Department of the Treasury Internal Revenue Service

A Fau the 2016 colonday year

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.

▶ Information about Form 990 and its instructions is at www.lrs.gov/form990.

OMB No. 1545-0047 16 Open to Public Inspection

~	FOI UI	e 2010 calendar year, or tax year beginning	enung					
В	Check if applicab	C Name of organization		D Employer identifi	cation number			
	Addre							
	Name	Doing business as		15-0	543618			
F	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	r 637-6374			
<u></u>								
	ated Amen	City or town, state or province, country, and ZIP or foreign postal code FAYETTEVILLE, NY 13066		G Gross receipts \$	1,869,985.			
H	return Applic tion	FAIRTIEVIDE, NI 13000		H(a) Is this a group re				
L-	ltion pendi			for subordinates? Yes X No				
_	W-0.000	SAME AS C ABOVE	507	H(b) Are all subordinates in				
1	Tax-ex	empt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1)	or 527	1	list. (see instructions)			
		te: > WWW.FFLIB.ORG		H(c) Group exemptio				
-		organization: X Corporation Trust Association Other	L Year	of formation: 1906 N	A State of legal domicile: NY			
Р		Summary						
မွ	1	Briefly describe the organization's mission or most significant activities: $\overline{ ext{1T}}$						
Activities & Governance		FAYETTEVILLE FREE LIBRARY TO PROVIDE FREE	E AND	OPEN ACCESS	TO IDEAS			
Ë	2	Check this box if the organization discontinued its operations or dispose	sed of more	than 25% of its net as	ssets.			
ŏ	3	Number of voting members of the governing body (Part VI, line 1a)		3	5			
ري ص	4	Number of independent voting members of the governing body (Part VI, line 1b)			5			
Š	5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)			27			
ij	6	Total number of volunteers (estimate if necessary)			0			
햕	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.			
A	h	Net unrelated business taxable income from Form 990-T, line 34			0.			
_	-			Prior Year	Current Year			
	В	Contributions and grants (Part VIII, line 1h)		2,002,525.	1,783,410.			
μe				42,399.	52,829.			
Revenue		Program service revenue (Part VIII, line 2g)		604.	618.			
Re		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		12,366.				
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			13,042.			
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,057,894.	1,849,899.			
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.			
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,125,824.	1,192,384.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
ďx	b	Total fundraising expenses (Part IX, column (D), line 25)						
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		646,907.	663,188.			
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,772,731.	1,855,572.			
	19	Revenue less expenses. Subtract line 18 from line 12		285,163.	-5,673.			
OL SES			Be	ginning of Current Year	End of Year			
sets or	20	Total assets (Part X, line 16)	NAOPENNIA II	3,864,300.	3,769,518.			
Net Ass Fund Ba	21	Total liabilities (Part X, line 26)	200020000	1,593,015.	1,503,906.			
Set	22	Net assets or fund balances. Subtract line 21 from line 20		2,271,285.	2,265,612.			
	art II	Signature Block						
_		Ities of perjury, I declare that I have examined this return, including accompanying schedule:	s and statem	ents, and to the best of my	knowledge and belief, it is			
		t, and complete. Declaration of preparer (other than officer) is based on all information of wh		the same and the s	, mis mouge and some, it is			
	, 001100	t, and complete books at the property (office than officer) to be a dead of an information of wi	non properti	nao any knowneage.				
O!		Signature of officer		Date				
Sig		M ²		TO AT LIEU.				
Her	'e	SUSAN CONSIDINE, EXECUTIVE DIRECTOR Type or print name and title		,				
_			- 11	Oate Check	II PTIN			
<u>.</u>		Print/Type preparer's name MTCHAET, TITSSON, CPA Preparer's signature MTCHAET, TITSSON, CPA		OHOUR				
Paid		THE BEDDON, OF IT	O	4/07/17 self-employe	P01254506			
	parer	Firm's name GROSSMAN ST. AMOUR CPAS PLLC		Firm's EIN ▶	46-0475780			
Use	Only	Firm's address 110 WEST FAYETTE STREET SUITE 90	00					
		SYRACUSE, NY 13202		Phone no.31	5-424-1120			
May	v the IF	RS discuss this return with the preparer shown above? (see instructions)			X Yes No			

4d Other program services (Describe in Schedule O.)
(Expenses \$ Including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 1,485,161.

Form 990 (2016) FAYETTEVILLE Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	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? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
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	de la		
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		_X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
O	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
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	140		-
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	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? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			_
	complete Schedule G, Part III	19		<u>X</u>

Form 990 (2016) FAYETTEVILLE FREE
Part IV Checklist of Required Schedules (continued)

		10	Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	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? /f "Yes," complete Schedule I, Parts I and II	21		X
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	22		Х
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	23	=	Х
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	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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	25a		Х
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	25b		х
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	26		Х
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	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV		7) NE	3
	instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	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	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	20		х
31	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations?	30		- 71
31	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		х
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	33		Х
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	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			Х
27	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36	-	
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	"		
	Note. All Form 990 filers are required to complete Schedule O	38	х	

Form 990 (2016) FAYETTEVILLE FREE LIBRARY Part V Statements Regarding Other IRS Filings and Tax Compliance

