

Form **990**

Department of the Treasury  
Internal Revenue Service

# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2018**

Open to Public Inspection

**A** For the 2018 calendar year, or tax year beginning **JUL 1, 2018** and ending **JUN 30, 2019**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>VANDERHEYDEN HALL, INC.</b>		<b>D</b> Employer identification number <b>14-1338575</b>
	Doing business as		<b>E</b> Telephone number <b>(518) 283-6500</b>
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	<b>G</b> Gross receipts \$ <b>21,285,293.</b>
	P.O. BOX 219		<b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c)</b> Group exemption number ▶
City or town, state or province, country, and ZIP or foreign postal code <b>WYNANTSKILL, NY 12198</b>		<b>F</b> Name and address of principal officer: <b>KAREN CARPENTER-PALUMBO</b> <b>SAME AS C ABOVE</b>	
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
<b>J</b> Website: ▶ <b>WWW.VANDERHEYDENHALL.ORG</b>			
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			<b>L</b> Year of formation: <b>1956</b> <b>M</b> State of legal domicile: <b>NY</b>

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>THE PRIMARY EXEMPT PURPOSE OF THE AGENCY IS TO PROVIDE EDUCATION AND RESIDENTIAL SERVICES TO</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>13</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>13</b>
	<b>5</b> Total number of individuals employed in calendar year 2018 (Part V, line 2a)	<b>5</b>	<b>306</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>63</b>
	<b>7 a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
	<b>b</b> Net unrelated business taxable income from Form 990-T, line 38	<b>7b</b>	<b>0.</b>
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	<b>9</b> Program service revenue (Part VIII, line 2g)	443,514.	358,363.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	20,037,826.	20,817,880.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	33,778.	37,704.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	60,108.	42,492.
		20,575,226.	21,256,439.
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	15,443,945.	15,934,589.
	<b>16 a</b> Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>109,906.</b>		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	4,616,773.	4,880,506.
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	20,060,718.	20,815,095.	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	514,508.	441,344.	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	<b>21</b> Total liabilities (Part X, line 26)	7,218,665.	7,191,298.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	10,191,754.	10,333,221.
	-2,973,089.	-3,141,923.	

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of officer <i>Karen Carpenter-Palumbo</i>	Date <b>6/16/20</b>
	Type or print name and title <b>KAREN CARPENTER-PALUMBO, PRESIDENT AND CEO</b>	

<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>KARL F. NEWTON, CPA</b>	Preparer's signature <i>Karl F. Newton</i>	Date <b>06/10/20</b>	Check <input type="checkbox"/> if self-employed	PTIN <b>P00708967</b>
	Firm's name ▶ <b>MARVIN AND COMPANY, P.C.</b>	Firm's EIN ▶ <b>14-1567343</b>		Phone no. <b>518-785-0134</b>	
Firm's address ▶ <b>11 BRITISH AMERICAN BLVD.</b>		<b>LATHAM, NY 12110-1405</b>			

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: OUR MISSION: EMPOWERING YOUTH, INDIVIDUALS AND FAMILIES TO BUILD BRIGHTER FUTURES. AT VANDERHEYDEN, OUR CARING AND PROFESSIONAL STAFF WORKS HARD TO PROVIDE INDIVIDUALS WITH THE SKILLS NECESSARY TO ENHANCE SELF-ESTEEM AND SELF-CONFIDENCE, AND TO ENGAGE IN EXPERIENCES THAT

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

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

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

4a (Code: ) (Expenses \$ 4,605,265. including grants of \$ ) (Revenue \$ 4,670,231.) EDUCATION - FOSTERS COOPERATIVE LEARNING AND INDIVIDUAL INSTRUCTION TO PREPARE STUDENTS FOR COMMUNITY SCHOOLS. IT IS A REGISTERED SECONDARY SERVING APPROXIMATELY 90 STUDENTS.

4b (Code: ) (Expenses \$ 5,348,372. including grants of \$ ) (Revenue \$ 6,415,839.) RESIDENTIAL - RESIDENTIAL PROGRAMS PROVIDES COMMUNITY LIKE SETTING FOR EMOTIONALLY DISTURBED AND ABUSED CHILDREN AND YOUNG ADULTS THROUGH A SMALL GROUP SETTING WITH A NEED OF SUPERVISION. APPROXIMATELY 71 CLIENTS SERVED.

4c (Code: ) (Expenses \$ 4,776,255. including grants of \$ ) (Revenue \$ 5,173,120.) COMMUNITY RESIDENCE - RESIDENTIAL PROGRAM PROVIDES COMMUNITY LIKE SETTING FOR MENTALLY RETARDED AND DEVELOPMENTALLY DISABLED THROUGH A SMALL GROUP SETTING WITH MINIMUM SUPERVISION. APPROXIMATELY 61 CLIENTS SERVED.

4d Other program services (Describe in Schedule O.) (Expenses \$ 3,870,737. including grants of \$ ) (Revenue \$ 4,574,637.)

4e Total program service expenses 18,600,629.

**Part IV Checklist of Required Schedules**

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

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was 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	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

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

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a	306	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note.</i> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	<b>Sponsoring organizations maintaining donor advised funds.</b>		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	<b>Section 501(c)(7) organizations.</b> Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	<b>Section 501(c)(12) organizations.</b> Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
a	Is the organization licensed to issue qualified health plans in more than one state? <i>Note.</i> See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X

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

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

**Section A. Governing Body and Management**

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
	1a		13
b	Enter the number of voting members included in line 1a, above, who are independent		13
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosure**

- 17 List the states with which a copy of this Form 990 is required to be filed **NY**
- 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website  Another's website  Upon request  Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records **KAREN CARPENTER-PALUMBO - 518-283-6500**  
**P.O. BOX 219, WYNANTSKILL, NY 12198**

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BETHANY R. SMITH BOARD MEMBER	2.00	X						0.	0.	0.
(2) DEIRDRE BRODIE BOARD MEMBER	2.00	X						0.	0.	0.
(3) ELAINE PHELAN BOARD MEMBER	2.00	X						0.	0.	0.
(4) JAMES FARANDA TREASURER	2.00	X		X				0.	0.	0.
(5) JAMES STONE BOARD PRESIDENT	2.00	X		X				0.	0.	0.
(6) JOHN N. MORLEY, MD BOARD MEMBER	2.00	X						0.	0.	0.
(7) JOHN TAURIELLO VICE PRESIDENT	2.00	X		X				0.	0.	0.
(8) LAURA L. DILLON SECRETARY	2.00	X		X				0.	0.	0.
(9) MELISSA CLEMENT BOARD MEMBER	2.00	X						0.	0.	0.
(10) MICHAEL V. BARRETT BOARD MEMBER	2.00	X						0.	0.	0.
(11) PAUL F. MACIELAK, ESQ. BOARD MEMBER	2.00	X						0.	0.	0.
(12) WILLIAM KOESTER BOARD MEMBER	2.00	X						0.	0.	0.
(13) PATRICK HUGHES PAST PRESIDENT	2.00	X						0.	0.	0.
(14) KAREN CARPENTER PALUMBO PRESIDENT & CEO	40.00			X				195,506.	0.	16,838.
(15) LISA NAPPI PRINCIPAL	40.00			X				96,230.	0.	21,302.
(16) LORI EASON VICE PRESIDENT AND CAO	40.00			X				109,538.	0.	21,220.
(17) MARY BETH CARMAN VICE PRESIDENT	40.00			X				101,334.	0.	18,741.

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) MAURA PSOINOS VICE PRESIDENT OF COMMUNIT	40.00			X				97,035.	0.	1,294.
<b>1b Sub-total</b>								599,643.	0.	79,395.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								599,643.	0.	79,395.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 3

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
ENTERPRISE FM TRUST INC. PO BOX 8000089, KANSAS CITY, MO 64180	FLEET MANAGEMENT	233,503.
SYSCO FOODS ONE LIEBICH LANE, HALFMOON, NY 12065	FOOD DISTRIBUTOR	210,531.
OMNICARE INC. PO BOX 78000, DETROIT, MI 48278	PHARMACY	178,694.
BST & CO. CPA'S, LLP 26 COMPUTER DRIVE, ALBANY, NY 12205	ACCOUNTING CONSULTANTS	166,783.
LONG ENERGY 2880 CURRY ROAD, SCHENECTADY, NY 12303	HEAT/UTILITIES	144,589.
<b>2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization</b>		<b>▶ 5</b>



**Part VIII Statement of Revenue**

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e	189,969.			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	168,394.			
	g Noncash contributions included in lines 1a-1f: \$					
	<b>h Total. Add lines 1a-1f</b>		<b>358,363.</b>			
Program Service Revenue	2 a GOVERNMENT AGENCIES	Business Code 900099	13,930,444.	13,930,444.		
	b MEDICAID	900099	6,742,671.	6,742,671.		
	c MISCELLANEOUS	900099	144,765.	144,765.		
	d					
	e					
	f All other program service revenue					
	<b>g Total. Add lines 2a-2f</b>		<b>20,817,880.</b>			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		37,704.		37,704.	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross rents	(i) Real				
		(ii) Personal				
		b Less: rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		b Less: cost or other basis and sales expenses				
		c Gain or (loss)				
	d Net gain or (loss)					
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a	71,346.			
		b Less: direct expenses	b	28,854.		
<b>c Net income or (loss) from fundraising events</b>			<b>42,492.</b>		<b>42,492.</b>	
9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b				
	<b>c Net income or (loss) from gaming activities</b>					
10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b				
	<b>c Net income or (loss) from sales of inventory</b>					
<b>Miscellaneous Revenue</b>		<b>Business Code</b>				
11 a						
	b					
	c					
	d All other revenue					
<b>e Total. Add lines 11a-11d</b>						
<b>12 Total revenue. See instructions</b>		<b>21,256,439.</b>	<b>20,817,880.</b>	<b>0.</b>	<b>80,196.</b>	

