# Form **990**

**Return of Organization Exempt From Income Tax** 

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

OMB No. 1545-0047

Use Only

		of the Treasury nue Service	G	o to www.irs.gov/	Form990 for	instructions and	the latest	information.		Inspection			
				ear beginning					023				
_	Check if		of organization		•			D Employer is	dentific	ation number			
	applicabl	e:	3					' 1					
	Addre chang	ss FAYE	TTEVILLE	FREE LIB	RARY								
	Name chang		ousiness as					15-0543618					
	Initial return			O. box if mail is not d	elivered to stre	et address)	Room/suite	E Telephone	number				
Ē	Final return	Final   300 OPCHARD STREET											
		termin-											
	Amen		TTEVILLE			3 1		H(a) Is this a g	roup re	3,290,414.			
	Applic	F Name a	and address of pri	incipal officer:HE	ATHER M	IATZEL		for subord					
	pendi		AS C ABO					H(b) Are all subor					
Т	Tax-exe	empt status:	<b>X</b> 501(c)(3)	501(c) (	) (insert no	o.) 4947(a)(1)	or 52			list. See instructions			
	Websit		FFLIB.OR	. , ,	, (	, (,(,		H(c) Group ex					
			<b>X</b> Corporation	Trust A	Association	Other	L Yea			State of legal domicile: NY			
	art I	Summary			_		, =						
_	1	Briefly describ	be the organization	n's mission or mos	st significant a	activities: THE	FAYET'	TEVILLE F	'REE	LIBRARY			
Governance	'	SUPPORT	'S THE EV	OLVING NE	EDS OF	THE LOCAL	COMM	UNITY BY	PROV	VIDING			
na	2	Check this bo	ox if the	e organization disc	ontinued its o	perations or dispo	sed of mo	e than 25% of its	net as	sets.			
Š	3			the governing bod					1 - 1	9			
Ğ	4		•	•		y (Part VI, line 1b)			•	9			
Š						Part V, line 2a)				33			
Activities	6									0			
냙	7 a					ne 12				0.			
Ă	l "h					I, line 11				0.			
	+~	14Ct di li ciated	business taxable	c income nominon	11 330 1,1 411	1, 1110 11		Prior Year	.   10	Current Year			
_	8	Contributions	and grants (Part	VIII line 1h)				1,974,9	20.	3,283,245.			
Jue	9		rice revenue (Part					12,5		963.			
Revenue	10	•	•						32.	6,206.			
æ	11					nd 11e)		-2,1		0,200			
						olumn (A), line 12)		1,987,1		3,290,414.			
						)		1,30,11	0.	0.			
				s (Part IX, column					0.	0.			
"	I					ımn (A), lines 5-10)		1,234,1	-	1,316,531.			
Expenses	160					(A), iiiies 3-10)		1,231,1	0.	0.			
en	lloa h			urt IX, column (D), li			0.		-	•			
Ж	17		• .		•			779,3	23.	903,677.			
						A), line 25)		2,013,4		2,220,208.			
						-i, iii le 23)		-26,3		1,070,206.			
٦.		i ievenue less	evhenses. Subtr	act IIIIC 10 IIUIII IIII	∪ I∠			eginning of Curren		End of Year			
ets (	<u>20</u>	Total accore (	Part X, line 16)				<del>-</del>	2,566,4		3,672,251.			
Net Assets or	21	,	s (Part X, line 26)					709,5		745,158.			
et E	22		, ,	Subtract line 21 fro			·····	1,856,8		2,927,093.			
_	art II	Signatur		dottact line 21 noi	11 11116 20				0 / 0				
				e examined this return	n including acc	companying schedule	es and stater	nents, and to the he	est of my	knowledge and belief, it is			
					-	n all information of w				Miowioago ana bonoi, it io			
	0, 001100	E-filed	- Dociaration of pro	paror (ouror than orn	501/10 54004 01	Tall illionnation of W	mon propure	<del>-                                    </del>	-filed				
Sig	nn	Signature of o	fficer					Date –	IIIGU				
		"	R MATZEL,	EXECUTIV	T DTREC	тOR							
пе	ere	Type or print r			טבוובע	. 1 010							
		, ,			Dranararia a	ianature	ı	Date 1	Check	PTIN			
Pa	id	Print/Type pre	LISSON,	CPA	Preparer's s E-filed	•		E filod	f _				
	eparer	Firm's name	GROSSMA		JR CPAS			Firm's E	elf-employe	6-0475780			
	γραισι	r i ii iii 5 Haiiie	GIODDIIA		NY CEVO	1110		I FIIIII S I	_IIV 🛨 🕻				