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? Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? 12a 13b 14a 15a		Check if Schedule O contains a response or note to any line in this Part V	.,		
be Enter the number of Forms W.2G included in line 1s. Enter or Lin not applicable or Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? Enter the number of employees reported on Form W.3, Transmittal of Wage and Tax Statements, like of the calendar year ending with or within the year covered by this return. It at least one is reported on line 2a, did the organization file all required fecaral employment tax returns? Note, if the sun of lines 1 a and 2a is greater than 250, you may be required to a-76 fee the instructions? 30 Did the organization have unrelated business gross incore of \$1,000 or more during the year? 31 If Yee, 1 and lifed 3 fem 300 To for this year? If Yee, 7 to files 3b, provide an exclusivation in Schedule 0 32 A At any time during the calendar year, did the organization have an interest in, or a signature or other authonity over, a financial account in a foreign country; such as a shark account, securities account, or other financial accountit? 33 If Yee, 1 enter the name of the foreign country; be a shark account, securities account, or other financial accountity. 34 If Yee, 2 enter the name of the foreign country; be 3 by a prohibited tax shelter transaction at any time during the tax year? 35 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 36 If Yes, 1 to line 5 a or 50, did the organization file Ferm 8886.77 37 If Yes, 2 to line 5 a or 50, did the organization file Ferm 8886.77 38 Obe any transmitted in his work and a prohibited tax shelter transaction any contributions or gifts were not tax educatible? 38 Obe that organization include with every solicitation an express statement that such contributions or gifts were not tax educatible? 39 If Yes, 3 did the organization include with every solicitation and parily for goods and services provided to the payor. 40 If Yes, 4 did the organization include with every solicitat				Yes	No
be Enter the number of Forms W.2G included in line 1s. Enter or Lin not applicable or Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? Enter the number of employees reported on Form W.3, Transmittal of Wage and Tax Statements, like of the calendar year ending with or within the year covered by this return. It at least one is reported on line 2a, did the organization file all required fecaral employment tax returns? Note, if the sun of lines 1 a and 2a is greater than 250, you may be required to a-76 fee the instructions? 30 Did the organization have unrelated business gross incore of \$1,000 or more during the year? 31 If Yee, 1 and lifed 3 fem 300 To for this year? If Yee, 7 to files 3b, provide an exclusivation in Schedule 0 32 A At any time during the calendar year, did the organization have an interest in, or a signature or other authonity over, a financial account in a foreign country; such as a shark account, securities account, or other financial accountit? 33 If Yee, 1 enter the name of the foreign country; be a shark account, securities account, or other financial accountity. 34 If Yee, 2 enter the name of the foreign country; be 3 by a prohibited tax shelter transaction at any time during the tax year? 35 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 36 If Yes, 1 to line 5 a or 50, did the organization file Ferm 8886.77 37 If Yes, 2 to line 5 a or 50, did the organization file Ferm 8886.77 38 Obe any transmitted in his work and a prohibited tax shelter transaction any contributions or gifts were not tax educatible? 38 Obe that organization include with every solicitation an express statement that such contributions or gifts were not tax educatible? 39 If Yes, 3 did the organization include with every solicitation and parily for goods and services provided to the payor. 40 If Yes, 4 did the organization include with every solicitat	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 5			
Die the organization comply with backup withholding rules for reportable payments to vendors and reportable gamining (gamining) withmosts of the withmost of t	b			10	
2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, field of the tealer clearing year anding with or within the year covered by this return 5 to 14 teast one is reported on line 2a, did the organization file all required federal employment tax returns? 5 Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 5 Did the organization have unrelated business gross income of \$1,000 or more during the year? 5 Did Theys, 1 has it filed a form 990-T for this year? If 1/No, 1 or line 3b, provide an explanation in Schedulo 0. 5 Did Have, 1 has it filed a form 990-T for this year? If 1/No, 1 or line 3b, provide an explanation in Schedulo 0. 5 Did Have, 1 has it filed a form 990-T for this year? If 1/No, 1 or line 3b, provide an explanation in Schedulo 0. 5 Did Have, 1 has a filed of the form 990-T for this year? If 1/No, 1 or line 3b, provide an explanation in Schedulo 0. 5 Did Have, 1 has a filed a form 990-T for this year? If 1/No, 1 or line 3b, provide an explanation in Schedulo 0. 5 Did Have, 1 has a filed a form 990-T for this year? 5 Did Have organization and party to a prohibited tax shetter transaction, 2 or printipated tax shetter transaction, 2 or printipated tax shetter transaction at any time during the tax year? 5 Did Have, 1 to line 6 a of 5b, did the organization that It was or is a party to a prohibited tax shetter transaction and year than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6 Does the organization because apply and in excess of 35 made party as a contribution and party for goods and services provided to the payor? 7 Did the organization selve applyment in excess of 35 made party as a contribution and party for goods and services provided to the payor? 7 Did the organization selve applyment in excess of 35 made party as a contribution and party for goods and services provided to the payor. 7 Did the organization selve	С				G.
2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, field of the tealer clearing year anding with or within the year covered by this return 5 to 14 teast one is reported on line 2a, did the organization file all required federal employment tax returns? 5 Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 5 Did the organization have unrelated business gross income of \$1,000 or more during the year? 5 Did Theys, 1 has it filed a form 990-T for this year? If 1/No, 1 or line 3b, provide an explanation in Schedulo 0. 5 Did Have, 1 has it filed a form 990-T for this year? If 1/No, 1 or line 3b, provide an explanation in Schedulo 0. 5 Did Have, 1 has it filed a form 990-T for this year? If 1/No, 1 or line 3b, provide an explanation in Schedulo 0. 5 Did Have, 1 has a filed of the form 990-T for this year? If 1/No, 1 or line 3b, provide an explanation in Schedulo 0. 5 Did Have, 1 has a filed a form 990-T for this year? If 1/No, 1 or line 3b, provide an explanation in Schedulo 0. 5 Did Have, 1 has a filed a form 990-T for this year? 5 Did Have organization and party to a prohibited tax shetter transaction, 2 or printipated tax shetter transaction, 2 or printipated tax shetter transaction at any time during the tax year? 5 Did Have, 1 to line 6 a of 5b, did the organization that It was or is a party to a prohibited tax shetter transaction and year than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6 Does the organization because apply and in excess of 35 made party as a contribution and party for goods and services provided to the payor? 7 Did the organization selve applyment in excess of 35 made party as a contribution and party for goods and services provided to the payor? 7 Did the organization selve applyment in excess of 35 made party as a contribution and party for goods and services provided to the payor. 7 Did the organization selve		(gambling) winnings to prize winners?	1c		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 3a Did the organization have unrelated business give sprace from 250, you may be required to e-file (see instructions) 3b Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a A tary time during the calendary year, did the organization have an interset in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, account, or other financial account)? 4a A tary time the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5b Was the organization a party to a prohibited tax shelfer transaction at any time during the tax year? 5c If Yes, "to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelfer transaction? 5c If Yes, "to line 5a or 5b, did the organization file Form 8886-17? 6c If Yes, "to line 5a or 5b, did the organization file Form 8886-17? 6d Does the organization include with every solicilation an express statement that such contributions or gifts were not tax deductible? 6d Did the organization include with every solicilation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 2d) bif the organization neceive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 7b If Yes, "did the organization notify the donor of the value of the goods or services provided? 7c If If the organization selection accepts of the payment of the value of the goods or services provided? 7c If If the organization is a service of the value of the goods or services provided? 7c If If the organization exceive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7d If the organization is excessed and	2a				
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 35 Did the organization have unrelated business gross known or \$1,000 or more during the year? 48 At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account! you country such as a bank account, early 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. ▶ 80 If "Yes," early time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in foreign country. ▶ 80 If "Yes," early time organization aparty to a prohibited tax shalter transaction at any time during the tax year? 80 If "Yes," other the name of the foreign country. ▶ 81 If "Yes," other the calendar year, define from 8866. ↑ 82 If "Yes," did 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 from 8866. ↑ 82 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 83 If "Yes," did the organization notify the donor of the value of the goods or services provided? 84 If "Yes," indicate the number of Forms 8282 filed during the year 85 If "Yes," indicate the number of Forms 8282 filed during the year 86 If "Yes," indicate the number of Forms 8282 filed during the year 96 Did the organization neceive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 97 To Did the organization receive a contribution of qualified intellectual property, did the organization file Form 8898 as required? 98 Did the organization receive a contribution of cualified intellectual property, did the organization file Form 8898 as required? 99 Did the organization receive a contribution of cualif		filed for the calendar year ending with or within the year covered by this return 27	11.5		133