**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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	720,415.		664,897.	55,518.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	12,375,312.	11,809,999.	565,313.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	55,490.		55,490.	
9 Other employee benefits	1,786,958.	1,717,225.	67,757.	1,976.
10 Payroll taxes	996,414.	903,465.	89,119.	3,830.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion	17,731.	12,461.	4,323.	947.
13 Office expenses	45,581.	22,811.	22,586.	184.
14 Information technology				
15 Royalties				
16 Occupancy	380,482.	347,017.	32,727.	738.
17 Travel	165,648.	156,679.	8,860.	109.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	34,175.	18,338.	15,837.	
20 Interest	323,006.	296,444.	26,562.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	634,898.	609,562.	25,023.	313.
23 Insurance	267,656.	255,891.	10,096.	1,669.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <b>EQUIPMENT RENTAL</b>	513,610.	480,219.	32,602.	789.
b <b>PLANT AND EQUIPMENT MAINTENANCE</b>	469,781.	381,995.	69,460.	18,326.
c <b>FOOD</b>	440,927.	426,930.	13,026.	971.
d <b>SUPPLIES</b>	402,072.	363,719.	26,640.	11,713.
e All other expenses	1,184,939.	797,874.	374,242.	12,823.
<b>25 Total functional expenses.</b> Add lines 1 through 24e	<b>20,815,095.</b>	<b>18,600,629.</b>	<b>2,104,560.</b>	<b>109,906.</b>
26 <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here  if following SOP 98-2 (ASC 958-720)

**Part X** Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing .....		1	
	2	Savings and temporary cash investments .....	238,168.	2	361,727.
	3	Pledges and grants receivable, net .....	20,000.	3	20,000.
	4	Accounts receivable, net .....	2,532,322.	4	2,810,275.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L .....		6	
	7	Notes and loans receivable, net .....		7	
	8	Inventories for sale or use .....		8	
	9	Prepaid expenses and deferred charges .....	117,976.	9	155,190.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	10a 18,424,291.		
	b	Less: accumulated depreciation .....	10b 16,136,892.		
	11	Investments - publicly traded securities .....		11	
	12	Investments - other securities. See Part IV, line 11 .....	1,304,528.	12	1,373,080.
	13	Investments - program-related. See Part IV, line 11 .....		13	
	14	Intangible assets .....		14	
	15	Other assets. See Part IV, line 11 .....	203,627.	15	183,627.
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	7,218,665.	16	7,191,298.	
Liabilities	17	Accounts payable and accrued expenses .....	2,193,891.	17	2,025,107.
	18	Grants payable .....		18	
	19	Deferred revenue .....	541,950.	19	271,481.
	20	Tax-exempt bond liabilities .....		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .....		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		22	
	23	Secured mortgages and notes payable to unrelated third parties .....	5,949,309.	23	5,888,260.
	24	Unsecured notes and loans payable to unrelated third parties .....		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	1,506,604.	25	2,148,373.
	26	<b>Total liabilities.</b> Add lines 17 through 25 .....	10,191,754.	26	10,333,221.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets .....	-3,146,863.	27	-3,374,750.
	28	Temporarily restricted net assets .....	173,774.	28	232,827.
	29	Permanently restricted net assets .....		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds .....		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund .....		31	
	32	Retained earnings, endowment, accumulated income, or other funds .....		32	
33	<b>Total net assets or fund balances</b> .....	-2,973,089.	33	-3,141,923.	
34	<b>Total liabilities and net assets/fund balances</b> .....	7,218,665.	34	7,191,298.	

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	21,256,439.
2	Total expenses (must equal Part IX, column (A), line 25)	2	20,815,095.
3	Revenue less expenses. Subtract line 2 from line 1	3	441,344.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	-2,973,089.
5	Net unrealized gains (losses) on investments	5	42,298.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-652,476.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	-3,141,923.

**Part XII Financial Statements and Reporting**

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2b	Were the organization's financial statements audited by an independent accountant?	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:			
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

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

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2018**  
Open to Public  
Inspection

Name of the organization  
**VANDERHEYDEN HALL, INC.**

Employer identification number  
**14-1338575**

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

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

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

f Enter the number of supported organizations \_\_\_\_\_

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

**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.)

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	165,805.	219,112.	281,993.	443,513.	342,416.	1452839.
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 .....	165,805.	219,112.	281,993.	443,513.	342,416.	1452839.
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.						1452839.

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4 .....	165,805.	219,112.	281,993.	443,513.	342,416.	1452839.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	17,052.	36,124.	34,929.	33,778.	37,704.	159,587.
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.) .....	169,900.	194,756.	260,526.	162,822.	187,257.	975,261.
11 Total support. Add lines 7 through 10 .....						2587687.
12 Gross receipts from related activities, etc. (see instructions) .....					12	18,331,585.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here .....						<input type="checkbox"/>

Section C. Computation of Public Support Percentage			
14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) .....	14	56.14	%
15 Public support percentage from 2017 Schedule A, Part II, line 14 .....	15	56.47	%
16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization .....			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....			<input type="checkbox"/>

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
3 Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
5 The value of services or facilities furnished by a governmental unit to the organization without charge .....						
6 Total. Add lines 1 through 5 .....						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
c Add lines 7a and 7b .....						
8 Public support. (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6 .....						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
c Add lines 10a and 10b .....						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) .....	15	%
16 Public support percentage from 2017 Schedule A, Part III, line 15 .....	16	%

**Section D. Computation of Investment Income Percentage**

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

19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

- 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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*
  - 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 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*
- 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 in 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 in 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 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
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		



**Part IV Supporting Organizations** (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	
b A family member of a person described in (a) above?	11b	
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	

**Section B. Type I Supporting Organizations**

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	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	

**Section C. Type II Supporting Organizations**

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? 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	

**Section D. All Type III Supporting Organizations**

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	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 in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3	

**Section E. Type III Functionally Integrated Supporting Organizations**

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 Activities Test. Answer (a) and (b) below.		Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? 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 in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? 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 (a) and (b) below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

7  Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

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

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

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

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

OTHER INCOME

2014 AMOUNT: \$ 169,900.

2015 AMOUNT: \$ 194,756.

2016 AMOUNT: \$ 260,526.

2017 AMOUNT: \$ 162,822.

2018 AMOUNT: \$ 187,257.

**Schedule B**

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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

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

OMB No. 1545-0047

**2018**

Name of the organization

VANDERHEYDEN HALL, INC.

Employer identification number

14-1338575

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

**General Rule**

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

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

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

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

Name of organization <b>VANDERHEYDEN HALL, INC.</b>	Employer identification number <b>14-1338575</b>
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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	THE ROBINSON FAMILY FOUNDATION 122 PERALTA AVE MILL VALLEY, CA 94941	\$ 12,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	US DEPARTMENT OF EDUCATION- TITLE I 400 MARYLAND AVE, SE WASHINGTON, DC 20202	\$ 62,067.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	US DEPARTMENT OF EDUCATION- IDEA 89 WASHINGTON AVE ALBANY, NY 12234	\$ 100,900.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	INSURANCE INDUSTRY CHARITABLE FOUNDATION 1999 AVENUE OF THE STARS, SUITE 1100 LOS ANGELES, CA 90067	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	CAP COM CARES FOUNDATION 4 WINNERS CIRCLE ALBANY, NY 12205	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	CORNELL UNIVERSITY DAKE FOUNDATION PO BOX 435 SARATOGA SPRINGS, NY 12866	\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>VANDERHEYDEN HALL, INC.</b>	Employer identification number <b>14-1338575</b>
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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
7	US DEPARTMENT OF HEALTH AND HUMAN SERVICES - OMH  200 INDEPENDENCE AVENUE, S.W.  WASHINGTON, DC 20201	\$ 27,002.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>VANDERHEYDEN HALL, INC.</b>	Employer identification number  <b>14-1338575</b>
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**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	



Name of organization  <b>VANDERHEYDEN HALL, INC.</b>	Employer identification number  <b>14-1338575</b>
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

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

**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2018**  
Open to Public Inspection

Name of the organization **VANDERHEYDEN HALL, INC.** Employer identification number **14-1338575**

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <input type="checkbox"/> Yes <input type="checkbox"/> No		

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).  
 Preservation of land for public use (e.g., recreation or education)  Preservation of a historically important land area  
 Protection of natural habitat  Preservation of a certified historic structure  
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Yes  No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?  Yes  No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not 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, in Part XIII, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116 (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 ..... ▶ \$ \_\_\_\_\_
- (ii) Assets included in Form 990, Part X ..... ▶ \$ \_\_\_\_\_
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
- a Revenue included on Form 990, Part VIII, line 1 ..... ▶ \$ \_\_\_\_\_
- b Assets included in Form 990, Part X ..... ▶ \$ \_\_\_\_\_

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange programs
  - e  Other \_\_\_\_\_
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,304,528.	1,211,094.	1,090,603.	1,087,116.	1,047,103.
b Contributions					
c Net investment earnings, gains, and losses	68,552.	93,434.	120,491.	3,487.	40,013.
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	1,373,080.	1,304,528.	1,211,094.	1,090,603.	1,087,116.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment  100.00 %
  - b Permanent endowment  %
  - c Temporarily restricted endowment  %
- The percentages on lines 2a, 2b, and 2c should equal 100%.

- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |  | Yes | No |
|--|-----|----|
| (i) unrelated organizations  |     | X  |
| (ii) related organizations   |     | X  |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? |     |    |

4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		585,107.		585,107.
b Buildings		16,110,820.	14,642,242.	1,468,578.
c Leasehold improvements				
d Equipment		1,664,409.	1,430,695.	233,714.
e Other		63,955.	63,955.	0.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				2,287,399.