SYRACUSE, NY 13202

May the IRS discuss this return with the preparer shown above? See instructions

Firm's address 110 WEST FAYETTE STREET SUITE 900

X Yes No

Phone no. 315 - 424 - 1120

га	Check if Schodule O contains a reapones or note to any line in this Bort III
_	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: THE FAYETTEVILLE FREE LIBRARY SUPPORTS THE EVOLVING NEEDS OF OUR
	COMMUNITY BY PROVIDING EQUITABLE ACCESS TO IDEAS, INFORMATION AND
	RESOURCES NEEDED FOR SUCCESS IN THE 21ST CENTURY LIFE.
	RESOURCES NEEDED FOR SUCCESS IN THE ZIST CENTURY DIFE.
2	Did the organization undertake any significant program services during the year which were not listed on the
2	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes X No
Ü	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	1 700 010
	PROVIDE LIBRARY SERVICES TO THE VILLAGE OF FAYETTEVILLE, NEW YORK, THE
	SURROUNDING COMMUNITY OF MANLIUS, NEW YORK, AND ONONDAGA COUNTY.
	PROVIDE SERVICES THROUGH THE INTERNET UPON REQUEST.
4b	(Code:) (Expenses \$
	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
4c	(Code:) (Expenses \$
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
40	Total program service expenses 1.799.018.

# Form 990 (2022) 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? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			, v
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			٠,,
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	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		х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		
_	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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			7.7
46	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
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Λ
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	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	110		
	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		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
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		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			\ <sub>3,7</sub>
	complete Schedule G, Part III	19		X
20a	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	04		x
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	L	_ 43_

Form 990 (2022) FAYETTEVILLE FREE
Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	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	١		Х
	Schedule K. If "No," go to line 25a	24a		Λ
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24c		
Ч	any tax-exempt bonds?  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	240		
	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		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			37
	entity (including an employee thereof) 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 the Schedule L, Part IV,			
_	instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
а	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?			
	"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		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? 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			Х
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		Λ
34	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	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?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		\ <sub>3,7</sub>	
Dai	Note: All Form 990 filers are required to complete Schedule 0	38	Х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 11		162	140
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	

# FAYETTEVILLE FREE LIBRARY Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

				Yes	NO				
<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return	2a 33		77					
_	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?	2b	Х	37				
3a			3a		X				
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		3b						
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other				x				
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		Δ.				
D	If "Yes," enter the name of the foreign country								
<b>5</b> 0	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A		E.		Х				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a 5b		X				
	<ul> <li>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</li> <li>c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?</li> </ul>								
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		5c						
oa	any contributions that were not tax deductible as charitable contributions?		6a		х				
h	If "Yes," did the organization include with every solicitation an express statement that such contribut		- Ou						
	were not tax deductible?		6b						
7	Organizations that may receive deductible contributions under section 170(c).		- 55						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	vices provided to the payor?	7a		х				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b						
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w								
	to file Form 8282?	•	7c		х				
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontract?	7e						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti		7f						
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	orm 8899 as required?	7g						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation file a Form 1098-C?	7h						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	l by the							
	sponsoring organization have excess business holdings at any time during the year?		8						
9	Sponsoring organizations maintaining donor advised funds.								
а			9a						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b						
10	Section 501(c)(7) organizations. Enter:	l I							
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	-						
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b							
11	Section 501(c)(12) organizations. Enter:	المدا							
a	Gross income from members or shareholders	11a	-						
b	Gross income from other sources. (Do not net amounts due or paid to other sources against	11b							
100	amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a						
		12b	ıza						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120							
а	Is the organization licensed to issue qualified health plans in more than one state?		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	13b							
С	Enter the amount of reserves on hand	13c							
14a			14a		Х				
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu	le O	14b						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune	eration or							
	excess parachute payment(s) during the year?		15		Х				
	If "Yes," see the instructions and file Form 4720, Schedule N.								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	nt income?	16		X				
	If "Yes," complete Form 4720, Schedule O.								
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac								
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17						
	If "Yes," complete Form 6069.								

