) No. (d) (b) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I (a) (c) No. (d) (b) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I (a) (c) No. (b) (d) FMV (or estimate) from Date received Description of noncash property given (See instructions.) Part I (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I

Name of organization **Employer identification number** ADVANCE ALBANY COUNTY ALLIANCE LOCAL DEVELOPMENT CORPORATION 85-4222366 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Inspection

Name of the organization

ADVANCE ALBANY COUNTY ALLIANCE LOCAL DEVELOPMENT CORPORATION

**Employer identification number** 85-4222366

Pai	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		Funds or Ac	counts. Complete if the				
		(a) Donor advised funds	(	b) Funds and other accounts				
1	Total number at end of year							
2	Aggregate value of contributions to (during year)							
3	Aggregate value of grants from (during year)							
4	Aggregate value at end of year							
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in don-	or advised fund	ds				
	are the organization's property, subject to the organization's e	xclusive legal control?		Yes No				
6	Did the organization inform all grantees, donors, and donor ad	lvisors in writing that grant funds	can be used o	nly				
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other p	urpose conferri	ing				
	impermissible private benefit?			Yes No				
Pai	rt II Conservation Easements. Complete if the organic	anization answered "Yes" on For	m 990, Part IV,	line 7.				
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).						
	Preservation of land for public use (for example, recreati	on or education) Preserv	ation of a histo	orically important land area				
	Protection of natural habitat	Preserv	ation of a certi	fied historic structure				
	Preservation of open space							
2	Complete lines 2a through 2d if the organization held a qualified	ed conservation contribution in the	ne form of a co	nservation easement on the last				
	day of the tax year.			Held at the End of the Tax Year				
а	Total number of conservation easements			2a				
b				2b				
С	Number of conservation easements on a certified historic structure	cture included on line 2a		2c				
d	Number of conservation easements included on line 2c acquir	ed after July 25, 2006, and not						
	on a historic structure listed in the National Register			2d				
3	Number of conservation easements modified, transferred, rele	ased, extinguished, or terminated	d by the organi	zation during the tax				
	year							
4	Number of states where property subject to conservation ease	ement is located						
5	Does the organization have a written policy regarding the period	odic monitoring, inspection, hand	lling of					
	violations, and enforcement of the conservation easements it I	holds?		Yes No				
6	Staff and volunteer hours devoted to monitoring, inspecting, h	andling of violations, and enforci	ng conservatio	n easements during the year				
7	Amount of expenses incurred in monitoring, inspecting, handli	ing of violations, and enforcing co	onservation eas	sements during the year				
8	Does each conservation easement reported on line 2d above s	eatiefy the requirements of section	n 170/h)//)/R)/i)					
0	•	•						
9	and section 170(h)(4)(B)(ii)?							
3	balance sheet, and include, if applicable, the text of the footnot		· ·					
	organization's accounting for conservation easements.	•	Statements the	at describes the				
Pai	rt III Organizations Maintaining Collections of	Art, Historical Treasures.	or Other S	imilar Assets.				
	Complete if the organization answered "Yes" on Form 9		•					
	If the organization elected, as permitted under FASB ASC 958		ement and hala	ance sheet works				
	of art, historical treasures, or other similar assets held for publ	•						
	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.							
b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of							
-	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service,							
	provide the following amounts relating to these items.							
	(i) Revenue included on Form 990, Part VIII, line 1			\$				
				<u> </u>				
2	If the organization received or held works of art, historical treas			provide				
_	the following amounts required to be reported under FASB AS							
а	Revenue included on Form 990, Part VIII, line 1			\$				
	Assets included in Form 990, Part X							
	For Paperwork Reduction Act Notice, see the Instructions			Schedule D (Form 990) 2023				