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) DEBT SECURITIES	387,967.	END-OF-YEAR MARKET VALUE
(B) EQUITY FUNDS	961,646.	END-OF-YEAR MARKET VALUE
(C) MONEY MARKET FUND	23,467.	END-OF-YEAR MARKET VALUE
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	<b>1,373,080.</b>	

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) PENSION FUND LIABILITY	2,148,373.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.)	<b>2,148,373.</b>

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

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

1	Total revenue, gains, and other support per audited financial statements		1	21,327,591.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	42,298.	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	28,854.	
e	Add lines 2a through 2d	2e		71,152.
3	Subtract line 2e from line 1	3		21,256,439.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5		21,256,439.

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

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

1	Total expenses and losses per audited financial statements		1	20,843,949.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	28,854.	
e	Add lines 2a through 2d	2e		28,854.
3	Subtract line 2e from line 1	3		20,815,095.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5		20,815,095.

**Part XIII Supplemental Information.**

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

**PART X, LINE 2:**

THE AGENCY IS EXEMPT FROM FEDERAL INCOME TAXES, AS A NOT-FOR-PROFIT CORPORATION UNDER TAX SECTION 501(C)(3) AS DETERMINED BY THE INTERNAL REVENUE SERVICE. UNDER ACCOUNTING STANDARDS CODIFICATION (ASC) SECTION 740, THE TAX STATUS OF TAX-EXEMPT ENTITIES IS AN UNCERTAIN TAX POSITION SINCE EVENTS COULD POTENTIALLY OCCUR THAT JEOPARDIZE TAX-EXEMPT STATUS. MANAGEMENT OF THE AGENCY IS NOT AWARE OF ANY EVENTS THAT COULD JEOPARDIZE TAX-EXEMPT STATUS. THEREFORE NO LIABILITY OR PROVISION FOR INCOME TAX HAS BEEN REFLECTED IN THE FINANCIAL STATEMENTS.

**PART XI, LINE 2D - OTHER ADJUSTMENTS:**

FUND RAISING EXPENSE 28,854.

**Part XIII** Supplemental Information *(continued)*

PART XII, LINE 2D - OTHER ADJUSTMENTS:

FUND RAISING EXPENSE 28,854.



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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		185TH CELEBRATION	FALL FESTIVAL	NONE	
		(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	70,041.	1,305.	71,346.
	2	Less: Contributions			
	3	Gross income (line 1 minus line 2)	70,041.	1,305.	71,346.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages	4,708.	1,033.	5,741.
	8	Entertainment			
	9	Other direct expenses	19,406.	3,707.	23,113.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			28,854.
	11	Net income summary. Subtract line 10 from line 3, column (d)			42,492.

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

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

9 Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_  
 a Is the organization licensed to conduct gaming activities in each of these states?  Yes  No  
 b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?  Yes  No  
 b If "Yes," explain: \_\_\_\_\_



- 11 Does the organization conduct gaming activities with nonmembers?  Yes  No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13 Indicate the percentage of gaming activity conducted in:
- |                               |     |   |
|-------------------------------|-----|---|
| a The organization's facility | 13a | % |
| b An outside facility         | 13b | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No
- b If "Yes," enter the amount of gaming revenue received by the organization ► \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ► \$ \_\_\_\_\_
- c If "Yes," enter name and address of the third party:

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

16 Gaming manager information:

Name ► \_\_\_\_\_

Gaming manager compensation ► \$ \_\_\_\_\_

Description of services provided ► \_\_\_\_\_

- Director/officer       Employee       Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ \_\_\_\_\_

**Part IV Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Part IV** Supplemental Information (continued)

Lined area for supplemental information.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees  
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.  
 ▶ Attach to Form 990.  
 ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2018**  
Open to Public Inspection

Name of the organization

VANDERHEYDEN HALL, INC.

Employer identification number

14-1338575

**Part I Questions Regarding Compensation**

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use   |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence   |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees     |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

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

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a Receive a severance payment or change-of-control payment?
- b Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a The organization?
- b Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a The organization?
- b Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

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

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) KAREN CARPENTER PALUMBO PRESIDENT & CEO	(i)	195,506.	0.	8,691.	8,147.	212,344.	0.
	(ii)	0.	0.	0.	0.	0.	0.
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
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	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Blank lines for supplemental information.

SCHEDULE O  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Name of the organization

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2018**

Open to Public  
Inspection

VANDERHEYDEN HALL, INC.

Employer identification number  
14-1338575

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

EMOTIONALLY DISTURBED AND ABUSED CHILDREN AND ADOLESCENTS AND  
RESIDENTIAL SERVICES TO THE DEVELOPMENTALLY DISABLED.

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

LEAD TO PERSONAL GROWTH AND TO LIVE HEALTHY AND PRODUCTIVE LIVES.

OUR VISION: TO CONTINUE THE WORK OF PROVIDING LIFE-CHANGING CARE TO THE  
YOUTH, INDIVIDUALS AND FAMILIES WE SERVE FOR ANOTHER 180 YEARS.

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

GROUP HOMES - PROVIDES A HOME LIKE ENVIRONMENT TO MENTALLY DISTURBED  
CHILDREN AND ADOLESCENTS, INCLUDING ROOM, BOARD AND A THERAPEUTIC  
MILIEU. APPROXIMATELY 40 CLIENTS SERVED.

EXPENSES \$ 1,704,755. INCLUDING GRANTS OF \$ 0. REVENUE \$ 1,806,360.

INDEPENDENT LIVING

EXPENSES \$ 395,792. INCLUDING GRANTS OF \$ 0. REVENUE \$ 418,033.

COMMUNITY SERVICES

EXPENSES \$ 781,813. INCLUDING GRANTS OF \$ 0. REVENUE \$ 983,713.

MEDICAID

EXPENSES \$ 988,377. INCLUDING GRANTS OF \$ 0. REVENUE \$ 1,315,586.

DEVELOPEMENT FUND

EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 50,945.

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

Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization

VANDERHEYDEN HALL, INC.

Employer identification number  
14-1338575

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

A COPY OF FORM 990 IS PRESENTED TO THE BOARD OF DIRECTORS PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

THE CONFLICT OF INTEREST POLICY IS MONITORED AND REVIEWED ANNUALLY.

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

THE BOARD USED SALARY INFORMATION FROM OTHER SIMILAR ORGANIZATIONS,  
COMPENSATION WAS REVIEWED AND APPROVED BY THE EXECUTIVE COMMITTEE AND IT IS  
PURSUANT TO AN EMPLOYMENT CONTRACT.

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

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC UPON  
REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

EFFECT OF ACTUARIAL GAINS -652,476.

FORM 990, PART XII, LINE 2C:

THE ORGANIZATION HAS A COMMITTEE THAT OVERSEES THE FINANCIAL STATEMENT  
AUDIT AND THE SELECTION OF THE INDEPENDENT AUDITOR. THIS PROCESS HAS  
NOT CHANGED FROM PRIOR YEAR.

**SCHEDULE R**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.  
▶ Attach to Form 990.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2018**

Open to Public  
Inspection

Name of the organization

**VANDERHEYDEN HALL, INC.**

Employer identification number  
**14-1338575**

**Part I Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

**Part II Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
VANDERHEYDEN FOUNDATION - 36-4570855 P.O. BOX 219 WYANTSKILL, NY 12198	SUPPORTS CHARITABLE ACTIVITIES FOR THE BENEFIT OF VANDERHEYDEN HALL, INC.	NEW YORK	501(C)(3)	11	N/A		<input checked="" type="checkbox"/>

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

Schedule R (Form 990) 2018



**Part III Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
CHUNY, LLC - 47-2874019 60 ACADEMY RD ALBANY, NY 12208	CHILDRENS' HEALTH HOME	NY	N/A	UNRELATED	-17,002.	222,002.		X	N/A	X		5.30%

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts III-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		<input checked="" type="checkbox"/>
b Gift, grant, or capital contribution to related organization(s)		<input checked="" type="checkbox"/>
c Gift, grant, or capital contribution from related organization(s)		<input checked="" type="checkbox"/>
d Loans or loan guarantees to or for related organization(s)		<input checked="" type="checkbox"/>
e Loans or loan guarantees by related organization(s)		<input checked="" type="checkbox"/>
f Dividends from related organization(s)		<input checked="" type="checkbox"/>
g Sale of assets to related organization(s)		<input checked="" type="checkbox"/>
h Purchase of assets from related organization(s)		<input checked="" type="checkbox"/>
i Exchange of assets with related organization(s)		<input checked="" type="checkbox"/>
j Lease of facilities, equipment, or other assets to related organization(s)		<input checked="" type="checkbox"/>
k Lease of facilities, equipment, or other assets from related organization(s)		<input checked="" type="checkbox"/>
l Performance of services or membership or fundraising solicitations for related organization(s)		<input checked="" type="checkbox"/>
m Performance of services or membership or fundraising solicitations by related organization(s)		<input checked="" type="checkbox"/>
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		<input checked="" type="checkbox"/>
o Sharing of paid employees with related organization(s)		<input checked="" type="checkbox"/>
p Reimbursement paid to related organization(s) for expenses		<input checked="" type="checkbox"/>
q Reimbursement paid by related organization(s) for expenses		<input checked="" type="checkbox"/>
r Other transfer of cash or property to related organization(s)		<input checked="" type="checkbox"/>
s Other transfer of cash or property from related organization(s)		<input checked="" type="checkbox"/>

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				





Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

For calendar year 2018 or other tax year beginning JUL 1, 2018, and ending JUN 30, 2019.

2018

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Form fields A through E: Check box if address changed, Exempt under section 501(c)(3), Name of organization (VANDERHEYDEN HALL, INC.), Employer identification number (14-1338575), etc.

Form fields C through G: Book value of all assets at end of year (7,191,298), Group exemption number, Check organization type (501(c) corporation), etc.