38 Dit the organization have unreliated business gross income of \$1,000 or more during the year? 48 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)? 59 See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBARI). 50 Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 50 Was the organization on party to a prohibited tax shelter transaction? 50 Was 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? 60 Was 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? 61 If 'Yes,' tid the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible on ordinations that may receive deductible contributions under section 170(c). 62 If 'Yes,' did the organization necess of \$75 made antily as a contribution and partly for goods and services provided to the payor? 63 If 'Yes,' did the organization necesse a payment in excess of \$75 made antily as a contribution and partly for goods and services provided to the payor? 70 If 'Yes,' did the organization excelve a payment in excess of \$75 made antily as a contribution and partly for goods and services provided to the payor? 71 If 'Yes,' did the organization excelve any funds, directly or indirectly, on a personal benefit contract? 72 If If 'Yes,' diducte the number of Forms 8282? If led during the year 73 If the organization received a contribution of qualified intellectual property, did the organization file a Form 1086 C? 75 Sponsoring organi	b	If at least one is reported on line 2a, dld the organization file all required federal employment tax returns?	2b		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 4. At any time during the calendar year, old the organization have an interest in, or a signature or other authority over, a financial account? 4. At any time during the calendar year, old the organization have an interest in, or a signature or other authority over, a financial account in a foreign country. 4. At any time during the calendar year, old the organization expensive the calendar year. 5. By the calendar year, old the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year? 5. By the programmation in party to a prohibited tax shelter transaction at any time during the tax year? 5. By the calendar year, old the organization that it was or is a party to a prohibited tax shelter transaction? 5. By the calendar year, old the organization that it was or is a party to a prohibited tax shelter transaction? 6. By the calendar year, old the organization that it was or is a party to a prohibited tax shelter transaction? 6. By the calendar year, old the organization that it was or is a party to a prohibited tax shelter transaction? 6. By the calendar year, old the organization that it was or is a party to a prohibited tax shelter transaction? 6. Cy the calendar year, old the organization that it was or is a party to a prohibited tax shelter transaction? 7. Cy the organization include with every solicitation an express statement that such contributions or glifs were not tax deductible? 7. Organizations that may receive deductible contributions or contribution of contribution or glifs were not tax deductible? 7. Organizations that may receive apyramid in excess of \$75 made party is a contribution and party for goods and services provided to the payor? 7. The the organization receive a paymant in excess of \$75 made party is a contribution and party for goods and services provided to the payor of the organization notity the donor of the		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	-11-7	5.15	NO
49 As 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;? See instructions for fling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). See instructions for fling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization aparty to a prohibited tax shelter transaction? 5b Was 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? 5b If "Yes," the line 5a or 5b, did the organization file Form 8886-T7 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? 6b If "Yes," did the organization include with very solicitation and partly for goods and services provided to the payor? 7c Organizations that may receive deductible contributions under section 170(s). 8d If "Yes," did the organization notify the donor of the value of the goods or services provided? 7c Did the organization receive a payment in excess of \$76 mate partly as a contribution and partly for goods and services provided to the payor? 7d If "Yes," indicate the number of Forms 8282 filed during the year 8d If "Yes," indicate the number of Forms 8282 filed during the year 9d Did the organization received any funds, directly or indirectly, on a personal benefit contract? 7e Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file or form \$200, and \$20	За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
financial account in a foreign country (such as a bank account, securities account, or other financial account)? b if Yes, "enter the name of the foreign country." See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 58 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 59 Did any taxable party notify the organization file Form 8886-T? 60 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that twer not tax deductible as charitable ontributions? 61 Diff Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable ontributions? 62 Diff Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 70 Organizations that may receive deductible contributions under section 170(c). 80 Diff the organization notify the donor of the value of the goods or services provided to the payor? 81 If Yes," indicate the number of Forms 8282 filed during the year 82 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required 83 to file Form 8282 filed during the year 84 Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1038-C? 75 Did the organization received a contribution of cars, boasts, airplanes, or other vehicles, did the organization file a Form 1038-C? 76 Sponsoring organization maintaining donor advised funds. 87 Sponsoring organization maintaining donor advised funds. 88 Did the sponsoring organization make any taxable distributions under section 4986? 98 Sponsoring organization make any taxable distributions under section 4986? 99 Sponsoring organization make any taxable distributions under section 4986? 90 Section 501(c)(b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
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). See instructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). See instructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). See instructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). See If "Yes," this ine Sa or 50, old the organization that it was or is a party to a prohibited tax shelter transaction? See If "Yes," this ine Sa or 50, old the organization include with every solicitation and express statement that such contributions or gifts were not tax deductible? Organization shat may receive deductible contributions under section 170(c). 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? To Post in the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? To Did the organization notify the donor of the value of the goods or services provided? To Did the organization notify the donor of the value of the goods or services provided? To Did the organization notify the donor of the value of the goods or services provided? To United Form 8282? To William Form 8282 filed during the year Did the organization received a contribution of qualified intellectual property, did the organization file or make a file of the province of the prov	4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Did any taxable party notify the organization file Form 8886-T? 6 If "Yes," to line 6 a or 5b, did the organization file Form 8886-T? 8 Does the organization 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? 8 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 8 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 8 If "Yes," 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? 8 If "Yes," did the organization notify the donor of the value of the goods or services provided? 9 If "Yes," indicate the number of Forms 8282 filed during the year 10 If the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 11 If "Yes," indicate the number of Forms 8282 filed during the year 12 If "Yes," indicate the number of Forms 8282 filed during the year 13 If "Yes," indicate the number of Forms 8282 filed during the year 14 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 15 If If "Yes," indicate the number of qualified intellectual property, did the organization file Form 8899 as required? 15 Sponsoring organization maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distribution under section 4968? 16 Section 501(c)(17) organizations. Enter: 17 If If the organization file Form 501(c		financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
Sa X	b	If "Yes," enter the name of the foreign country:			
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6 If "Yes," to line 5 a or 5b, did the organization file Form 8886 T9 8 Does the organization has 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? 8 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 Did the organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor? 8 Did the organization notify the donor of the value of the goods or services provided? 9 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 10 If "Yes," indicate the number of Forms 8282 filed during the year 11 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 12 Did the organization receive and contribution of qualified intellectual property, did the organization file Form 8899 as required? 13 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 14 If the organization received a contribution of dars, boats, siphanes, or other vehicles, did the organization flee Form 8899 as required? 15 Sponsoring organization make any taxable distributions under section 4966? 16 Sponsoring organization make any taxable distributions under section 4966? 17 Did the sponsoring organization make any taxable distributions under section 4966? 18 Did the sponsoring organization make a distribution to a donor, donor advised fund maintained by the sponsoring organization make a distribution to a donor, donor advised fund funds. 18 Did the sponsoring organization		See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
til "Yes," to line 5a or 5b, did the organization file Form 8886-T? 6b 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? 6c	5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
Section 501(c)(7) 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? Were not tax deductible? Organizations that may receive deductible contributions under section 170(c). 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? Tax X Tab If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? If Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Total the organization received as contribution of qualified intellectual property, did the organization file a Form 1098-C? Sponsoring organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966? Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders Bell the sponsoring organizations included on Part VIII, line 12 Section 501(c)(12) organizations. Enter: Section 501(c)(12) organizations. Enter: Section 501(c)(12) qualified nonprofit health insurance issuers. Section 501(c)(29) qualified nonprofit health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is required to maintain by			5b		Х
Section 501(c)(7) 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? Were not tax deductible? Organizations that may receive deductible contributions under section 170(c). 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? Tax X Tab If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? If Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Total the organization received as contribution of qualified intellectual property, did the organization file a Form 1098-C? Sponsoring organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966? Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders Bell the sponsoring organizations included on Part VIII, line 12 Section 501(c)(12) organizations. Enter: Section 501(c)(12) organizations. Enter: Section 501(c)(12) qualified nonprofit health insurance issuers. Section 501(c)(29) qualified nonprofit health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is required to maintain by	С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
b if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a bid the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b if "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization receive a payment in excess of \$75 made partly as a contribution of and partly for goods and services provided to the payor? 7b if "Yes," indicate the number of Forms 8282 filed during the year b Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c X 7d If "Yes," indicate the number of Forms 8282 filed during the year b Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8899 as required? 1f If the organization received a contribution of orar, boats, airplanes, or other vehicles, did the organization file a Form 1098-C7 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966? 9 Sponsoring organization make ac distribution to a donor, donor advisor, or related person? 9 Section 501(c)(12) organizations. Enter: 1 Initiation fees and capital contributions included on Part VIII, line 12 1 Section 501(c)(12) organizations. Enter: 2 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 2 Section 501(c)(12) organizations. Enter: 3 Section 501(c)(12) organizations. Enter: 4 Sectio					