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Par	t III Organizations Maintaining Co	ollections of Art	t, Historical T	reasures, o	r Othe	r Simila	r Assets	s (contin	ued)	ugo —
3	Using the organization's acquisition, accessic							,		
	collection items (check all that apply).									
а	Public exhibition	d	Loan or e	exchange progra	am					
b	Scholarly research	е								
С	Preservation for future generations		_							
4	Provide a description of the organization's co	llections and explain	how they furthe	r the organization	on's exer	mpt purp	ose in Part	XIII.		
5	During the year, did the organization solicit or									
	to be sold to raise funds rather than to be ma							Yes		No
Par	t IV Escrow and Custodial Arrang							ine 9, or		
	reported an amount on Form 990, Par									
1a	Is the organization an agent, trustee, custodia	an, or other intermed	liary for contribut	ions or other as	sets not	included				
	on Form 990, Part X?							Yes		No
b	If "Yes," explain the arrangement in Part XIII a									
								Amount	i	
С	Beginning balance					. 1c				
d	Additions during the year									
е	Distributions during the year									
f	Ending balance									
2a	Did the organization include an amount on Fo							Yes		No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has be	en provided in F	Part XIII					
Par	t V Endowment Funds Complete if	the organization ans	wered "Yes" on	Form 990, Part	IV, line 1	0.				
		(a) Current year	(b) Prior year	(c) Two yea	ırs back	(d) Three	years back	(e) Four	years	back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curre	ent year end balance	e (line 1g, column	(a)) held as:						
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С	Term endowment	<del></del>								
	The percentages on lines 2a, 2b, and 2c shou	ıld equal 100%.								
За	Are there endowment funds not in the posses	sion of the organiza	tion that are held	and administer	red for th	ne		_		
	organization by:								Yes	No
	(i) Unrelated organizations?							3a(i)		
								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organizat	ions listed as require	ed on Schedule F	ጓ?				3b		
4	Describe in Part XIII the intended uses of the	organization's endov	wment funds.							
Par	t VI Land, Buildings, and Equipme	ent								
	Complete if the organization answered	I "Yes" on Form 990	, Part IV, line 11a	. See Form 990	), Part X,	line 10.				
	Description of property	(a) Cost or o	ther (b) C	ost or other	(c) A	ccumula	ted	(d) Bool	< valu	е
		basis (investn	nent) bas	sis (other)	de	preciatio	1 <u> </u>			
1a	Land									
b	Buildings									
С	Leasehold improvements			25,433.			.90.			43.
d	Equipment			87,155.		11,7				94.
е	Other			48,000.		32,0	00.	16	5,0	00.
	Add lines 1a through 1e (Column (d) must on		V line 10e eeku	(D))				111	5.6	37.

Schedule D (Form 990) 2023

	CORPORATION		85-4222366 Page <b>3</b>
Part VII Investments - Other Securities  Complete if the organization answered "Yes"	on Form 990. Part IV. line 1	1b. See Form 990. Part X. line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost of	or end-of-year market value
(1) Financial derivatives			•
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))  Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost of	or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))  Part IX Other Assets			
Complete if the organization answered "Yes"	on Form 990 Part IV line 1	11d See Form 990 Part X line 15	
	Description		(b) Book value
(1) RIGHT OF USE ASSET - OPERA			320,064.
(2)			, , , , , ,
(3)			
(4)			
(5)	·		
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col	!. (B))		320,064.
Part X Other Liabilities			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	l 1e or 11f. See Form 990, Part X, lir	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			200 051
(2) OPERATING LEASE LIABILITY			320,064.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			220 064
Total. (Column (b) must equal Form 990. Part X. line 25. col	(B))		320,064.