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

	Check if Schedule O contains a response or note to any line in this Part VI			X					
Sec	tion A. Governing Body and Management								
			Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year								
	If there are material differences in voting rights among members of the governing body, or if the governing								
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.								
b	Enter the number of voting members included on line 1a, above, who are independent 1b								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other								
	officer, director, trustee, or key employee?	2		Х					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision								
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X					
6	Did the organization have members or stockholders?								
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or								
	more members of the governing body?	7a		X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or								
	persons other than the governing body?	7b		X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
а	The governing body?	8a	Х						
b	Each committee with authority to act on behalf of the governing body?	8b	Х						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the								
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х					
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		Х					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,								
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b 11a	Х						
	11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?								
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		77						
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		37						
	on Schedule O how this was done	12c	X						
13	Did the organization have a written whistleblower policy?	13	X						
14	Did the organization have a written document retention and destruction policy?	14	X						
15	Did the process for determining compensation of the following persons include a review and approval by independent								
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	4=	X						
	The organization's CEO, Executive Director, or top management official	15a	Λ	X					
D	Other officers or key employees of the organization	15b		21					
160	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.								
Ioa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Х					
h	taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	108		21					
b	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's								
	exempt status with respect to such arrangements?	16b							
Sec	tion C. Disclosure	100							
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 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3	)s only	) avail	able					
	for public inspection. Indicate how you made these available. Check all that apply.	,	,						
	Own website Another's website X Upon request Other (explain on Schedule O)								
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, ar	nd finai	ncial						
	statements available to the public during the tax year.		_ /1						
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								

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

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (A) (B) (C) (D) (E) (F) Position Name and title Average Reportable Reportable Estimated (do not check more than one hours per box, unless person is both an compensation compensation amount of officer and a director/trustee from related week from other the organizations compensation (list any (W-2/1099-MISC/ hours for organization from the Institutional trustee related (W-2/1099-MISC/ 1099-NEC) organization organizations (ey employee 1099-NEC) and related below organizations Former line) (1) MELISSA WHIPPS 1.00 X SECRETARY 0. 0. 0. X 1.00 (2) WILLIAM SUNDERLIN 0. TRUSTEE X 0 0. (3) RANDI LUDWIG 3.00 X 0. PRESIDENT X 0. 0. 1.00 (4) DAVID WHEELER 0 0. 0. X TRUSTEE 1.00(5) MIKE RUSSELL TREASURER X 0. 0. 0. 0.50 (6) ADAM STONE X 0 0. 0. TRUSTEE (7) KAYANDRA BLYTHE 1.00 0 TRUSTEE X 0. 0. (8) JIM RESIG 1.50 X 0 . 0. 0. TRUSTEE 3.00 (9) WHITNEY SHEPHARD X 0 0. 0. VICE PRESIDENT X

232007 12-13-22 Form **990** (2022)

Part VII Section A. Officers, Directors, Trus	stees, Key Em	ploy	ees/	, an	d Hi	ighe	st C	compensated Employe	es (continued)				
(A)	(B) (C) Average Position						(D)	(E)		_	(F)		
Name and title	Average hours per		not c	heck	more	than is bot							
	week					or/trus		from	from related			other	Oi
	(list any	ector						the	organization			pensa	
	hours for related	Individual trustee or director	ee			ated		organization	(W-2/1099-MIS			om th	
	organizations	rustee	Institutional trustee		99	mpens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)		_	anizat d relat	
	related organizations below line) line) with the line of line line) line											anizati	
	line)	Indiv	Instit	Officer	Key e	High	Former						
		-											
		<u> </u>											
		-											
		L											
		_											
1b Subtotal								0.		0.			0.
c Total from continuation sheets to Part V								0.		0.			0.
d Total (add lines 1b and 1c)								0.		0.			0.
2 Total number of individuals (including but a compensation from the organization	not limited to tr	iose	IISTE	ed a	bov	e) wi	no re	eceived more than \$100	0,000 of reportab	le			0
												Yes	No
3 Did the organization list any <b>former</b> officer			кеу е	emp	loye	e, o	r hig	hest compensated emp	oloyee on				7.7
line 1a? If "Yes," complete Schedule J for s											3		Х
4 For any individual listed on line 1a, is the s and related organizations greater than \$15	•							•	•		4		Х
5 Did any person listed on line 1a receive or													
rendered to the organization? If "Yes," con	nplete Schedul	e J f	or su	uch	pers	son .					5		Х
Section B. Independent Contractors													
1 Complete this table for your five highest co the organization. Report compensation for										npens	ation 1	from	
(A)						<u> </u>		(B)			((		
Name and business	address	NO	INC	3			_	Description of s	ervices	C	compe	nsatio	n
										ı			
							+						
							$\dashv$						
2 Total number of independent contractors ( \$100,000 of compensation from the organ	-	ot lii	rnite	a to	tho	se li: 0	steo	above) who received m	iore than				