b if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a bid the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b if "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization receive a payment in excess of \$75 made partly as a contribution of and partly for goods and services provided to the payor? 7b if "Yes," indicate the number of Forms 8282 filed during the year b Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c X 7d If "Yes," indicate the number of Forms 8282 filed during the year b Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8899 as required? 1f If the organization received a contribution of orar, boats, airplanes, or other vehicles, did the organization file a Form 1098-C7 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966? 9 Sponsoring organization make ac distribution to a donor, donor advisor, or related person? 9 Section 501(c)(12) organizations. Enter: 1 Initiation fees and capital contributions included on Part VIII, line 12 1 Section 501(c)(12) organizations. Enter: 2 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 2 Section 501(c)(12) organizations. Enter: 3 Section 501(c)(12) organizations. Enter: 4 Sectio		any contributions that were not tax deductible as charitable contributions?	6a		Х
Did the organizations that may receive adductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b If "Yes," did the organization notify the donor of the value of the goods or services provided? C Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? C M If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? To Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? To Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? B Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966? B Did the sponsoring organization make any taxable distributions under section 4966? B Did the sponsoring organization make any taxable distributions under section 4966? B Coros receipts, included on Form 990, Part VIII, line 12 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) C Section 501(c)(12) organizations. Enter: Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) S Section 501(c)(12) organizations. Enter: B It we will be organization included on Part VIII, line 12, for public use of club facilities S Section 501(c)(12) organizations. S Section 501(c)(þ				
Did the organizations that may receive adductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b If "Yes," did the organization notify the donor of the value of the goods or services provided? C Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? C M If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? To Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? To Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? B Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966? B Did the sponsoring organization make any taxable distributions under section 4966? B Did the sponsoring organization make any taxable distributions under section 4966? B Coros receipts, included on Form 990, Part VIII, line 12 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) C Section 501(c)(12) organizations. Enter: Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) S Section 501(c)(12) organizations. Enter: B It we will be organization included on Part VIII, line 12, for public use of club facilities S Section 501(c)(12) organizations. S Section 501(c)(were not tax deductible?	6b		
b if "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d if "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c X d if "Yes," indicate the number of Forms 8282 filed during the year 7d b Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7f g if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? f Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C7 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 49667 9 Sponsoring organization make any taxable distributions under section 49667 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 22 Section 501(c)(12) organizations. Enter: a If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b b If "Yes," 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 in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves on ha	7		70.11	3.1	1
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d if "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f Jif the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966? 9 Sponsoring organization make any taxable distributions under section 4966? 9 Section 501(c)(7) organizations. Enter: 1 Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities D Gross income from members or shareholders B Gross income from ther sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 22 Section 501(c)(12) organizations. Enter: 11b 17c 17d X X X X X X In Itia D B If "Yes," enter the amount of tax-exempt interest received or accrued during the year 11a D B If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12a In Itia In Itia D B If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13a In Itia D B If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13b D B Interest the amount of reserves on hand D Id the organization is licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organizatio	а	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?	7a		X
to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 bid the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 if John the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7 if If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7 if John the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10 Section 501(c)(7) organizations. Enter: a Gross income from members or shareholders B Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 2 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 13c 14a X 15b 16f "Yes," has it filed a Form 720 to report these payments? If "No, " provide an	b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
d if "Yes," indicate the number of Forms 8282 filled during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 76 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 77 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 78 Note. Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? Bold the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Did be Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from members or shareholders b Gross income from them.) 22 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 In lieu of Form 1041? 12a 13b 15f "Yes," enter the amount of tax-exempt interest received or accrued during the year 13a Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves on hand c Enter the amount of reserves on hand b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
be 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? f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? f If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C7 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organization make any taxable distributions under section 4966? 9 Sponsoring organization make a distribution under section 4966? 9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Gross income from members or shareholders a Gross income from them sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 2 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 1 If "Yes," enter the amount of tax-exempt interest received or accrued during the year 1 Ith 1 Section 501(c)(29) qualified nonprofit health insurance issuers. 1 Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 Enter the amount of reserves on hand 1 Enter the amount of reserves on hand 1 Is a Wall the organization is licensed		to file Form 8282?	7c		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make and istribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 5 Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11a 12a Section 501(c)(7) organizations. Enter: a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12b 13 Section 501(c)(29) qualifiled nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 4 Did the organization receive any payments for indoor tanning services during the tax year? 14a X 14b 14b	d	If "Yes," indicate the number of Forms 8282 filed during the year	w	WE	0 41 1
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-C7 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from ther sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? 12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 in more than one state? Enter the amount of reserves on hand 4 Did the organization receive any payments for indoor tanning services during the tax year? 14a X 14b If "Yes," has it filed a Form 720 to report these payments? If *No," provide an explanation in Schedule O.	е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? Sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Section 501(c)(12) organizations. Enter: If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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. Enter the amount of reserves on hand If the organization receive any payments for indoor tanning services during the tax year? Ital X Ital SCHORD AND AND AND AND AND AND AND AND AND AN	f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Gross income from members or shareholders Gross income from ther sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 Enter the amount of reserves on hand Center the amount of reserves on hand If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. In the page of	g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 4a 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	h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13b 2 In the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	(51)	181	
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? 9b 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 1 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13b c Enter the amount of reserves on hand 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b		sponsoring organization have excess business holdings at any time during the year?	8		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders B Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 Enter the amount of reserves on hand Iga Isb If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. Ida Isb If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. Ida Isb	9	Sponsoring organizations maintaining donor advised funds.	56		11 6 1
Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 2a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 3 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 4a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 1 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 2 Enter the amount of reserves any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14a X 14b	0	Section 501(c)(7) organizations. Enter:			
a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13c Lab 13b 13c 14a X If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	а	Initiation fees and capital contributions included on Part VIII, line 12		100	100
a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand da Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	19	V.	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 13b 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 If Enter the amount of reserves on hand 13c If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	1	1 1	(1,21	7.	
amounts due or received from them.) 2a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 25 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b			10		
Bection 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	b	Gross income from other sources (Do not net amounts due or paid to other sources against	98,0	i inu	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13c 14a 14b 17b 17b 17c 18b 18c 18c 18c 18c 18c 18c 18				. Yv	
Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13c 4a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	b		25,14		
Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand lightharpoonup lightharpoon	3	Section 501(c)(29) qualified nonprofit health insurance issuers.	Sm		:6.5
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 c Enter the amount of reserves on hand lightharpoonup lighth	а		13a		
organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 4a Did the organization receive any payments for indoor tanning services during the tax year? 4b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b		Note. See the instructions for additional information the organization must report on Schedule O.		EVII.	
c Enter the amount of reserves on hand 4a Did the organization receive any payments for indoor tanning services during the tax year? 4b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	þ	Enter the amount of reserves the organization is required to maintain by the states in which the	THE.	, Y	
4a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14a X			311		
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			- 11	018	
					X
	b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		000	