332053 09-28-23

Schedule D (Form 990) 2023

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

Pai	t XI Reconciliation of Revenue per Audited Financial Sta		e per Return	
	Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	1,109,856.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1		
а	Net unrealized gains (losses) on investments			
b	Donated services and use of facilities			
С	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)	2d		0
е	Add lines 2a through 2d			1 100 056
3	Subtract line 2e from line 1		3	1,109,856.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1.1		
a	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.)		4.0	0.
c	Add lines 4a and 4b			1,109,856.
Pa	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12 Tt XII   Reconciliation of Expenses per Audited Financial St	atements With Expens		1,100,000
	Complete if the organization answered "Yes" on Form 990, Part IV, li	-	see per metam	
1	Total expenses and losses per audited financial statements		1	899,296.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			033,230•
a	Donated services and use of facilities	2a		
b	Prior year adjustments			
c	Other losses			
d	Other (Describe in Part XIII.)			
e	Add lines 2a through 2d		2e	0.
3	Subtract line <b>2e</b> from line <b>1</b>			899,296.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)			
С	Add lines 4a and 4b		4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line			899,296.
Pa	rt XIII Supplemental Information			
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a		art v, line 4; Part X	, iine 2; Part XI,

#### SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

QUZ3
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

ADVANCE ALBANY COUNTY ALLIANCE LOCAL DEVELOPMENT CORPORATION

Employer identification number 85-422366

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

ALBANY COUNTY, PROMOTE AND PROVIDE FOR ADDITIONAL AND MAXIMUM ADULT

EMPLOYMENT IN THE COUNTY BETTER AND MAINTAIN ADULT JOB OPPORTUNITIES IN

THE COUNTY, CARRY ON SCIENTIFIC RESEARCH FOR THE PURPOSE OF AIDING THE

COUNTY BY ATTRACTING NEW INDUSTRY OR BY ENCOURAGING THE DEVELOPMENT OR

RETENTION OF INDUSTRY IN THE COUNTY, LESSEN THE BURDENS OF GOVERNMENT

AND ACT IN THE PUBLIC INTEREST.

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

RESEARCH FOR THE PURPOSE OF AIDING THE COUNTY BY ATTRACTING NEW

INDUSTRY OR BY ENCOURAGING THE DEVELOPMENT OR RETENTION OF INDUSTRY IN

THE COUNTY, LESSEN THE BURDENS OF GOVERNMENT AND ACT IN THE PUBLIC

INTEREST.

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

THE BOARD REVIEWS THE RETURN PRIOR TO SIGNING AND FILING.

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

THE BOARD OF DIRECTORS REVIEW THE CEO'S COMPENSATION ON ANNUAL BASIS.

DURING THE YEAR, IT WAS DETERMINED THAT NO SALARY EXPENSE OF THE CEO WAS TO

BE PAID BY OR ALLOCATED TO THE ALLIANCE.

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

THE 990 IS PRESENTED AND REVIEWED BY THE BOARD MEMBERS PRIOR TO SUBMISSION.

30

PART XII, LINE 2C

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

Schedule O (Form 990) 2023

38

Scriedule O (Form 99	10) 2023				Page 2
Name of the organiza	ation ADVANCE	ALBANY CO MENT CORPO	UNTY ALLIANCE RATION	LOCAL	Employer identification number 85-422366
NO CHANGES	FROM PRIOR	YEAR.			

#### TAX RETURN FILING INSTRUCTIONS

**NEW YORK FORM CHAR500** 

#### FOR THE YEAR ENDING

**DECEMBER 31, 2023** 

D	P	F	D	Δ	P	F	n	F	<b>n</b>	P	
	К		г.	м	К	_	u	г	u	П	

ADVANCE ALBANY COUNTY ALLIANCE LOCAL DEVELOPMENT CORPORATION 111 WASHINGTON AVENUE ALBANY, NY 12210

#### PREPARED BY:

BONADIO & CO., LLP 6 WEMBLEY CT ALBANY, NY 12205

#### **AMOUNT OF TAX:**

NO PAYMENT IS REQUIRED.

#### MAKE CHECK PAYABLE TO:

NOT APPLICABLE

#### **MAIL TAX RETURN TO:**

THE NEW YORK FORM FORM CHAR500 SHOULD BE FILED VIA THE WEB AT: HTTPS://CHARITIESNYS.COM/ANNUAL\_FILING.HTML

#### RETURN MUST BE MAILED ON OR BEFORE:

PLEASE MAIL AS SOON AS POSSIBLE.