Form fields H through I: Enter the number of the organization's unrelated trades or businesses (1), During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? (No)

Form field J: The books are in care of (KAREN CARPENTER - PALUMBO), Telephone number (518-283-6500)

Table with 4 columns: (A) Income, (B) Expenses, (C) Net, and an unlabeled column. Rows 1a-13: Unrelated Trade or Business Income. Total income is 0.

Table with 4 columns: (A) Income, (B) Expenses, (C) Net, and an unlabeled column. Rows 14-32: Deductions Not Taken Elsewhere. Total deductions are 0.

Part III Total Unrelated Business Taxable Income			
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	0.
34	Amounts paid for disallowed fringes	34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	35	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of lines 33 and 34	36	
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	1,000.
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36, enter the smaller of zero or line 36	38	0.

Part IV Tax Computation			
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	39	0.
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	40	
41	Proxy tax. See instructions	41	
42	Alternative minimum tax (trusts only)	42	
43	Tax on Noncompliant Facility Income. See instructions	43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44	0.

Part V Tax and Payments			
45a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	45a	
b	Other credits (see instructions)	45b	
c	General business credit. Attach Form 3800	45c	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	45d	
e	Total credits. Add lines 45a through 45d	45e	
46	Subtract line 45e from line 44	46	0.
47	Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	47	
48	Total tax. Add lines 46 and 47 (see instructions)	48	0.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	0.
50a	Payments: A 2017 overpayment credited to 2018	50a	
b	2018 estimated tax payments	50b	800.
c	Tax deposited with Form 8868	50c	11.
d	Foreign organizations: Tax paid or withheld at source (see instructions)	50d	
e	Backup withholding (see instructions)	50e	
f	Credit for small employer health insurance premiums (attach Form 8941)	50f	
g	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other	50g	
51	Total payments. Add lines 50a through 50g	51	811.
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	52	
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53	
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54	811.
55	Enter the amount of line 54 you want: Credited to 2019 estimated tax <input type="checkbox"/> Refunded <input checked="" type="checkbox"/>	55	811.

Part VI Statements Regarding Certain Activities and Other Information (see instructions)		Yes	No
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here		X
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
58	Enter the amount of tax-exempt interest received or accrued during the tax year \$		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

**Sign Here**  
 Signature of officer: *Karl F. Newton* Date: *6/16/20* Title: **PRESIDENT AND CEO**  
 May the IRS discuss this return with the preparer shown below (see instructions)?  Yes  No

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	KARL F. NEWTON, CPA	<i>Karl F. Newton</i>	06/10/20		P00708967
	Firm's name	Firm's EIN		Firm's address	
MARVIN AND COMPANY, P.C.	14-1567343	11 BRITISH AMERICAN BLVD.		LATHAM, NY 12110-1405	
				Phone no.	518-785-0134

**VANDERHEYDEN HALL, INC.**  
**FINANCIAL REPORT**  
**JUNE 30, 2019**

# VANDERHEYDEN HALL, INC.

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## INDEPENDENT AUDITOR'S REPORT

To the Board of Directors  
Vanderheyden Hall, Inc.

We have audited the accompanying financial statements of Vanderheyden Hall, Inc. (a nonprofit organization), which comprise the statements of financial position as of June 30, 2019 and 2018, and the related statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

### Management's Responsibility for the Financial Statements

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

### Auditor's Responsibility

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

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

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

### Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Vanderheyden Hall, Inc. as of June 30, 2019 and 2018, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

### **Effect of New Accounting Standard**

As discussed in Note 1, Vanderheyden Hall, Inc. adopted the Financial Accounting Standards Board's Accounting Standards Update ("ASU") 2016-14, *Not-for-Profits Entities (Topic 958) - Presentation of Financial Statements of Not-for-Profit Entities* as of and for the year ended June 30, 2019. The requirements of the ASU have been applied retrospectively to all periods presented. Our opinion is not modified with respect to this matter.

### **Report on Supplementary Information**

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplementary information on pages 22-23 is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

### **Report on Summarized Comparative Information**

We have previously audited Vanderheyden Hall, Inc.'s 2018 financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated November 30, 2018. In our opinion, the summarized comparative information presented herein as of and for the year ended June 30, 2018, is consistent, in all material respects, with the audited financial statements from which it has been derived.

*Marvin and Company, P.C.*

Latham, NY  
November 4, 2019

**VANDERHEYDEN HALL, INC.**  
**STATEMENTS OF FINANCIAL POSITION**  
**JUNE 30, 2019 AND 2018**

**ASSETS**

	<u>2019</u>	<u>2018</u>
<b>Current Assets</b>		
Cash and cash equivalents	\$ 252,036	\$ 155,490
Investments	1,373,080	1,304,528
Accounts receivable, net of allowance for doubtful accounts of \$75,256 and \$75,256		
Government	2,757,363	2,443,297
Other	52,912	89,025
Pledges receivable, current	20,000	20,000
Prepaid expenses	155,190	117,976
<b>Total Current Assets</b>	<b>4,610,581</b>	<b>4,130,316</b>
<b>Property, Plant and Equipment</b>		
Land and improvements	585,107	585,107
Buildings and improvements	16,110,820	16,063,217
Furniture, fixtures and equipment	1,664,409	1,608,099
Vehicles	63,955	63,955
<b>Total</b>	<b>18,424,291</b>	<b>18,320,378</b>
Less accumulated depreciation	16,136,892	15,518,334
<b>Net Property, Plant and Equipment</b>	<b>2,287,399</b>	<b>2,802,044</b>
<b>Other Assets</b>		
Pledges receivable, long term	40,000	60,000
Restricted cash	109,691	82,678
Investment in CHHUNY	25,000	25,000
Escrow	118,627	118,627
<b>Total Other Assets</b>	<b>293,318</b>	<b>286,305</b>
 <b>TOTAL ASSETS</b>	 <b>\$ 7,191,298</b>	 <b>\$ 7,218,665</b>

**VANDERHEYDEN HALL, INC.**  
**STATEMENTS OF FINANCIAL POSITION**  
**JUNE 30, 2019 AND 2018**

**LIABILITIES AND NET ASSETS (DEFICIT)**

	<u>2019</u>	<u>2018</u>
<b>Current Liabilities</b>		
Note payable - line of credit	\$ 907,251	\$ 738,886
Current installments of long-term debt	317,099	157,588
Accrued pension	75,000	-
Accounts payable	278,966	540,645
Accrued expenses	1,186,856	1,093,961
Deferred revenue	271,481	541,950
Total Current Liabilities	<u>3,036,653</u>	<u>3,073,030</u>
<b>Other Liabilities</b>		
Accrued pension, net of current	2,073,373	1,506,604
Accrued expenses	559,285	559,285
Long-term debt, net of current installments	4,663,910	5,052,835
Total Other Liabilities	<u>7,296,568</u>	<u>7,118,724</u>
 Total Liabilities	 <u>10,333,221</u>	 <u>10,191,754</u>
<b>Net Assets (Deficit)</b>		
Without donor restrictions	(1,226,377)	(1,640,259)
Pension fund liability	(2,148,373)	(1,506,604)
With donor restrictions	232,827	173,774
Total Net Assets (Deficit)	<u>(3,141,923)</u>	<u>(2,973,089)</u>
 <b>TOTAL LIABILITIES AND NET ASSETS (DEFICIT)</b>	 <b>\$ <u>7,191,298</u></b>	 <b>\$ <u>7,218,665</u></b>

See accompanying notes to financial statements.

**VANDERHEYDEN HALL, INC.**  
**STATEMENTS OF ACTIVITIES**  
**FOR THE YEARS ENDED JUNE 30, 2019 AND 2018**

	<u>2019</u>	<u>2018</u>
<b>Change in Unrestricted Net Assets</b>		
<b>Support and Revenue</b>		
Program	\$ 21,007,849	\$ 20,203,749
Nonprogram	244,742	335,065
Released from restrictions	15,947	-
Total Support and Revenue	<u>21,268,538</u>	<u>20,538,814</u>
<b>Expenses</b>		
Program Services		
Education	4,605,265	4,597,203
Residential	5,348,372	5,153,510
Community residence	4,776,255	4,770,644
Group homes	1,704,755	1,542,693
Independent living	395,792	313,621
Community services	781,813	527,469
Medicaid	988,377	1,038,101
Total Program Services	<u>18,600,629</u>	<u>17,943,241</u>
Supporting Services		
Development fund (fundraising)	138,760	129,893
Administration	2,104,560	2,013,406
Total Supporting Services	<u>2,243,320</u>	<u>2,143,299</u>
Total Expenses	<u>20,843,949</u>	<u>20,086,540</u>
<b>Change in Unrestricted Net Assets Before the Effect of Actuarial Gains (Losses)</b>	424,589	452,274
Effect of Actuarial Gains (Losses)	<u>(652,476)</u>	<u>(34,238)</u>
<b>Increase (Decrease) in Net Assets Without Donor Restrictions</b>	<u>(227,887)</u>	<u>418,036</u>
<b>Change in Net Assets With Donor Restrictions</b>		
Contributions and bequests	75,000	132,000
Amounts released from restrictions	<u>(15,947)</u>	<u>-</u>
Increase in Net Assets with Donor Restrictions	<u>59,053</u>	<u>132,000</u>
<b>Change in Net Assets</b>	(168,834)	550,036
Net Assets (Deficit), Beginning of Year	<u>(2,973,089)</u>	<u>(3,523,125)</u>
<b>Net Assets (Deficit), End of Year</b>	<u>\$ (3,141,923)</u>	<u>\$ (2,973,089)</u>

See accompanying notes to financial statements.