Form 990 (2022) **Part VIII** 5

<b>/</b>	Statement of Revenue	

		Check if Schedule O	contains a re	esponse	or note to any lir	ne in this Part VIII			
						(A)	(B)	(C)	<b>(D)</b> Revenue excluded
						Total revenue	Related or exempt function revenue	Unrelated business revenue	former kerry consider.
							, and the state of		sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns		la					
Sa on	b	Membership dues		lb					
S, (	С	Fundraising events	[	lc					
a ji	d	Related organizations	[7	ld					
ii,	е	Government grants (contri	ibutions)	1e	3,251.				
rion	f	All other contributions, gifts, g	grants, and						
la pri		similar amounts not included	above	ıf   3,	279,994.				
	g	Noncash contributions included in	lines 1a-1f	1g \$					
<u>ම</u> දි	h	T				3,283,245.			
	В				Business Code				
စ္ပ	2 a	LIBRARY FINES	AND F	EES	611710	963.	963.		
اه چَ	b								
Se	С								
eve	d								
Program Service Revenue	е								
ፈ	f	All other program service i	revenue						
	g	Total. Add lines 2a-2f				963.			
	3	Investment income (includ							
		•	•	•		6,206.	6,206.		
	4	Income from investment o				-	-		
	5	Royalties							
		•		Real	(ii) Personal				
	6 a	Gross rents	6a						
	b		6b						
	c	Rental income or (loss)	6c						
	d	Net rental income or (loss)							
		Gross amount from sales of		curities	(ii) Other				
	. u	assets other than inventory	7a - ''		( )				
	h	Less: cost or other basis							
e l		and sales expenses	7b						
eu	c	Gain or (loss)	7c						
ther Revenue		Net gain or (loss)	-						
ē		Gross income from fundraisin			l				
된	o u		- ,	of					
		contributions reported on							
		Part IV, line 18	,						
	h	Less: direct expenses							
		Net income or (loss) from t							
		Gross income from gaming			<u> </u>				
	Ja	Part IV, line 19							
	h	Less: direct expenses							
		Net income or (loss) from							
		Gross sales of inventory, le		VILIES					
	10 a	and allowances		10a					
	h								
		Less: cost of goods sold  Net income or (loss) from s							
$\dashv$	U	Mer IIICOME OF (1088) HOMS	oaico UI IIIVE	antory	Business Code				
Snc	11 a								
ne Tue	II a								
Miscellaneous Revenue									
Re	q	All other revenue							
Σ		Total. Add lines 11a-11d							
	12	Total revenue. See instructio				3,290,414.	7,169.	0.	0.
	12	i otal lovoliao. Occ ilioli dello				<sub> </sub> - ,	, ,,,,,,,,,	1	, J •

# 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 respon	•			
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations			g	
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1 160 150	017 706	250 446	
7	Other salaries and wages	1,168,152.	817,706.	350,446.	
8	Pension plan accruals and contributions (include	18,745.	10 7/5		
_	section 401(k) and 403(b) employer contributions)	46,287.	18,745. 46,287.		
9	Other employee benefits	83,347.	58,343.	25,004.	
10	Payroll taxes	03,347.	50,543.	23,004.	
11	Fees for services (nonemployees):				
a	Management	12,700.	4,445.	8,255.	
b	Legal	8,000.	2,800.	5,200.	
	Accounting Lobbying	0,000	2,000	3,2001	
u a	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
J	column (A), amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion				
13	Office expenses	17,892.	6,263.	11,629.	
14	Information technology	97,282.	97,282.		
15	Royalties				
16	Occupancy	103,280.	82,624.	20,656.	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	4,657.	4,657.		
20	Interest	2,471.	2,471.		
21	Payments to affiliates	120 440	120 440		
22	Depreciation, depletion, and amortization	139,448. 37,608.	139,448. 37,608.		
23	Other expanses Itemize expanses not covered	37,000.	37,000.		
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A),				
а	amount, list line 24e expenses on Schedule 0.) PROGRAMS AND MATERIALS	264,230.	264,230.		
d h	BUILDINGS AND GROUNDS	216,109.	216,109.		
C					
d					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	2,220,208.	1,799,018.	421,190.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
					C 000 (0000)