#### **SPECIAL INSTRUCTIONS:**

### **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

### 2023

Open to Public Inspection

#### 1.General Information

T.General Information		· 01/01/	2002	(	000	
For Fiscal Year Beginning (mm/dd/yyyy) 01/01/2023 and Ending (mm/dd/yyyy) 12/31/2023						
Check if Applicable:  Address Change	Name of Org ADVANC	•	COUNTY ALLIAN	ICE LOCAL DEV	Employer Identification Number (EIN): 85-4222366	
Name Change Initial Filing	Mailing Addi 111 <b>W</b> A	ress: ASHINGTON	AVENUE		NY Registration Number: 48-71-83	
	City / State /		210		Telephone: 518 852-2209	
	Website:	,			Email: KEVIN.OCONNOR@ALBAN	
Check your organization's registration category:	7A or	nly EPTL	only DUAL (7A &		onfirm your Registration Category in the harities Registry at <a href="https://www.Charities.NYS.com">www.Charities.NYS.com</a> .	
2. Certification				<b>A</b>		
See instructions for certific two signatories.	ation require	ements. Improper	certification is a violation of	of law that may be subject to	penalties. The certification requires	
We certify under pe	enalties of pe	riury that we revie	ewed this report including	all attachments, and to the b	pest of our knowledge and belief,	
				of the State of New York app		
				KEVIN O'CON	NOR	
President or Authorized C	Officer:			CEO		
		Signature		Print Name ALAN ALEXAN		
Chief Financial Officer or	Treasurer:			TREASURER		
		Signature		Print Name	and Title Date	
3. Annual Reporting	Exemption	on				
	-		organization is claiming an	exemption under one cated	ory (7A or EPTL only filers) or both	
					d Char500. No fee, schedules, or	
					exemption, you must file applicable	
schedules and attachment				,	,,,	
exceed \$25	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 At	tachment	'S				
See the following page for a checklist of Yes X No 4a. Did your organization use a professional fund raiser, fund raising counsel or commercial co-venturer						
schedules and for fund raising activity in NY State? If yes, complete Schedule 4a.						
attachments to						
complete your filing. X Yes No 4b. Did the organization receive government grants? If yes, complete Schedule 4b.						
5. Fee						
See the checklist on the next page to calculate you	7A filine	g fee:	EPTL filing fee:	Total fee:	Make a single check or money order payable to:	
fee(s). Indicate fee(s) you	\$		\$	\$	"Department of Law"	
are submitting here:	Ψ—	<del></del>	Ψ	Ψ		

CHAR500 Annual Filing for Charitable Organizations (Updated January 2022)