**VANDERHEYDEN HALL, INC.**  
**STATEMENTS OF FUNCTIONAL EXPENSES**  
**FOR THE YEAR ENDED JUNE 30, 2019**  
**WITH COMPARATIVE TOTALS FOR JUNE 30, 2018**

	<u>Education</u>	<u>Residential</u>	<u>Community Residence</u>	<u>Group Homes</u>	<u>Independent Living</u>
<b>Functional Expenses</b>					
Personal services	\$ 2,844,281	\$ 3,528,897	\$ 3,062,841	\$ 1,115,756	\$ 159,897
Fringe benefits	651,828	738,872	693,081	252,965	36,361
Transportation and worker's expense	8,453	49,331	51,239	11,735	7,335
Children's allowances	-	8,799	4,125	2,948	22,782
Children's activities	3,980	49,018	7,773	18,909	727
Related school expenses	-	-	17	69	3
Purchase of services	30,276	20,500	26,327	14,247	540
Purchase of health services	50,983	3,280	1,285	1,665	855
Food	113,882	120,845	125,203	43,644	20,807
Clothing	160	15,923	12,103	5,449	2,670
Bedding and linen	-	(16)	(25)	-	-
Program and household supplies	167,668	75,419	67,480	17,662	21,849
Medical supplies and prescriptions	-	28	8,564	33,509	499
Rent - equipment	16,932	12,757	11,164	4,770	1,764
- vehicles	10,437	36,718	53,396	17,901	2,240
- property	-	620	172,454	321	79,296
Utilities	75,208	105,245	78,491	31,774	1,224
Plant and equipment maintenance	92,203	89,618	78,984	25,552	4,922
Vehicle maintenance	5,621	18,350	34,182	6,450	966
Telephone	10,078	16,398	92,324	17,781	9,033
Postage	27	(96)	84	(44)	-
Dues, licenses and permits	8,187	24,888	9,217	8,632	5,096
Office supplies	6,475	5,004	2,436	1,311	340
Subscriptions and publications	252	35	25	13	-
Conference expense	4,133	3,890	5,629	1,553	550
Miscellaneous	842	3,966	457	122	49
Professional fees	-	-	-	-	-
Insurance	67,656	63,375	84,189	20,206	7,829
Interest and finance charges	29,757	187,657	44,649	27,908	6,473
Real estate taxes	13,075	14,603	3,702	9,719	105
Publicity and recruitment	2,406	4,014	3,991	1,350	647
Community Services	-	-	-	-	-
Medical transportation	-	-	-	-	-
Bad debt expense (recovery)	(11,763)	(1,562)	1,467	(127)	58
Depreciation	402,228	151,996	39,421	11,007	875
<b>Total Functional Expenses</b>	<u>4,605,265</u>	<u>5,348,372</u>	<u>4,776,255</u>	<u>1,704,765</u>	<u>395,792</u>
Allocation of Administration Expenses	489,305	604,117	588,935	199,493	36,733
<b>Total Functional Expenses</b>	<u>\$ 5,104,570</u>	<u>\$ 5,952,489</u>	<u>\$ 5,315,190</u>	<u>\$ 1,904,248</u>	<u>\$ 432,525</u>

**VANDERHEYDEN HALL, INC.**  
**STATEMENTS OF FUNCTIONAL EXPENSES**  
**FOR THE YEAR ENDED JUNE 30, 2019**  
**WITH COMPARATIVE TOTALS FOR JUNE 30, 2018**

	Community Services	Medicaid	Development Fund	Adminis- tration	2019 Totals	2018 Totals
<b>Functional Expenses</b>						
Personal services	\$ 499,918	\$ 598,409	\$ 50,069	\$ 1,164,955	\$ 13,025,023	\$ 12,492,347
Fringe benefits	112,559	195,024	11,255	277,622	2,909,567	2,951,598
Transportation and worker's expense	26,167	2,419	109	8,860	165,648	149,355
Children's allowances	-	-	-	-	38,652	20,770
Children's activities	6,327	20	4,225	304	91,283	81,214
Related school expenses	-	-	-	-	89	50
Purchase of services	1,151	21,624	4,514	165,521	284,700	385,397
Purchase of health services	-	164,483	-	-	222,551	254,339
Food	1,009	1,540	6,712	13,026	445,668	401,473
Clothing	12	-	-	1,505	37,822	29,762
Bedding and linen	-	-	-	-	(41)	1,248
Program and household supplies	11,248	2,393	34,826	26,640	425,185	325,178
Medical supplies and prescriptions	24	10,152	-	-	52,776	171,038
Rent - equipment	990	2,763	726	19,427	71,293	46,863
- vehicles	21,321	3,588	63	10,639	156,303	146,636
- property	29,701	1,086	-	2,535	286,013	234,903
Utilities	4,383	8,421	652	28,056	339,454	290,641
Plant and equipment maintenance	7,264	5,216	18,308	67,875	389,442	306,393
Vehicle maintenance	11,746	921	18	2,085	80,339	76,339
Telephone	11,504	7,248	54	24,817	186,737	170,823
Postage	26	4,308	-	11,416	15,721	15,199
Dues, licenses and permits	2,215	724	434	61,620	121,013	98,285
Office supplies	980	1,960	184	11,170	29,860	20,344
Subscriptions and publications	-	3	-	5,844	6,172	2,550
Conference expense	1,196	1,387	-	15,837	34,175	19,005
Miscellaneous	-	342	-	24,970	34,344	40,951
Professional fees	200	-	3,596	90,161	90,361	50,552
Insurance	10,300	2,356	1,669	10,066	267,656	254,047
Interest and finance charges	-	-	-	26,562	323,006	274,513
Real estate taxes	-	1,067	86	4,671	47,028	31,862
Publicity and recruitment	-	53	947	4,323	17,731	20,152
Community Services	18,244	-	-	-	18,244	6,442
Medical transportation	-	3,069	-	-	3,069	392
Bad debt expense (recovery)	2,869	4,225	-	-	(4,833)	53,307
Depreciation	459	3,576	313	25,023	634,898	662,572
<b>Total Functional Expenses</b>	<b>781,813</b>	<b>986,377</b>	<b>138,760</b>	<b>2,104,560</b>	<b>20,843,949</b>	<b>20,066,540</b>
Allocation of Administration Expenses	89,453	121,745	14,779	(2,104,560)	-	-
<b>Total Functional Expenses</b>	<b>\$ 871,266</b>	<b>\$ 1,110,122</b>	<b>\$ 153,539</b>	<b>\$ -</b>	<b>\$ 20,843,949</b>	<b>\$ 20,066,540</b>

**VANDERHEYDEN HALL, INC.**  
**STATEMENTS OF CASH FLOWS**  
**FOR THE YEARS ENDED JUNE 30, 2019 AND 2018**

	<u>2019</u>	<u>2018</u>
<b>Cash Flows From Operating Activities</b>		
Change in net assets	\$ (168,834)	\$ 550,036
Adjustments to reconcile change in net assets to net cash provided by operating activities		
Depreciation	634,898	662,572
Amortization classified as interest expense	30,793	4,989
Bad debts (recovery)	(4,833)	53,307
Net realized/unrealized gain on investments	(42,298)	(69,766)
Actuarial loss	652,476	34,238
(Increase) Decrease in assets:		
Restricted cash	(27,013)	(21,811)
Receivables	(273,120)	(310,747)
Pledges receivable	20,000	(80,000)
Prepaid expenses	(37,214)	(67,364)
Increase (Decrease) in liabilities:		
Cash overdraft	-	(83,883)
Accounts payable	(261,679)	54,550
Accrued expenses	82,188	(89,308)
Deferred revenue	(270,469)	(133,408)
Net Cash Provided by Operating Activities	<u>334,895</u>	<u>503,405</u>
<b>Cash Flows From Investing Activities</b>		
Proceeds of investments, net	(26,254)	(23,668)
Expenditures for property, plant and equipment	(120,253)	(149,816)
Net Cash Used by Investing Activities	<u>(146,507)</u>	<u>(173,484)</u>
<b>Cash Flows From Financing Activities</b>		
Net proceeds (repayments) on line of credit	168,365	(158,610)
Repayment of long-term debt	(156,998)	(141,821)
Payment of closing costs on long-term debt	(103,209)	-
Proceeds from long-term debt	-	126,000
Net Cash Used by Financing Activities	<u>(91,842)</u>	<u>(174,431)</u>
<b>Net Increase in Cash and Cash Equivalents</b>	96,546	155,490
Cash and Cash Equivalents, Beginning of Year	<u>155,490</u>	<u>-</u>
<b>Cash and Cash Equivalents, End of Year</b>	<u>\$ 252,036</u>	<u>\$ 155,490</u>
<b>Supplemental Information:</b>		
Cash paid for interest	<u>\$ 292,213</u>	<u>\$ 269,525</u>

See accompanying notes to financial statements.



**VANDERHEYDEN HALL, INC.**  
**NOTES TO FINANCIAL STATEMENTS**  
**JUNE 30, 2019 AND 2018**

**1. NATURE OF ACTIVITIES AND SIGNIFICANT ACCOUNTING POLICIES**

***Nature of Activities***

Vanderheyden Hall, Inc. (the Agency) is a nonprofit human services organization assisting children and persons with mental illness and developmental disabilities. The Agency operates residential, diagnostic, educational, and respite programs. Revenues are derived from fees charged to county governments, school districts, Medicaid, New York State Office for Persons with Developmental Disabilities (OPWDD), grants and individual contributions. The Agency receives the majority of its support from New York State, county, and local governments through negotiated contracts and service fees to provide services in its child care programs.

***Adoption of New Accounting Pronouncement***

For the year ended June 30, 2019, the Agency adopted the Financial Accounting Standards Board's Accounting Standards Update (ASU) No. 2016-14 - *Not-for-Profit Entities (Topic 958): Presentation of Financial Statements of Not-for-Profit Entities*. This update addresses the complexity and understandability of net asset classification, deficiencies in information about liquidity and availability of resources, and the lack of consistency in the type of information provided about expenses and investment return between not-for-profit entities. The changes required by the update have been applied in accordance with the ASU to all periods presented. A key change required by ASU 2016-14 are the net asset classes used in these financial statements. Amounts previously reported as unrestricted net assets are now reported as net assets without donor restrictions and amounts previously reported as temporarily restricted net assets and permanently restricted net assets, if applicable, are now reported as net assets with donor restrictions.