Form 990 (2022)
Part X Balance Sheet

Pa	πx	Balance Sheet					
		Check if Schedule O contains a response or note	to any	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			38,097.	1	77,741
	2	Savings and temporary cash investments			1,079,439.	2	1,041,428
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net		110,872.	4	120,336	
	5	Loans and other receivables from any current or f					
		trustee, key employee, creator or founder, substa					
		controlled entity or family member of any of these	perso	ons		5	
	6	Loans and other receivables from other disqualified					
		under section 4958(f)(1)), and persons described		6			
ş	7	Notes and loans receivable, net		Г		7	
Assets	8	Inventories for sale or use				8	
ž	9	Prepaid expenses and deferred charges			34,012.	9	38,014
	10a	Land, buildings, and equipment: cost or other	- 1				
		basis. Complete Part VI of Schedule D	10a	2,919,303.			
	b	Less: accumulated depreciation	10b	1,755,617.	1,304,050.	10c	1,163,686
	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	1,194,547		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			0.	15	36,499
	16	Total assets. Add lines 1 through 15 (must equal			2,566,470.	16	3,672,251
	17	Accounts payable and accrued expenses		156,304.	17	219,441	
	18	Grants payable		18			
	19	Deferred revenue			5,400.	19	5,550
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Pa	art IV o	of Schedule D		21	
es	22	Loans and other payables to any current or forme	r offic	er, director,			
≝		trustee, key employee, creator or founder, substa	ntial c	ontributor, or 35%			
Liabilities		controlled entity or family member of any of these	perso	ons		22	
_	23	Secured mortgages and notes payable to unrelate	ed thir	d parties	537,857.	23	482,680
	24	Unsecured notes and loans payable to unrelated	third p	oarties		24	
	25	Other liabilities (including federal income tax, paya	ables t	to related third			
		parties, and other liabilities not included on lines 1	17-24).	. Complete Part X	4.0.00		
		of Schedule D			10,022.		37,487
	26	Total liabilities. Add lines 17 through 25			709,583.	26	745,158
ω		Organizations that follow FASB ASC 958, check	k here	e X			
ဥ		and complete lines 27, 28, 32, and 33.			1 056 005		0 000 000
ョョ	27	Net assets without donor restrictions			1,856,887.	27	2,927,093
Ö	28	Net assets with donor restrictions				28	
Š		Organizations that do not follow FASB ASC 958	8, che	ck here			
드		and complete lines 29 through 33.					
ts (	29	Capital stock or trust principal, or current funds				29	
sse	30	Paid-in or capital surplus, or land, building, or equ				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated inco		<b>F</b>	1 056 005	31	0 000 000
ž	32	Total net assets or fund balances			1,856,887.	32	2,927,093
	33	Total liabilities and net assets/fund balances			2,566,470.	33	3,672,251

Form **990** (2022)

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,29		
2	Total expenses (must equal Part IX, column (A), line 25)	2		2,22		
3	Revenue less expenses. Subtract line 2 from line 1	3		1,070,206		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	-	1,85	6,8	87.
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10		2,92	7,0	93.
Pa	rt XII Financial Statements and Reporting					_
	Check if Schedule O contains a response or note to any line in this Part XII					
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				Yes	No
•	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	- O				
2a						
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed			2a		X
	separate basis, consolidated basis, or both:	. O u				
	Separate basis Consolidated basis Both consolidated and separate basis					
h	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat			2.5		
	consolidated basis, or both:	o baok	,			
	X Separate basis Consolidated basis Both consolidated and separate basis					
_	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	a audit				
·	review, or compilation of its financial statements and selection of an independent accountant?			2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
Ju	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired au	dit			
_	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

Form **990** (2022)

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

**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.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 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: 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). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on 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. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, 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 ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