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			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			1
	If there are material differences in voting rights among members of the governing body, or if the governing	W 3		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	Dive		
b	Enter the number of voting members included in line 1a, above, who are independent		- 111	T/I
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	34	8 119	STA
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	1		
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	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	9		X
Sec	tion 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?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		itiw i	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			0
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		15.5	
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b		X
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		150	1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	100		3-0
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's		100	
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	availah	le	
	for public inspection. Indicate how you made these available. Check all that apply.		-	
	Own website Another's website X 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	d finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	EVERETT BURNHAM - 315-637-6374			
	300 ORCHARD STREET, FAYETTEVILLE, NY 13066			

Form 990 (2016)

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.

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average hours per week	offl	not c , unle cer ar	Pos heck ss pe id a d	itior more rson lirecto	lhan Is bot or/trus	one h an stee)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) JUDY JONES	1.00									
VICE PRESIDENT		X		Х				0.	0.	0
(2) BETSY BOWER	1.00									
TRUSTEE		X			_			0.	0.	0,
(3) JIM BRULE	2.00							_		
PRESIDENT		Х		X				0.	0.	0
(4) DAVID PASINSKI	1.00	ļ						_		
TRUSTEE		Х						0.	0.	0,
(5) KEITH BYBEE	1.00									
TRUSTEE		X	_	_		_		0.	0.	0
(6) SUSAN CONSIDINE	40.00									
EXECUTIVE DIRECTOR				X		_		103,501.	0.	2,904
8.										
					П					
				7						

Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, and	d Hi	gne	st C	compensated Employe	es (continued)				
(A)	(B)		14.	(0	C)			(D)	(E)			(F)	
Name and title	Average	(do	not c	Posi	ition	than	one	Reportable	Reportable		E:	stimat	ed
	hours per	ьох	, unle	ss pei	rson	is bot	h an	compensation	compensation		ar	nount	of
	week (list any	-	JO, UI		10010	7,1103	100,	from	from related			other	
	hours for	direct				,		the organization	organization (W-2/1099-MI			npens: rom th	
	related	10 aa	stee			nsate		(W-2/1099-MISC)	(***2710001811	50)		janiza	
	organizations	1 trust	nal tru		эже	ошо		, ,			1	d rela	
	below line)	ndividual trustee or director	Institutional trustee	Offlicer	Key employee	Highest compensated employee	F ormer				org	anizat	ions
	iirie)	트	Ins	8	Key	를등	균						
		_	_		_	Н	_						
							-			_	-		
						П							

			-		_								
-			-	-	-					-		-	
		_	-		=	Н	-			_			
1b Sub-total								103,501.		0.		2,9	04
c Total from continuation sheets to Part VI								0.		0.			0
d Total (add lines 1b and 1c)							•	103,501.		0.		2,9	04
2 Total number of individuals (including but n							o re	eceived more than \$100	,000 of reportab	le			
compensation from the organization													
										-		Yes	No
3 Did the organization list any former officer,										1	1.0		
line 1a? If "Yes," complete Schedule J for s											3		X
4 For any individual listed on line 1a, is the su								•	•				v
and related organizations greater than \$150											4		Х
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com	18964							ed organization or indivi	dual for services		5		х
Section B. Independent Contractors	piete ocheduli	5 0 11	UI SC	ICIT	06/3					2000	5		
Complete this table for your five highest co	mpensated inc	dene	ende	nt c	ontr	acto	rs t	hat received more than	\$100,000 of con	nens	ation	from	
the organization. Report compensation for	20 10 01									,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ation		
(A)							T	(B)			((>)	
Name and business	address							Description of s	ervices	С	ompe	nsatio	n
VIP STRUCTURES INC.													
ONE WEBSTER'S LANDING, SY	RACUSE,		1X	13	320) 2		GENERAL CONT	RACTING		16	6,9	44.
		_	-	_		_	-					_	
							- 1						
							+						
									ŀ				
							+						

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

Form 990 (2016) FAYETTE
Part VIII Statement of Revenue

		Check if Schedule O contains a	response	or note to any lin	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
nts ts	1	a Federated campaigns	1a					
iral		b Membership dues						The second
S,C		c Fundraising events	1c					
ar aff		d Related organizations						
s, C		e Government grants (contributions)	1e	2,992.				
noi s		f All other contributions, gifts, grants, and			Contract Contract			
the the		similar amounts not included above	1f 1	,780,418.		Mary Service No. 71 (42)		
55		g Noncash contributions included in lines 1a-1f: \$		13,938.	5 7 1 - 0 - 0 3			
Contributions, Gifts, Grants and Other Similar Amounts	ı	h Total. Add lines 1a-1f			1,783,410.			
				Business Code				
ĕ	2	a LIBRARY FINES AND	FEES	611710	52,829.	52,829.		
ه ∑َ		b						
Program Service Revenue	,	c						
am	١,	d						
og R	١,	e						
P	1	f All other program service revenue						
		g Total. Add lines 2a-2f			52,829.			
	3							
		other similar amounts)			618.	618.		
	4	Income from investment of tax-exem						
	5	Royalties		> [
			Real	(ii) Personal		mal lower it sail		May Barrier in
	6 :	a Gross rents				ACT A SELECTION OF		
		b Less: rental expenses						
		c Rental income or (loss)						
		d Net rental income or (loss)		>				
		144,450,14	ecurities	(ii) Other		Market Berry		
		assets other than inventory				Link of Street		
	1	b Less: cost or other basis						Se 14
		and sales expenses						T.
	١,	c Gain or (loss)						
		d Net gain or (loss)		>				
n)		a Gross income from fundraising even					201	
evenue		including \$	of					
eve		contributions reported on line 1c). Se	ee					
Other Re		Part IV, line 18				of San Johnson St. 5		
the		b Less: direct expenses						
0		c Net income or (loss) from fundraising		>				
		a Gross income from gaming activities	•		3.	A CONTRACTOR OF THE PERSON OF		3 1 1 1 1 1 1
		Part IV, line 19						V 100
	ı	b Less: direct expenses						
		c Net income or (loss) from gaming ac						
		a Gross sales of inventory, less returns	3				HE STATE	DIM A VILLE
		and allowances	а	33,128.		Stightend from		North Miles
	ŀ	b Less: cost of goods sold		20,086.				3 3 3 3
		c Net income or (loss) from sales of inv		>	13,042.	13,042.		
Ч		Miscellaneous Revenue		Business Code			William William	
	11 a	a						
	ı	b						
	(С						
	(d All other revenue						
		e Total. Add lines 11a-11d		>			ENERGY P	
	12	Total revenue. See instructions.			1,849,899.	66,489.	0.	0.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (D) Do not include amounts reported on lines 6b, Total expenses Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses 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, 106,405. 77,425. 28,980. trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 968,522. 680,220. 288,302. Other salaries and wages Pension plan accruals and contributions (include 17,385. 11,300. 6,085 section 401(k) and 403(b) employer contributions) 20,203. 20,203. Other employee benefits 9 55,908. 79,869. 23,961. 10 Payroll taxes 11 Fees for services (non-employees): a Management 6,922. 2,423. 4,499. b Legal c Accounting **d** Lobbying Professional fundraising services, See Part IV, line 17 Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) Advertising and promotion 12 60,446. 54,401. 6,045. 13 Office expenses 14 Information technology 15 Royalties 42,858. 38,572. 4,286. 16 Occupancy 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 23,018. 23,018. 19 Conferences, conventions, and meetings 28,524. 25,672. 2,852. 20 Interest Payments to affiliates 21 102,625. 102,625. Depreciation, depletion, and amortization 22 18,347. 18,347. 23 Insurance 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.) 110,525. BOOKS AND SERIALS 110,525. 74,198. 74,198. VIDEO, AND ELECT AUDIO, 70,005. 70,005. c REPAIRS & MAINTENANCE d OTHER EXPENSES 52,996. 47,696. 5,300. 72,724. 72,623. 101. e All other expenses 0. 1,855,572. 1,485,161. 370,411. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here If following SOP 98-2 (ASC 958-720)