***Revenue Recognition***

Revenue from governmental agencies is recognized when services are rendered at approved rates. These rates are primarily cost based as determined by allowable expenditures in rate setting periods. Costs are subject to audit by third party payers and changes, if any, are recognized in the year known.

***Contributions***

Contributions are recognized when the donor makes a promise to give to the Agency that is, in substance, unconditional. Contributions that are restricted by the donor are reported as increases in net assets with donor restrictions. When a restriction expires, net assets with donor restrictions are reclassified to net assets without donor restrictions. If the restrictions are met in the same year in which the contributions are received, they are reported as increases in net assets without donor restrictions.

***Cash Equivalents***

For purposes of the statement of cash flows, the Agency considers all highly liquid investments with an initial maturity of three months or less that are not held for investment purposes to be cash equivalents.

**VANDERHEYDEN HALL, INC.**  
**NOTES TO FINANCIAL STATEMENTS**  
**JUNE 30, 2019 AND 2018**

**1. NATURE OF ACTIVITIES AND SIGNIFICANT ACCOUNTING POLICIES**

***Pledges Receivable***

Pledges receivable represent amounts promised by donors. Uncollectible promises are expected to be insignificant. Pledges receivable are expected to be received within four years.

Pledges are expected to be realized in the following periods:

	<u>2019</u>	<u>2018</u>
In one year or less	\$ 20,000	\$ 20,000
Between one and four years	<u>40,000</u>	<u>60,000</u>
Total	<u>\$ 60,000</u>	<u>\$ 80,000</u>

***Accounts Receivable***

Accounts receivable are stated at unpaid balances, less an allowance for doubtful accounts. The Agency provides for losses on accounts receivable using the allowance method. The allowance is based on experience and other circumstances, which may affect the ability of funding sources to meet their obligations. Receivables are considered impaired if full principal payments are not received in accordance with the contractual terms. It is the Agency's policy to charge off uncollectible accounts receivable when management determines the receivable will not be collected. Bad debt expense (recovery) totaled \$(4,833) and \$53,307 for the years ended June 30, 2019 and 2018, respectively.

***Property, Plant, Equipment and Depreciation***

Property, plant and equipment are stated at cost less accumulated depreciation. Depreciation is provided for in amounts sufficient to relate the cost of depreciable assets to operations on a straight-line basis over the following estimated useful lives:

	<u>Years</u>
Buildings and improvements	10 - 40
Furniture, fixtures and equipment	5 - 15
Vehicles	5

Depreciation expense was \$634,898 and \$662,572 for the years ended June 30, 2019 and 2018, respectively.

Maintenance and repairs are charged to operations when incurred; betterments and renewals are capitalized. The Agency follows a capitalization policy in accordance with the New York State Consolidated Fiscal Reporting Manual. Items with a cost of \$5,000 and a useful life greater than two years are capitalized. When property, plant and equipment is sold or otherwise disposed of, the asset account and related accumulated depreciation account are relieved and any gain or loss is included in operations.

**VANDERHEYDEN HALL, INC.**  
**NOTES TO FINANCIAL STATEMENTS**  
**JUNE 30, 2019 AND 2018**

**1. NATURE OF ACTIVITIES AND SIGNIFICANT ACCOUNTING POLICIES**

***Estimates***

Management uses estimates and assumptions in preparing financial statements. These estimates and assumptions affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities, and the reported amounts of revenues and expenses. Actual results could differ from those estimates.

***Income Tax Status***

The Agency is exempt from federal income taxes as a not-for-profit corporation under tax section 501(c)(3) as determined by the Internal Revenue Service. The Agency has been designated as an organization other than a private foundation. Under Accounting Standards Codification (ASC) Section 740, the tax status of tax-exempt entities is an uncertain tax position, since events could potentially occur that jeopardize tax-exempt status. Management of the Agency is not aware of any events that could jeopardize tax exempt status. Therefore, no liability or provision for income tax has been reflected in the financial statements.

***Allocation of Expenses***

Directly identifiable expenses are charged to programs and supporting services. Expenses related to more than one function are charged to programs and supporting services using specific allocation methods. The allocation methods for expenses related to more than one function include:

*Allocated based on Census:* Quality Assurance and Training Department Expenses; Residential Administrative Expenses.

*Allocated based on Square Footage:* All maintenance department expenses; various campus wide expenses such as insurance, telecommunication, utilities, and other purchased services.

Administration expenses include those expenses that are not directly identifiable with any specific function but provide overall support and direction of the Agency and are allocated based on total direct program expenses to total direct expenses, the ratio-value method.

***Investment in CHHUNY***

During the year ended June 30, 2016, the Agency purchased a 5.3% share of CHHUNY, LLC, a New York Limited Liability Company. Membership in CHHUNY is limited to nonprofit corporations described in Code Section 501(c)(3) and 509(a), qualified to conduct activities in the State of New York and licensed, as required, or otherwise qualified to provide services to eligible Medicaid Managed Care members.

**VANDERHEYDEN HALL, INC.**  
**NOTES TO FINANCIAL STATEMENTS**  
**JUNE 30, 2019 AND 2018**

**1. NATURE OF ACTIVITIES AND SIGNIFICANT ACCOUNTING POLICIES**

***Deferred Loan Costs***

The Agency has adopted ASU 2015-03, *Interest - Imputation of Interest (Subtopic 835-30): Simplifying the Presentation of Debt Issuance Costs* regarding the presentation on the statement of financial position of the costs of issuance of debt and related amortization expense in the statement of activities. The new guidance requires presenting such unamortized costs as a direct reduction from the unpaid principal of the debt. (See Note 5, Long-Term Debt). Amortization is required to be included with interest expense in the statement of functional expenses.

***Fair Value Measurements***

Generally accepted accounting principles establishes a framework for measuring fair value. That framework provides for a fair value hierarchy that prioritizes the inputs in valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted market prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements).

The asset's fair value measurement level within the hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs. The following is a description of the valuation methodologies used at June 30, 2019 and June 30, 2018.

Most investments are traded in public markets and are valued at their closing price on the last day of the fiscal year and are valued using level 1 inputs based on quoted market prices within active markets. Other investments are traded on public markets, but at times are not actively traded daily. These investments are valued using level 2 inputs using prices obtained from pricing services using primarily matrix pricing, which considers observable data that may include dealer quotes, market spreads, the bond's terms and conditions among other inputs.

**VANDERHEYDEN HALL, INC.**  
**NOTES TO FINANCIAL STATEMENTS**  
**JUNE 30, 2019 AND 2018**

**1. NATURE OF ACTIVITIES AND SIGNIFICANT ACCOUNTING POLICIES**

***Fair Value Measurements***

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while management believes the valuation methodologies are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

Fair values of assets and liabilities measured on a recurring basis at June 30, 2019 are as follows:

	<u>Fair Value</u>	<u>Quoted Prices in Active Markets for Identical Assets (Level 1)</u>	<u>Significant Other Observable Inputs (Level 2)</u>	<u>Significant Unobservable Inputs (Level 3)</u>
Cash Equivalents	\$ 23,467	\$ 23,467	\$ -	\$ -
Equities				
Consumer Discretionary	46,181	46,181	-	-
Energy	30,759	30,759	-	-
Financials	83,394	83,394	-	-
Health Care	41,496	41,496	-	-
Industrials	71,033	71,033	-	-
Information Technology	73,243	73,243	-	-
Telecommunications	37,273	37,273	-	-
Consumer Cyclical	59,322	59,322	-	-
Exchange Traded Funds				
Equity	472,045	472,045	-	-
Fixed Income	28,148	28,148	-	-
Other	18,752	18,752	-	-
Corporate Debt Securities	163,381	-	163,381	-
Government Bonds	<u>224,586</u>	<u>-</u>	<u>224,586</u>	<u>-</u>
<b>Total Fair Value Measures</b>	<b><u>\$ 1,373,080</u></b>	<b><u>\$ 985,113</u></b>	<b><u>\$ 387,967</u></b>	<b><u>\$ -</u></b>

**VANDERHEYDEN HALL, INC.**  
**NOTES TO FINANCIAL STATEMENTS**  
**JUNE 30, 2019 AND 2018**

**1. NATURE OF ACTIVITIES AND SIGNIFICANT ACCOUNTING POLICIES**

***Fair Value Measurements***

Fair values of assets and liabilities measured on a recurring basis at June 30, 2018 are as follows:

	<u>Fair Value</u>	<u>Quoted Prices in Active Markets for Identical Assets (Level 1)</u>	<u>Significant Other Observable Inputs (Level 2)</u>	<u>Significant Unobservable Inputs (Level 3)</u>
Cash Equivalents	\$ 174,762	\$ 174,762	\$ -	\$ -
Equities				
Consumer Discretionary	86,038	86,038	-	-
Consumer Staples	24,985	24,985	-	-
Energy	57,223	57,223	-	-
Financials	87,047	87,047	-	-
Health Care	46,917	46,917	-	-
Industrials	71,153	71,153	-	-
Information Technology	202,375	202,375	-	-
Telecommunications	11,206	11,206	-	-
American Depository Receipts	7,557	-	7,557	-
Mutual Funds				
Exchange Traded Funds				
Equity	298,236	298,236	-	-
Fixed Income	93,812	93,812	-	-
Corporate Debt Securities	69,784	-	69,784	-
Government Bonds	<u>73,433</u>	<u>-</u>	<u>73,433</u>	<u>-</u>
<b>Total Fair Value Measures</b>	<b><u>\$ 1,304,528</u></b>	<b><u>\$ 1,153,754</u></b>	<b><u>\$ 150,774</u></b>	<b><u>\$ -</u></b>

**2. LIQUIDITY AND AVAILABILITY OF FINANCIAL ASSETS**

The Agency regularly monitors liquidity required to meet the operating needs of the organization. For purposes of analyzing resources available to meet general expenditures over a 12-month period, the Agency considers all expenditures related to its ongoing activities of providing benefits to its clients and takes this into consideration during the annual budget process. To help manage unanticipated liquidity needs, the Agency has a committed line of credit of \$1,500,000, which it could draw upon.