368451 04-01-23 1019

<sup>\*</sup>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)
X 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	
X All additional IRS Form 990 Schedules, including Schedule B (Schedule of Cordisclosure and will not be available for public review.	ntributors). Schedule B of public charities is exempt from
Our organization was eligible for and filed an IRS 990-N e-postcard. Our revenu filing year. We have included an IRS Form 990-EZ for state purposes only.	ue exceeded \$25,000 and/or our assets exceeded \$25,000 in the
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	0 and up to \$1,000,000
Audit Report if you received total revenue and support greater than \$1,000,000	0 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 rev	renue and support is greater than \$750,000
No Review Report or Audit Report is required because total revenue and supp	ort is less than \$250,000
We are a DUAL filer and checked box 3a, no Review Report or Audit Report is	required
Oslawlata Vavy Faa	
Calculate Your Fee	
	Is my Registration Category 7A, EPTL, DUAL or EXEMPT?
For 7A and DUAL filers, calculate the 7A fee:	Organizations are assigned a Registration Category upon
	registration with the NY Charities Bureau:
\$0, if you checked the 7A exemption in Part 3a	<b>7A</b> filers are registered to solicit contributions in New York
\$25, if you did not check the 7A exemption in Part 3a	under Article 7-A of the Executive Law ("7A")
	EPTL filers are registered under the Estates, Powers & Trusts
For EPTL and DUAL filers, calculate the EPTL fee:	Law ("EPTL") because they hold assets and/or conduct activities for charitable purposes in NY.
\$0, if you checked the EPTL exemption in Part 3b	<b>DUAL</b> filers are registered under both 7A and EPTL.
\$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	<b>EXEMPT</b> filers have registered with the NY Charities Bureau
\$100, if the NET WORTH is \$250,000 or more but less than \$1,000,000	and meet conditions in <u>Schedule E - Registration</u> Exemption for Charitable Organizations. These
\$250, if the NET WORTH is \$1,000,000 or more but less than \$10,000,000	organizations are not required to file annual financial reports
\$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	but may do so voluntarily.
\$1300, II the NET WONTH IS \$30,000,000 or more	Confirm your Registration Category and learn more about NY
	law at www.CharitiesNYS.com.
Send Your Filing	
Send your CHAR500, all schedules and attachments, and total fee to:	Where do I find my organization's NET WORTH?
	NET WORTH for fee purposes is calculated on:
NYS Office of the Attorney General	- IRS Form 990 Part I, line 22 - IRS Form 990 EZ Part I, line 21
Charities Bureau Registration Section	- IRS Form 990 PF, calculate the difference between
28 Liberty Street	Total Assets at Fair Market Value (Part II, line 16(c)) and
New York, NY 10005	Total Liabilities (Part II, line 23(b)).

Need Assistance?

Visit: www.CharitiesNYS.com

Call: (212) 416-8401

Email: Charities.Bureau@ag.ny.gov

368461 04-01-23 1019 CHAR500 Annual Filing for Charitable Organizations (Updated January 2022)

Page 2

### **CHAR500**

Schedule 4b: Government Grants www.CharitiesNYS.com

2023

Open to Public Inspection

If you checked the box in question 4b in Part 4, complete this schedule and list EACH government grant award by a domestic (federal, state or local) agency; interstate or intergovernmental agency (for example Port Authority of New York and New Jersey); and state or local authorities. **Use additional pages if necessary.** Include this schedule with your certified CHAR500 NYS Annual Filing for Charitable Organizations.

1. Organization Information

Name of Organization:

NY Registration Number:

ADVANCE ALBANY COUNTY ALLIANCE LOCAL DEVELOPMENT CORP 48-71-83

2	Gover	nment	Grants

Name of Government Agency		Amount of Grant
1. ALBANY COUNTY	_	1. 500,000.
2.		2.
3.		3.
4.		4.
5.		5.
6.		6.
7.		7.
8.		8.
9.		9.
10.		10.
11.		11.
12.		12.
13.		13.
14.		14.
15.		15.
Total Government Grants:		Total: 500,000.

3

# RESOLUTION 2024-07-01 OF THE ADVANCE ALBANY COUNTY ALLIANCE LOCAL DEVELOPMENT AUTHORITY

**WHEREAS**, the mission of the Advance Albany County Alliance Local Development Corporation (the "Corporation") is to foster economic development, promote increased employment and the development and retention of economic activity in Albany County, and to otherwise act in the public interest; and

**WHEREAS**, pursuant to recently passed New York State legislation which was signed into law by Governor Hochul on June 28, 2024, a new public benefit corporation named the "Albany County Pine Hills Land Authority" (the "Authority") was formed and created with the following specific statutorily-stated findings and purpose:

- 1. The economic well-being of the county and the general welfare of its people require adequate, and accessible performing arts centers, athletic fields, educational facilities, and residential facilities.
- 2. The preservation and safeguarding of facilities at risk of being underutilized and becoming blighted is a matter of vital importance not only to the residents of the capital district but to all the state's residents and is, therefore, a matter of state concern.
- 3. In order to ensure a healthy economy for such area and to promote the general welfare of its residents, it is necessary to maintain and improve the college of Saint Rose facilities and services in the county of Albany in such a manner as to stimulate and promote a healthy economy.
- 4. The general health and welfare of the state's residents requires coordinated operation of the college of Saint Rose facilities and services in the county of Albany by a public benefit authority.
- 5. The purposes of such authority shall be: (a) to promote accessible, efficient and economically productive use of the facilities; (b) to acquire, construct, reconstruct, continue, develop, equip, expand, improve, maintain, finance, and operate the college of Saint Rose facilities and services within the county of Albany; (c) to stimulate and promote economic development; and (d) to make contracts and leases and to execute all instruments necessary or convenient for its corporate purposes; and

WHEREAS, the statutory purposes of the Authority have significant overlap with and directly support the Corporation's stated mission of increasing economic development/activity within Albany County, and as such the Corporation is explicitly included with the Authority's enabling legislation on multiple instances including: (i) specific authorization for the Authority to enter into "Joint Service Agreements" with the Corporation; (ii) specific direction for the Authority to coordinate with the Corporation in the appointment of the Authority's officers,

employees and agents; and (iii) specific direction for the Authority to coordinate with the Corporation (with the consent of the County Executive) to use County employees, agents, consultants and facilities of the County; and

**WHEREAS**, in direct support of the Corporation's mission, the Corporation desires to immediately begin to provide necessary and relevant support to the Authority in achieving and executing the Authority's stated purposes; and

**NOW, THEREFORE BE IT RESOLVED**, that the CEO of the Corporation is authorized to take any and all actions for the Corporation to support the Authority's stated purposes, including but not limited to: (i) negotiate and execute agreements/documents with the Authority and/or third parties to support the Authority's purpose; (ii) expend Corporation funds and utilize Corporation employees/agents to support the Authority's purpose; and (iii) take any other necessary or related steps and actions for the Corporation to support the Authority's purpose.

Dated: July 17, 2024		
	Secretary	
Motion made by:		
Seconded by:		
Vote:		

#### 1.1 Purpose

The purpose of the AACA Cultural and Arts Grant Program is to support the AACA mission of increasing economic development/activity within Albany County by fostering the development of arts and cultural initiatives that enhance community engagement, promote cultural diversity, and stimulate economic growth. It has been repeatedly proven that one of the major pillars which support a region's economic development is having an active and healthy cultural/artistic environment. This Grant Program aims to provide financial assistance to artists, cultural organizations, and community groups to implement projects which have a significant impact on the sustaining and adding to Albany County's cultural landscape.

#### 1.2 Vision

ACCA's vision is to support economic development in Albany County by creating a vibrant and inclusive cultural environment where arts and culture thrive, reflecting the diversity and richness of our community.

#### 2. Program Objectives

- 1. Support Artistic Excellence: Encourage and support high-quality artistic endeavors across all disciplines.
- 2. Promote Cultural Diversity: Foster projects that celebrate and reflect the diversity of our community.
- 3. Enhance Community Engagement: Support initiatives that engage the community and make arts and culture accessible to all.
- 4. Stimulate Economic Growth: Promote projects that contribute to the economic vitality of the community through arts and culture.

#### 3.1 Eligible Applicants

- 1. Individual artists and creators.
- 2. Nonprofit cultural organizations.
- 3. Community groups and collectives.
- 4. Educational institutions with a focus on arts and culture.

#### 3.2 Eligible Projects

1. Public art installations.

- 2. Cultural festivals and events.
- 3. Educational workshops and programs.
- 4. Artist residencies and fellowships.
- 5. Preservation and promotion of cultural heritage.

#### 4.1 Funding Amounts

Grants will be awarded by ACCA in varying amounts based on the scope and impact of the project. Typical grant amounts may range from \$50,000 to \$500,000.

#### 4.2 Use of Funds

Grant funds may be used for project-related expenses, including but not limited to:

- 1. Artist fees and stipends.
- 2. Materials and supplies.
- 3. Marketing and promotional costs.
- 4. Venue rental and equipment.
- 5. Administrative expenses directly related to the project.