Pa	rt 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
	1	Cash - non-interest-bearing	5,123.	1	3,170
	2	Savings and temporary cash investments	1,768,515.	2	1,591,104
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	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			
ts		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
⋖	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 3,318,259.			
	b	Less: accumulated depreciation 10b 1,143,015.	2,090,662.	10c	2,175,244
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	2 064 200	15	0 500 540
	16	Total assets. Add lines 1 through 15 (must equal line 34)	3,864,300.	16	3,769,518
	17	Accounts payable and accrued expenses	135,330.	17	81,375.
	18	Grants payable	042 407	18	005 000
	19	Deferred revenue	843,187.	19	895,292
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
les	22	Loans and other payables to current and former officers, directors, trustees,		200	
Ħ		key employees, highest compensated employees, and disqualified persons.			
Liabilities		Complete Part II of Schedule L	E72 070	22	E01 201
_	23	Secured mortgages and notes payable to unrelated third parties	573,879.	23	521,321.
	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	40,619.		5 010
		Schedule D	1,593,015.	25	5,918. 1,503,906.
-	26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ ၗ and	1,333,013.	26	1,303,300.
				10-77	
čes		complete lines 27 through 29, and lines 33 and 34.	2,271,285.	07	2,265,612.
Net Assets or Fund Balances	27	Unrestricted net assets	2,211,203.	27	2,203,012.
ä	28	Temporarily restricted net assets Permanently restricted net assets		28	
ב	29	Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here		29	
Ę				e Til	
0		and complete lines 30 through 34.	WILL SITE IS	20	
Sec	30	Capital stock or trust principal, or current funds		30	
AS.	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net	32	Retained earnings, endowment, accumulated income, or other funds	2,271,285.	32	2,265,612.
-	33	Total net assets or fund balances	3,864,300.	33	3,769,518.
	34	Total liabilities and net assets/fund balances	3,004,300	34	3,709,310.

Pa	Heconciliation 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	1,849	
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,855	
3	Revenue less expenses. Subtract line 2 from line 1	3		,673.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,271	,285.
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	10	2,265	,612.
Pa	rt XIII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			🖂
			Y	es No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.	÷ ^	
2a			2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed		10,10	
	separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?		2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat			
	consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis		District In	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,	110	8
	review, or compilation of its financial statements and selection of an independent accountant?		2c	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si.	ngle Audit		
	Act and OMB Circular A-133?	10.02.264928468	3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ired audit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		Зь	

Form 990 (2016)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

FAYETTEVILLE FREE LIBRARY 15-0543618 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.) 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). 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 l 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 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 L 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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. 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. 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. 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. Type !!! 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. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

Schedule A (Form 990 or 990-EZ) 2016 FAYETTEVILLE FREE LIBRARY 15-05436 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.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	89,187.	44,698.	53,070.	362,493.	29,565.	579,013.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf	1,357,572.	1,445,030.	1,535,554.	1,640,032.	1,739,907.	7,718,095.
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge		L				
4	Total. Add lines 1 through 3	1,446,759.	1,489,728.	1,588,624.	2,002,525.	1,769,472.	8,297,108.
5	The portion of total contributions					1	
	by each person (other than a					ME ALL TANKS	
	governmental unit or publicly	x. salim tariya			The state of		
	supported organization) included					N - S - Wall	
	on line 1 that exceeds 2% of the		Sila walki ini i	XI XI X		=1 П. ОтО	
	amount shown on line 11,					San San	
	column (f)	X - X 2 50 50 5 K					
6	Public support. Subtract line 5 from line 4.	والادر فروالمعتدين	West Control				8,297,108.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning In) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	1,446,759.	1,489,728.	1,588,624.	2,002,525.	1,769,472.	8,297,108.
8	Gross income from interest,						7
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	1,514.	1,042.	652.	604.	618.	4,430.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital			*)			
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10			MG MY			8,301,538.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	399,426.
13	First five years. If the Form 990 is for	r the organization's	first, second, third	l, fourth, or fifth ta	x year as a section	n 501(c)(3)	
	organization, check this box and stop						▶□
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2016 (I	line 6, column (f) di	vided by line 11, co	olumn (f))		14	99.95 %
15	Public support percentage from 2015	Schedule A, Part	II, line 14	O111 COLUMN COLUMN		15	99.70 %
16a	33 1/3% support test - 2016. If the c	organization did no	t check the box on	line 13, and line 1	14 is 33 1/3% or m	ore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization				► X
b	33 1/3% support test - 2015. If the c						
	and stop here. The organization quali	ifies as a publicly s	supported organiza	tion	(10.00000000000000000000000000000000000		
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	is box and stop h	ere. Explain in Par	t VI how the organ	ization
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances test						
	more, and if the organization meets th	ne "facts-and-circu	mstances" test, ch	eck this box and s	stop here. Explain	in Part VI how the	
	organization meets the "facts-and-circ						
18	Private foundation. If the organizatio						
_							

Schedule A (Form 990 or 990-EZ) 2016 FAYETTEVILLE FREE LIBRARY 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

Section A. Public Support	low, please com	piete Part II.)				
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and		1-7-0.0	15/2514	19,2010	10,2010	. , rotai
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
l. al au la la la la						
or expended on its benair The value of services or facilities						
furnished by a governmental unit to						
the organization without charge					1	
6 Total. Add lines 1 through 5					<u> </u>	
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	O WILLIAM STATE				TISTUES I	
8 Public support. (Subtract line 7c from line 6.) Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(a) 2014	(4) 2015	(=) 0016	(f) Takal
9 Amounts from line 6	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
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						
anguired offer June 20, 1075						
[1411411441]						
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.)		l				
14 First five years. If the Form 990 is for t	•			•	, , , , ,	
check this box and stop here		•				>
Section C. Computation of Public					Frank -	
15 Public support percentage for 2016 (lin					15	%
16 Public support percentage from 2015 S					16	%
Section D. Computation of Invest						
17 Investment income percentage for 201					17	%
18 Investment income percentage from 20					18	%
19a 33 1/3% support tests - 2016. If the o	-					P-1
more than 33 1/3%, check this box and	stop here. The	organization qual	ifies as a publicly s	supported organiz	ation	▶□
b 33 1/3% support tests - 2015. If the o	rganization did r	not check a box on	line 14 or line 19a	a, and line 16 is mo	ore than 33 1/3%, a	ind
line 18 is not more than 33 1/3%, checl	k this box and s	top here. The orga	ınization qualifies a	as a publicly supp	orted organization	
20 Private foundation. If the organization	did not check a	box on line 14, 19	a, or 19b, check th	nis box and see ins	structions	▶□

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 (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		
За	1000	
A)	1950)	
3b		
100	10.0	N. C.
3c	Ē.,	l T
4a	W.	
	11.00	
4b		
4c	JII (S	
	1116	
	2,1	
5a	Total	n'i i
5b		
5c	U, A	
6		
7		
8	J	
9a		
9b	6150	
. 6	Hői	518
9c		ŦV.s
Yes and	AN-	
10a		
10b 90 or 99		

Pa	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	W, 15		
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	999	11	
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		_
	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		
Sec	tion B. Type I Supporting Organizations		I	N1.
	Di Mina di un describe de la compania del compania del compania de la compania del	0.117	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		. 5. R	
	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		- 1	
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	342.000	
2	Did the organization operate for the benefit of any supported organization other than the supported	San in the	0,25	
2	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	113.2	-30	
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	12.5	3 "	
	supervised, or controlled the supporting organization.	2	-	
Sec	tion C. Type II Supporting Organizations		1	
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	12 St 1		
- 65	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	100		
	or management of the supporting organization was vested in the same persons that controlled or managed	11000		
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			1
	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		- 71	
	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		JON.	
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	1,000	MILE.	
	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	1000	New Y	
	significant voice in the organization's investment policies and in directing the use of the organization's	=16 m	H.	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	muzzeli,	3.80	
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see Instructions).			
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.	turotiona	at .	
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	liuctions	Tanada and a second	No
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI Identify			
		12.0	11 (20)	
	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	1	## S	
	that these activities constituted substantially all of its activities.	2a		
h	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	20	7 11	MAD
D	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		
2	Parent of Supported Organizations. Answer (a) and (b) below.			
3	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	5 50		
a	trustees of each of the supported organizations? Provide details in Part VI.	3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		TOTAL	
U	of its supported organizations? If "Yes." describe in Part VI, the role played by the organization in this regard.	3b		

	other Type III non-functionally integrated supporting organizations must co	mplete Se	ctions A through E.	
ect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
_	Average monthly cash balances	1b		
_	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
_	Discount claimed for blockage or other	120.0		
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to	E		
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionall	y integrate	d Type III supporting org	anization (see