The Board has funds that are invested in equity and fixed income mutual funds for long term appreciation but are available and may be spent at the discretion of the Board. In cases when expenses exceed operating income for a period of time, the Budget and Finance Committee will assess and make the determination if it is necessary to withdraw funds from the investment reserves for operating expenses.

**VANDERHEYDEN HALL, INC.**  
**NOTES TO FINANCIAL STATEMENTS**  
**JUNE 30, 2019 AND 2018**

**2. LIQUIDITY AND AVAILABILITY OF FINANCIAL ASSETS**

The following table reflects the Agency's current financial assets as of June 30, 2019 and 2018, reduced by amounts that are not available to meet general expenditures within one year of the statement of financial position date because of contractual restrictions, or internal board designations, or reserved for other uses.

	<u>2019</u>	<u>2018</u>
Total current assets	\$ 4,610,581	\$ 4,130,316
Less unavailable for general expenditures within one year:		
Prepaid expenses	155,190	117,976
Current assets with donor restrictions	<u>192,827</u>	<u>58,627</u>
Financial assets available to meet cash needs for general expenditures within one year	<u>\$ 4,262,564</u>	<u>\$ 3,953,713</u>

**3. INVESTMENTS**

Investments are carried at fair value.

	<u>2019</u>	<u>2018</u>
Cash equivalents	\$ 23,467	\$ 174,762
Equities	442,701	594,501
Exchange traded funds	518,945	392,048
Debt securities	<u>387,967</u>	<u>143,217</u>
Total	<u>\$ 1,373,080</u>	<u>\$ 1,304,528</u>

The Agency realized net gains (losses) on sales of investments of \$(1,588) and \$40,014 for the years ended June 30, 2019 and 2018, respectively. Net unrealized gains were \$43,886 and \$29,752 for the years ended June 30, 2019 and 2018, respectively. The Agency's investment securities are classified as net assets without donor restrictions. Therefore, investment income and unrealized gains or losses are considered unrestricted.

**4. LINE OF CREDIT**

The Agency has available a \$1,500,000 working capital line of credit with Key Bank NA which is due on demand. The outstanding balance on this note was \$907,251 at June 30, 2019 and \$738,886 at June 30, 2018. The interest rate on the note is variable based on Key Bank's prime rate plus 1.00% (6.50% and 6.00% at June 30, 2019 and 2018, respectively). The loan is secured by business assets, certain real estate and investments.

See Note 5, for term note relating to debt restructuring of \$1,450,000 portion of the June 30, 2018, outstanding balance.

**VANDERHEYDEN HALL, INC.**  
**NOTES TO FINANCIAL STATEMENTS**  
**JUNE 30, 2019 AND 2018**

**5. LONG-TERM DEBT**

	<u>2019</u>	<u>2018</u>
Mortgage payable to Community Preservation Corp. (CPC), variable interest rate (4.29% at June 30, 2019). Payments through April 1, 2026, secured by buildings.	\$ 3,139,361	\$ 3,213,920
Mortgage payable to Pioneer Savings Bank, interest of 7.00% at June 30, 2019, Maturing November 30, 2021, secured by building.	56,337	75,371
Mortgage payable to Facilities Development Corporation, interest at 6.33%, payments due through 2018, secured by a building.	178,030	178,030
Mortgage payable through Key Bank NA, interest at 6.00%, payments due through July, 2020 secured by buildings.	94,341	106,127
Mortgage payable to Key Bank NA, interest at 4.98%, payments due through April 2031, secured by building.	160,708	170,324
Term loan, payable to Key Bank NA, variable interest rate at Key Bank prime rate plus 1% (6.50% at June 30, 2019). Interest only payments through January 2020. In January 2020, principal payment of \$97,667, plus interest is due. Commencing February 2020, monthly principal payments based 15-year amortization of \$8,056 plus interest, maturing January 2021, secured by buildings. Loan covenant of a debt service coverage ratio is included in the term loan. For the year ended June 30, 2019 this covenant was met.	1,450,000	1,450,000
Kila-Watt Energy & Lighting LLC, interest at 0%, payments through September 2020.	52,500	94,500
Total Long-Term Debt	5,131,277	5,288,272
Less current installments	317,099	157,588
Long-Term Debt, net of current installments	4,814,178	5,130,684
Less deferred financing costs	150,268	77,849
Long-Term Debt less unamortized financing costs	\$ 4,663,910	\$ 5,052,835

Total interest expense was \$323,006 and \$274,513 for the years ended June 30, 2019 and 2018, respectively.



**VANDERHEYDEN HALL, INC.**  
**NOTES TO FINANCIAL STATEMENTS**  
**JUNE 30, 2019 AND 2018**

**5. LONG-TERM DEBT**

Long-term debt is payable in each of the next five years as follows:

2020	\$ 317,099
2021	1,433,859
2022	109,866
2023	103,608
2024	108,412
Thereafter	3,058,433

**6. ESCROW DEPOSITS**

The Agency has received financing through a loan with the Community Preservation Corporation with a requirement to maintain an escrow account to be held until the end of the mortgage term. Part of the terms of this financing was that additional monies would be required to be maintained in escrow. The amounts in escrow at June 30, 2019 and 2018, totaled \$118,627.

**7. OPERATING LEASES**

The Agency leases property and equipment under operating leases expiring at various dates. Minimum future rental payments under the non-cancelable operating leases having a remaining term in excess of one year as of June 30, 2019, and for each of the remaining years are:

2020	\$ 421,944
2021	207,627
2022	164,720
2023	<u>68,912</u>
Total Minimum Future Rental Payments	<u>\$ 863,203</u>

Rental expense was \$513,609 and \$428,402 for the years ended June 30, 2019 and 2018, respectively.

**8. DEFINED BENEFIT PLAN**

The Agency has a defined benefit pension plan that covers employees hired prior to June 2010. Benefits are based upon years of service and compensation. On June 30, 2010, the agency permanently froze accrual of additional benefits for the Defined Benefit Plan (the Plan). No employees are currently accruing benefits under the Plan. It is the Agency's intent to continue to fund the Plan as required until such time as the Plan is fully funded. The Plan's measurement date is June 30. It is at least reasonably possible that these estimates could change in the near-term. Plan assets consist of a variety of domestic equities, real estate income securities and limited partnerships. The Plan was noncontributory.

**VANDERHEYDEN HALL, INC.**  
**NOTES TO FINANCIAL STATEMENTS**  
**JUNE 30, 2019 AND 2018**

**8. DEFINED BENEFIT PLAN**

The following sets forth the funded status of the Plan in accordance with generally accepted accounting principles at June 30, 2019 and 2018:

	<u>2019</u>	<u>2018</u>
Accumulated benefit obligation at June 30	\$ 8,033,110	\$ 7,285,034
Fair value of plan assets at June 30	\$ 5,859,737	\$ 5,778,430
Accumulated benefit obligation at June 30	8,033,110	7,285,034
Funded Status	<u>\$ (2,173,373)</u>	<u>\$ (1,506,604)</u>
Weighted average assumptions as of June 30		
Discount rate	3.50%	4.00%
Expected long-term return on plan assets	6.00%	6.00%
Rate of compensation increase	n/a	n/a
Net Periodic Benefit Cost	<u>\$ 14,293</u>	<u>\$ (9,415)</u>
Employer Contributions	<u>\$ -</u>	<u>\$ -</u>
Benefits Paid	<u>\$ (142,786)</u>	<u>\$ (420,546)</u>
	<u>2019</u>	<u>2018</u>
<i>Amounts Recognized in the statement of financial position</i>		
Accrued Pension Liability	<u>\$ (2,173,373)</u>	<u>\$ (1,506,604)</u>
Total	<u>\$ (2,173,373)</u>	<u>\$ (1,506,604)</u>
<i>Amounts Recognized in the statement of activities</i>		
Actuarial Gains and (Losses)	\$ (652,476)	\$ (34,238)
Interest cost	(287,781)	(272,537)
Expected return on plan assets	341,275	342,466
Actuarial amortization	<u>(67,787)</u>	<u>(60,514)</u>
Total	<u>\$ (666,769)</u>	<u>\$ (24,823)</u>
<i>Expected Effect in Unrestricted Net Assets in the next fiscal year</i>		
Losses	<u>\$ (67,787)</u>	<u>\$ (60,514)</u>
Expected Employer Contributions for the year ended June 30, 2020	<u>\$ 100,000</u>	<u>\$ -</u>

**VANDERHEYDEN HALL, INC.**  
**NOTES TO FINANCIAL STATEMENTS**  
**JUNE 30, 2019 AND 2018**

**8. DEFINED BENEFIT PLAN**

***Expected Future Benefit Payments***

The following are the expected future benefit payments:

2020	\$ 185,599
2021	221,125
2022	256,846
2023	299,105
2024	329,333
2025 - 2028	2,073,852

***Plan Assets by Category***

The following are the assets by major category as of June 30:

	<u>2019</u>	<u>%</u>	<u>2018</u>	<u>%</u>
Equities	\$ 3,769,605	64	\$ 3,884,624	67
Fixed income	1,671,323	28	1,562,540	27
Cash and equivalents	209,230	4	151,279	3
Other securities	<u>209,579</u>	<u>4</u>	<u>179,987</u>	<u>3</u>
Total	<u>\$ 5,859,737</u>	<u>100</u>	<u>\$ 5,778,430</u>	<u>100</u>

The Plan's investments are invested in securities as disclosed above and are valued at the fair values of the investments as traded in public markets. Management considers these assets to be classified as a Level 1 in the fair value hierarchy as described in Note 1.