#### 5.1 Application Submission

Applications must be submitted through our online portal by the specified deadline. The application should include:

- 1. Project proposal outlining objectives, activities, and expected outcomes.
- 2. Detailed budget.
- 3. Timeline of activities.
- 4. Letters of support or collaboration, if applicable.
- 5. Portfolio or examples of previous work.

#### **5.2 Review Process**

- 1. Initial Screening: Applications will be screened for completeness and eligibility by ACCA.
- 2. Evaluation: AACA will evaluate applications based on criteria such as artistic merit, community impact, feasibility, and alignment with program objectives. AACA will use a panel of individuals experienced in the art/cultural community ("Advisory Council") to assist AACA with its evaluation of the applications and to provide AACA with scoring recommendations as to such grant applications.
- 3. Decision: Grant recipients will normally be notified within 8-12 weeks of the application deadline.

#### 6.1 Project Evaluation

Grant recipients are required to submit a mid-term and final report detailing the progress and outcomes of the project. Reports should include:

- 1. A summary of activities and achievements.
- 2. A financial report detailing the use of funds (to include proof of fund expenditure, receipts, etc. as determined by AACA)
- 3. Documentation of the project (photos, videos, testimonials).
- 4. Evaluation of the impact on the community and lessons learned.
- 5. Other documentation as determined by AACA

#### 6.2 Impact Assessment

An annual review of the Grant Program will be conducted to assess its overall impact on the arts and cultural landscape and its effect on economic activities, including feedback from grant recipients and community stakeholders.

#### 7.1 Program Oversight

The Cultural and Arts Grant Program will be administered by the AACA and funding determinations will be made by AACA's Board of Directors. The AACA Board will appoint an Advisory Council to advise the Board. The Advisory Council will include representatives from the arts community, cultural organizations, and funding partners.

#### 7.2 Advisory Council will provide input to AACA on:

- 1. External fundraising
- 2. Program guidelines
- 3. Grant applications
- 4. Monitoring funded projects
- 5. Compliance with grant terms.
- 6. Recommendations for program improvement.

#### 8.1 Program Promotion

The grant program will be promoted through various channels, including social media, community newsletters, and partnerships with local arts organizations.

#### 8.2 Information Sessions

Regular information sessions will be held to guide potential applicants through the application process and provide tips for successful proposals.

#### 9. Conclusion

The AACA Cultural and Arts Grant Program is dedicated to enriching the community through the support of diverse and impactful arts and cultural projects. By providing financial assistance and resources, we aim to empower artists and cultural organizations to bring their visions to life and make a lasting difference in our community.

# RESOLUTION 2024-07-02 OF THE ADVANCE ALBANY COUNTY ALLIANCE LOCAL DEVELOPMENT AUTHORITY

WHEREAS, the mission of the Advance Albany County Alliance Local Development Corporation (the "Corporation") is to foster economic development, promote increased employment and the development and retention of economic activity in Albany County, and to otherwise act in the public interest; and

**WHEREAS**, the Corporation, in support of its stated mission desires to create and implement an "Advance Albany County Alliance Cultural and Arts Grant Program" (the "Grant Program"); and

**WHEREAS**, the powers of the Corporation include (but are not limited to) "to . . . make grants and loans and to execute any and all documents necessary in connection therewith";

**WHEREAS**, establishing and administering the Grant Program is in direct support of the Corporation's mission in that such activity shall foster economic development, promote increased employment and the development and support the retention of economic activity in Albany County

**NOW, THEREFORE BE IT RESOLVED**, that the Corporation is authorized to establish, administer and manage the Grant Program (pursuant to the attached Charter), and the Chief Executive Officer is authorized to execute any and all related or necessary documentation to effect the purpose of this resolution.

Dated. 341y 17, 2021		
	Secretary	
Motion made by:		
Seconded by:		
Vote:		

Dated: July 17, 2024