Schedule A (Form 990 or 990-EZ) 2016

	Type in Non-i directionally integrated 509	(a)(b) Supporting Orga	(continued)	
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	s	
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	he organization is responsive)	
	(provide details in Part VI). See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
4	Distributable amount for 2016 from Section C line 6			
1 2	Distributable amount for 2016 from Section C, line 6 Underdistributions, if any, for years prior to 2016 (reason-			
2				
	able cause required- explain in Part VI). See instructions			
3_	Excess distributions carryover, if any, to 2016:			
a				
b	5 2010			
	From 2013			
_	From 2014			
	From 2015			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4	tare in the same and a same		
5	Remaining underdistributions for years prior to 2016, 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 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2017. Add lines 3j and 4c			
8	Breakdown of line 7:			
а				
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

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.)
)=	
\ <u></u>	

Schedule A (Form 990 or 990-EZ) 2016 FAYETTEVILLE FREE LIBRARY

15-0543618 Page 8

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.

► Information about Schedule D (Form 990) and its instructions is at www.lrs.gov/form990.

OMB No. 1545-0047 16 Open to Public Inspection

Name of the organization FAYETTEVILLE FREE LIBRARY Employer identification number 15-0543618

Pai	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the					
	organization answered "Yes" on Form 990, Part IV, lir	ne 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)	Mar				
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 advi	sed funds			
	are the organization's property, subject to the organization's	=				
6	Did the organization inform all grantees, donors, and donor a					
	for charitable purposes and not for the benefit of the donor of					
	impermissible private benefit?		Yes No			
Pai						
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).				
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a his	torically important land area			
	Protection of natural habitat	Preservation of a cer	tified historic structure			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a quali	fied 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			
а	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements		2b			
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c			
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struc	ture			
	listed in the National Register		2d			
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	e organization during the tax			
	year -					
4	Number of states where property subject to conservation ea	sement is located -				
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of				
	violations, and enforcement of the conservation easements i	t holds?	Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cor	nservation easements during the year			
	<u> </u>					
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	ation easements during the year			
	▶ \$					
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170				
	and section 170(h)(4)(B)(ii)?					
9	In Part XIII, describe how the organization reports conservation					
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes	the organization's accounting for			
_	conservation easements.					
Pai	t III Organizations Maintaining Collections o		otner Similar Assets.			
	Complete if the organization answered "Yes" on Form					
1a	If the organization elected, as permitted under SFAS 116 (AS					
	historical treasures, or other similar assets held for public ex		ance of public service, provide, in Part XIII,			
	the text of the footnote to its financial statements that descr					
b	If the organization elected, as permitted under SFAS 116 (AS	• • • • • • • • • • • • • • • • • • • •				
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pu	ublic service, provide the following amounts			
	relating to these items:					
	(i) Revenue included on Form 990, Part VIII, line 1					
	000000000000000000000000000000000000000					
2	If the organization received or held works of art, historical tre		al gain, provide			
	the following amounts required to be reported under SFAS 1					
а	Revenue included on Form 990, Part VIII, line 1					
h	Assets included in Form 990 Part X		SCHOOLSONS S			

Part	ш	Or	ganı	za	tio	n
		-				_

-7 Δ	YETTE	777.77	FREE	LIBE	ZZZV
		^ T TI TI L	LICHE	- 1	αr

	Carlo La francia Carlo	VILLE FREE)543618 Page 2
Pai	t III Organizations Maintaining C	collections of A	rt, Historical 1	reasures, or Ot	her Similar As	sets(continued)
3	Using the organization's acquisition, access	ion, and other record	ds, check any of th	e following that are a	significant use of	its collection items
	(check all that apply):					
а	Public exhibition	C	Loan or ex	change programs		
b	Scholarly research	e	Other			
C	Preservation for future generations					
4	Provide a description of the organization's co	ollections and explai	in how they furthe	the organization's ex	xempt purpose in I	Part XIII.
5	During the year, did the organization solicit of					
	to be sold to raise funds rather than to be m					Yes No
Pai	t IV Escrow and Custodial Arran	-	ete if the organizat	ion answered "Yes" o	on Form 990, Part	IV, line 9, or
	reported an amount on Form 990, Pa					
1a	Is the organization an agent, trustee, custod					
	on Form 990, Part X?	55355559+100+1004+301+100			******************	Yes No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing table:			
						Amount
С	Beginning balance	imminimming interior	eraniotario mistratores			
	Additions during the year					
е	Distributions during the year					
f	Ending balance					
	Did the organization include an amount on F					— Yes No
-	If "Yes," explain the arrangement in Part XIII.					
Pai	t V Endowment Funds. Complete					. Lave
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years ba	ck (e) Four years back
1a	Beginning of year balance			-		
b	Contributions			-		
	Net investment earnings, gains, and losses			+		
	Grants or scholarships			+	_	
е	Other expenditures for facilities					
	and programs				-	
f	Administrative expenses			 	-	
g	End of year balance		//	(-)\		
2	Provide the estimated percentage of the cur			(a)) held as:		
a	Board designated or quasi-endowment		%			
	Permanent endowment	%				
С	Temporarily restricted endowment	%				
_	The percentages on lines 2a, 2b, and 2c sho					
3 a	Are there endowment funds not in the posses.	ession of the organiz	ation that are neid	and administered to	r the organization	Tv Tv
	by:					Yes No
	(i) unrelated organizations					
	(ii) related organizations If "Yes" on line 3a(ii), are the related organizations					
b				160000000000000000000000000000000000000		3b
Day	Describe in Part XIII the intended uses of the		owment runds.			
Fai	Complete if the organization answere		0. Port IV-line 11a	Soo Form 000 Part	V line 10	
						(d) Pook volue
	Description of property	(a) Cost or of basis (investr		1 , ,	Accumulated lepreciation	(d) Book value
_	l and	100	000.	o (outlot)	ioprodiation	90,000.
	Land	0 700			689,497.	2,040,362.
	Buildings	***	000.		005,457.	2,040,302.
	Leasehold improvements	405	283		447,014.	38,269.
	Equipment		117.		6,504.	6,613.
	Other			100)	0,304.	2,175,244.
Tota	. Add lines 1a through 1e. (Column (d) must e	quai romi 990, Part	A, column (B), line	10C.)	<u>P</u>	4,113,444.

Schedule D (Form 990) 2016 FAYETTEVILLE	· FREE LIBRA	ρV	15	-0543618 Page
Part VII Investments - Other Securities.	TREE HIDRA	11/1	13	0343010 Page
Complete if the organization answered "Yes" o	n Form 990, Part IV, lir	ne 11b. See Form 990,	Part X, line 12.	
(a) Description of security or category (Including name of security)	(b) Book value			-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes" or				
(a) Description of investment	(b) Book value	(c) Method of va	aluation: Cost or end	-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		s Barrier V		
Part IX Other Assets.	(202020)			
Complete if the organization answered "Yes" o		ie 11d. See Form 990,	Part X, line 15.	2010
9908	escription			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(8)				
(9)			900	
Total. (Column (b) must equal Form 990, Part X, col. (B) line	75.)		<u>></u>	
Part X Other Liabilities.			nasan	
Complete if the organization answered "Yes" o	n Form 990, Part IV, lin		990, Part X, line 25.	
1. (a) Description of liability		(b) Book value		

1.	(a) Description of liability	(b) Book value	
(1)	Federal income taxes		
(2)	CAPITAL LEASE OBLIGATIONS	5,918.	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	5,918.	