***Investment Policy***

The Plan's investment objective is preservation of capital. Each transaction shall seek first to ensure the capital losses are mitigated, whether they be from securities defaults or erosion of market value. Investment decisions should favor stability of principal over income. This primary objective of capital preservation over income applies to the portion of investment portfolio used to meet liquidity needs.

It is the policy of the Plan to diversify its investment portfolio. All funds shall be diversified to minimize the risk of loss resulting from over concentration of assets in a specific maturity and from a specific issuer of a specific class of securities. Performance of the fund shall be regularly measured against the S&P 500, Bloomberg Barclays US Aggregate Bond Index, and MSCI.

***Other Assumptions***

Mortality: Non-annuitant and annuitant; RP-2014 mortality table  
 Assumed Retirement Age: Normal retirement age or age attained, if greater

**VANDERHEYDEN HALL, INC.**  
**NOTES TO FINANCIAL STATEMENTS**  
**JUNE 30, 2019 AND 2018**

**9. OTHER RETIREMENT PLANS**

Tax Deferred Annuity Plan: The Agency contributes to a tax deferred annuity plan qualified under Section 403(b) of the Internal Revenue Code. The plan covers all eligible employees who choose to participate. Employees can make contributions to the plan up to the maximum amount allowed by law. The Agency matches an employee's contribution up to a maximum established by the Board of Directors. Contributions to the Plan were \$49,998 and \$43,152 for the years ended June 30, 2019 and 2018, respectively.

457b Plan: The agency contributes to a defined contribution plan which qualifies under section 457b of the Internal Revenue Code. This plan is available to all staff at the Vice President level and above. The value of the plan assets was \$109,691 and \$82,678 as of June 30, 2019 and June 30, 2018, respectively.

**10. NET ASSETS WITH DONOR RESTRICTIONS**

Net assets with donor restrictions represent amounts restricted by donors for programs to assist individuals served by the Agency in career development skills and opportunities.

**11. WORKERS' COMPENSATION ACCRUAL**

Vanderheyden Hall, Inc. participated in the Provider Agency Trust for Human Services (PATH Trust) for mandated workers' compensation coverage from January 1, 2001 to December 31, 2005. The trust was dissolved on February 28, 2006 and is now run by the Workers Compensation Board of New York State (WCB). Significant assessments were imposed on the former participants of the PATH Trust. The WCB hired a public accounting firm to do a review of the trust, its service agreement, financial documents and to determine if there was any fraudulent or negligent activity. A liability for the workers' compensation assessment imposed on Vanderheyden Hall, Inc. of \$559,285 has been recorded in the accompanying financial statements. The liability has been recorded based on the current assessment which is based on actuarial assumptions and may change as the claims run off occurs in future years. It is at least reasonably possible this estimate could change in the near-term.

**12. RISKS AND UNCERTAINTIES**

The Agency invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect account balances and the amounts reported in the statement of financial position.

**13. NET DEFICITS/MANAGEMENT'S PLANS**

At June 30, 2019, the Agency's current assets exceed its current liabilities by \$1,573,928, and the Agency has a net accumulated deficit of \$3,141,923 (including net accumulated deficit of \$2,148,373 related to the defined benefit pension plan (Note 8)). The Agency's increase (decrease) in net assets for the years ended June 30, 2019 and 2018, was \$(168,834) and \$550,036, respectively. Included in the increase (decrease) in net assets were losses from the defined benefit plan in the amount \$(652,479) and (\$34,238) for the years ended June 30, 2019 and 2018, respectively.

**VANDERHEYDEN HALL, INC.**  
**NOTES TO FINANCIAL STATEMENTS**  
**JUNE 30, 2019 AND 2018**

**13. NET DEFICITS/MANAGEMENT'S PLANS**

Before the effect of the actuarial losses, the agency had an increase in net assets of \$424,589 for the year ended June 30, 2019. Due to the significant losses from the frozen defined benefit plan, management has realized the need to actively explore de-risking options in order to reduce this liability over time. Management plans on meeting with various defined benefit plan administrators to explore the most effective way to begin this process. During the year ended June 30, 2019, census for some programs were higher compared to the year ended June 30, 2018, while others lagged. Management continues to work with counties, school districts, and OPWDD to fill client openings. Management plans to grow new programs that were implemented in the past year, as these new revenue streams have not yet reached their full potential. Not only will this enhance revenue but also expand the programs the Agency delivers. Additionally, the school recently received approval to increase its day student census by 8 students. Management continues to practice fiscally conservative initiatives to reduce expenses, and also to analyze cost reporting methodology to maximize reimbursement rates. Management continues to seek affiliate partners to enable the Agency to achieve economies of scale in cost of services by utilizing shared services and group buying. The Agency's management is optimistic that the work being done collaboratively with the Board of Directors to ensure the Agency's financial strength moving forward will be effective.

**14. SUBSEQUENT EVENTS**

Management has evaluated all events subsequent to the statement of financial position date of June 30, 2019 through November 4, 2019, which is the date these financial statements were available to be issued.

**VANDERHEYDEN HALL, INC.**  
**SCHEDULE OF SUPPORT AND REVENUE RELATED TO FUNCTIONAL EXPENSES**  
**FOR THE YEAR ENDED JUNE 30, 2019**  
**WITH COMPARATIVE TOTALS FOR JUNE 30, 2018**

	<u>Education</u>	<u>Residential</u>	<u>Community Residence</u>	<u>Group Homes</u>	<u>Independent Living</u>
<b>Program Support and Revenue</b>					
Counties	\$ 1,070,111	\$ 5,613,686	-	\$ 1,764,367	\$ 415,520
School districts	3,146,283	639,785	-	-	-
Medicaid	-	89,081	4,445,611	-	-
Social security	-	843	582,168	-	-
OPWDD	-	-	12,375	-	-
DASNY	-	-	-	-	-
Community services	-	-	-	-	-
Grants	162,967	-	-	-	-
USDA	64,954	33,874	2,395	16,557	-
Health Home	-	-	-	-	-
Miscellaneous income	-	796	130,572	150	2,109
Retroactive revenue adjustments	388,883	37,774	(1)	25,286	404
Released from restrictions	-	-	-	-	-
Total Program Support and Revenue	<u>4,833,198</u>	<u>6,415,839</u>	<u>5,173,120</u>	<u>1,806,360</u>	<u>418,033</u>
<b>Nonprogram Support and Revenue</b>					
Interest and dividends	-	-	-	-	-
Contributions and bequests	50,015	4,357	1,147	-	-
Miscellaneous income	-	-	-	-	-
Net realized/unrealized gains	-	-	-	-	-
Total Nonprogram Support and Revenue	<u>50,015</u>	<u>4,357</u>	<u>1,147</u>	<u>-</u>	<u>-</u>
<b>Total Support and Revenue Related to Functional Expenses</b>	<u>4,883,213</u>	<u>6,420,196</u>	<u>5,174,267</u>	<u>1,806,360</u>	<u>418,033</u>
Total Functional Expenses	<u>5,104,570</u>	<u>5,952,489</u>	<u>5,315,190</u>	<u>1,904,248</u>	<u>432,525</u>
<b>Excess (Deficiency) of Support and Revenue Over Expense</b>	<u>\$ (221,357)</u>	<u>\$ 467,707</u>	<u>\$ (140,923)</u>	<u>\$ (97,888)</u>	<u>\$ (14,492)</u>

**VANDERHEYDEN HALL, INC.**  
**SCHEDULE OF SUPPORT AND REVENUE RELATED TO FUNCTIONAL EXPENSES**  
**FOR THE YEAR ENDED JUNE 30, 2019**  
**WITH COMPARATIVE TOTALS FOR JUNE 30, 2018**

	Community Services	Medicaid	Development Fund	2019 Totals	2018 Totals
<b>Program Support and Revenue</b>					
Countries	\$ 25,498	-	-	\$ 8,889,182	\$ 8,371,620
School districts	-	-	-	3,786,068	3,610,537
Medicaid	641,449	1,256,627	-	6,432,768	6,487,335
Social security	344	-	-	583,355	507,701
OPWDD	-	-	-	12,375	12,500
DASNY	-	-	-	-	-
Community services	1,612	-	17,500	19,112	46,326
Grants	-	-	27,002	189,969	165,923
USDA	-	-	-	117,780	109,586
Health Home	309,903	-	-	309,903	176,677
Miscellaneous income	-	400	10,738	144,765	102,714
Retroactive revenue adjustments	4,907	58,559	6,760	522,572	612,830
Released from restrictions	-	-	15,947	15,947	-
<b>Total Program Support and Revenue</b>	<u>983,713</u>	<u>1,315,586</u>	<u>77,947</u>	<u>21,023,796</u>	<u>20,203,749</u>
<b>Nonprogram Support and Revenue</b>					
Interest and dividends	-	-	37,704	37,704	33,778
Contributions and bequests	-	-	109,221	164,740	231,522
Miscellaneous income	-	-	-	-	-
Net realized/unrealized gains	-	-	42,298	42,298	69,765
<b>Total Nonprogram Support and Revenue</b>	<u>-</u>	<u>-</u>	<u>189,223</u>	<u>244,742</u>	<u>335,065</u>
<b>Total Support and Revenue Related to Functional Expenses</b>	<u>983,713</u>	<u>1,315,586</u>	<u>267,170</u>	<u>21,268,538</u>	<u>20,538,814</u>
<b>Total Functional Expenses</b>	<u>871,266</u>	<u>1,110,122</u>	<u>153,539</u>	<u>20,843,949</u>	<u>20,086,540</u>
<b>Excess (Deficiency) of Support and Revenue Over Expense</b>	<u>\$ 112,447</u>	<u>\$ 205,464</u>	<u>\$ 113,631</u>	<u>\$ 424,589</u>	<u>\$ 452,274</u>