^{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 X

	rt XI Reconciliation of Revenue per Audited Financial Statem	ents With	Revenue per F	eturr).
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.	10.00 S C C C C C C C C C C C C C C C C C C		
1	Total revenue, gains, and other support per audited financial statements	10-1-10-1-11-1-11-11-11-1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1	1,869,985.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			N T	
а	Net unrealized gains (losses) on investments	2a			
b			13,938.		
С	Recoveries of prior year grants				
d					
е	Add lines 2a through 2d			2e	13,938.
3	Subtract line 2e from line 1			3	1,856,047.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b			-6,148.		
¢	Add lines 4a and 4b		Charles Copper Copper Copper	4c	-6,148.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,849,899.
	rt XII Reconciliation of Expenses per Audited Financial Stater				rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.			
1	Total expenses and losses per audited financial statements			1	1,875,658.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1920 46			
а	Donated services and use of facilities	2a	13,938.	Pb= 1	
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)		6,148.		
е	Add lines 2a through 2d			2e	20,086.
3	Subtract line 2e from line 1			3	1,855,572.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1;	rail 12			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
	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	1,855,572.
Pai	t XIII Supplemental Information.				
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa	rt IV, lines 1b	and 2b; Part V, line	4; Part	X, line 2; Part XI,
H	Od and 4h, and Dart VII. lines Od and 4h. Also complete this part to provide any as				

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 LIBRARY IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND IS NOT A PRIVATE FOUNDATION WITHIN THE MEANING OF SECTION 509(A) OF THE CODE.

THE LIBRARY EVALUATES ALL SIGNIFICANT TAX POSITIONS AS REQUIRED BY ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA. AS OF DECEMBER 31, 2016, THE LIBRARY DOES NOT BELIEVE IT HAS TAKEN ANY TAX POSITIONS THAT WOULD REQUIRE THE RECORDING OF ANY ADDITIONAL TAX LIABILITY NOR DOES IT BELIEVE THERE ARE ANY UNREALIZED TAX BENEFITS THAT WOULD EITHER INCREASE OR DECREASE WITHIN THE NEXT YEAR.

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2016
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

FAYETTEVILLE FREE LIBRARY

Employer identification number 15-0543618

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: AND INFORMATION. FORM 990, PART VI, SECTION B, LINE 11B: A COPY OF THE FORM 990 IS PROVIDED TO ALL MEMBERS OF THE BOARD OF TRUSTEES PRIOR TO ITS FILING, WHO THEN REVIEW AND APPROVE OF ITS FILING. FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD OF TRUSTEES DISCUSSES THE ORGANIZATION'S CONFLICT OF INTEREST POLICY AND THE APPLICATION THEREOF AT LEAST ONCE PER YEAR. FORM 990, PART VI, SECTION B, LINE 15A: OFFICER COMPENSATION IS DETERMINED BY THE INDEPENDENT BOARD OF TRUSTEES, UTILIZING SALARY DATA FOR OFFICER COMPENSATION AT SIMILARLY-SIZED EXEMPT ORGANIZATIONS IN THE AREA. THIS PROCESS AND DETERMINATION IS DOCUMENTED IN THE MINUTES OF THE MEETINGS OF THE BOARD OF TRUSTEES ANNUALLY. FORM 990, PART VI, SECTION C, LINE 19: THE FAYETTEVILLE FREE LIBRARY MAKES AVAILABLE ALL GOVERNING DOCUMENTS, POLICIES AND FINANCIAL STATEMENTS UPON REQUEST, AS REQUIRED BY LAW. DISCLOSURES NOT REQUIRED BY LAW ARE HANDLED BY THE BOARD OF TRUSTEES ON A CASE-BY-CASE BASIS.

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization For calendar year 2016, or fiscal year beginning _______, 2016, and ending _______

2016	and	endina	

OMB No. 1545-1878

Department of the Treasury	Do not send to the IRS. Keep for your records.		2010
Internal Revenue Service	▶ Information about Form 8879-EO and its instructions is at www.irs.gov/form8	3879eo.	
Name of exempt organization		Employer	identification number
FAYETTEVILLE	FREE LIBRARY	15-0	543618
Name and title of officer	THE HIDIANI	113 0	242010
SUSAN CONSIDI	NE		
EXECUTIVE DIR			
	Return and Return Information (Whole Dollars Only)		
	rn for which you are using this Form 8879-EO and enter the applicable amount, if any, f	rom the retu	urn. If you check the box
on line 1a, 2a, 3a, 4a, or 5	a, below, and the amount on that line for the return being filed with this form was blank ank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicat	, then leave	line 1b, 2b, 3b, 4b, or 5b,
1a Form 990 check here	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	1,849,899.
2a Form 990-EZ check he	re b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check	re b Total revenue, if any (Form 990-EZ, line 9) here b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check he	re b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here			
Part II Declarat	ion and Signature Authorization of Officer		
further declare that the amintermediate service provide a) an acknowledgement of the date of any refund. If a debit) entry to the financial return, and the financial rish 1-888-353-4537 no later the processing of the electron payment. I have selected a organization's consent to expend the service of the s	mpanying schedules and statements and to the best of my knowledge and belief, they ount in Part I above is the amount shown on the copy of the organization's electronic refer, transmitter, or electronic return originator (ERO) to send the organization's return to freceipt or reason for rejection of the transmission, (b) the reason for any delay in proc pplicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an institution account indicated in the tax preparation software for payment of the organistitution to debit the entry to this account. To revoke a payment, I must contact the U.S an 2 business days prior to the payment (settlement) date. I also authorize the financial c payment of taxes to receive confidential information necessary to answer inquiries an a personal identification number (PIN) as my signature for the organization's electronic reflectronic funds withdrawal.	return. I conso the IRS and essing the real electronic for zation's fedes. Treasury For Institutions and resolve is	sent to allow my d to receive from the IRS eturn or refund, and (c) funds withdrawal (direct eral taxes owed on this Financial Agent at involved in the esues related to the
Officer's PIN: check one	•		12066
A lauthorize GR	OSSMAN ST. AMOUR CPAS PLLC	to enter m	y PIN 13066 Enter five numbers, b
	ERO firm name		do not enter ali zeros
is being filed witl enter my PIN on As an officer of t indicated within	on the organization's tax year 2016 electronically filed return. If I have indicated within a a state agency(ies) regulating charities as part of the IRS Fed/State program, I also at the return's disclosure consent screen. The organization, I will enter my PIN as my signature on the organization's tax year 2016 this return that a copy of the return is being filed with a state agency(ies) regulating charter my PIN on the return's disclosure consent screen. Date	uthorize the	aforementioned ERO to
Part III Certifica	tion and Authentication		
	ur six-digit electronic filing identification		
•	your five-digit self-selected PIN. 16421213060 do not enter all zeros		
	neric entry is my PIN, which is my signature on the 2016 electronically filed return for the g this return in accordance with the requirements of Pub. 4163 , Modernized e-File (Meiss Returns.		
ERO's signature	Thorsam St Arow CPAs Date > 04.	/07/17	
	ERO Must Retain This Form - See Instructions		
	Do Not Submit This Form To the IRS Unless Requested To Do	o So	*