# 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.)

Sec	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	37,268.	21,534.	43,528.	56,284.	1,288,739.	1,447,353.	
2	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf	1,824,396.	1,859,060.	1,894,382.	1,918,636.	1,959,331.	9,455,805.	
3	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3	1,861,664.	1,880,594.	1,937,910.	1,974,920.	3,248,070.	10,903,158.	
5	The portion of total contributions							
	by each person (other than a							
	governmental unit or publicly							
	supported organization) included							
	on line 1 that exceeds 2% of the							
	amount shown on line 11,							
	column (f)							
6	Public support. Subtract line 5 from line 4.						10,903,158.	
Sec	tion B. Total Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
7	Amounts from line 4	1,861,664.	1,880,594.	1,937,910.	1,974,920.	3,248,070.	10,903,158.	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources	12,452.	12,326.	2,957.	1,832.	6,206.	35,773.	
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.)				296.		296.	
11							10,939,227.	
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	199,857.	
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third, f	ourth, or fifth tax	year as a section 5	501(c)(3)		
	organization, check this box and stop	here						
Sec	ction C. Computation of Publ	ic Support Pe	rcentage					
14	Public support percentage for 2022 (	line 6, column (f), d	livided by line 11, o	column (f))		14	99.67 %	
15	Public support percentage from 2021					15	99.68 %	
16a	33 1/3% support test - 2022. If the							
	<b>stop here.</b> The organization qualifies							
b	33 1/3% support test - 2021. If the	-						
	and <b>stop here.</b> The organization qual							
17a	10% -facts-and-circumstances tes	•					· ·	
	and if the organization meets the fact					VI how the organiz	ation	
	meets the facts-and-circumstances to	_		*	-			
b	10% -facts-and-circumstances tes	-					10% or	
	more, and if the organization meets the		•		•			
	organization meets the facts-and-circ							
18	8 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions							

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

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

Se	ction A. Public Support	, <b>,</b>	,				
Cale	endar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
ŀ	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						
(	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support			•	•	•	•
Cale	endar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	. ,		` '		, ,	
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources						
ŀ	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included on 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			1			
13	assets (Explain in Part VI.)						
	First 5 years. If the Form 990 is for the	ne organization's f	irst, second, third.	fourth, or fifth tax	vear as a section	501(c)(3) organizat	ion.
-	check this box and stop here	•		,			,
Se	ction C. Computation of Publ						
	Public support percentage for 2022 (			column (f))		15	%
	Public support percentage from 2021					16	%
	ction D. Computation of Inve						
	Investment income percentage for 20					17	%
	Investment income percentage from					18	%
	a 33 1/3% support tests - 2022. If the						
	more than 33 1/3%, check this box a						
ŀ	33 1/3% support tests - 2021. If the						
-	line 18 is not more than 33 1/3%, che						
20	Private foundation If the organization						

# Part IV | Supporting Organizations

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

### Section A. All Supporting Organizations

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

	Yes	No
1		
2		
3a		
- Ou		
3b		
3c		
4a		
4b		
4c		
5a		
5b 5c		
30		
6		
6		
7		
C		
8		
9a		
01-		
9b		
9с		
40-		
10a		
10b		

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

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Sche	dule A (Form 990) 2022 FAYETTEVILLE FREE LIBRA			15-0543618 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Orga	anizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyi	ng trust o	n Nov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	st comple	te Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
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		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		

6

Lheck here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see Schedule A (Form 990) 2022

6 Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

instructions).

SCITE	nedule A (Form 990) 2022 INTESTED TREE DEDICATE TO 0343010 Page 7					
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (contin	ued)				
Sect	ion D - Distributions		Current Year			
1	Amounts paid to supported organizations to accomplish exempt purposes	1				
2	Amounts paid to perform activity that directly furthers exempt purposes of supported					
	organizations, in excess of income from activity	2				
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3				
4	Amounts paid to acquire exempt-use assets	4				
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5				
6	Other distributions (describe in Part VI). See instructions.	6				
7	Total annual distributions. Add lines 1 through 6.	7				
8	Distributions to attentive supported organizations to which the organization is responsive					
	(provide details in Part VI). See instructions.	8				
9	Distributable amount for 2022 from Section C, line 6	9				
10	Line 8 amount divided by line 9 amount	10				
Sect	ion E - Distribution Allocations (see instructions)  (i)  Excess Distributions  Underdistribution Pre-2022	ns	(iii) Distributable Amount for 2022			

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2022 (reason-			
	able cause required - explain in Part VI). See instructions.			
_3	Excess distributions carryover, if any, to 2022			
а	From 2017			
b	From 2018			
С	From 2019			
d	From 2020			
е	From 2021			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2022 distributable amount			
i_	Carryover from 2017 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2022 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2022 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2022, 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 2022. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2023. Add lines 3j			
	and 4c.			
_8_	Breakdown of line 7:			
a	Excess from 2018			
b	Excess from 2019			
с	Excess from 2020			
d	Excess from 2021			
е	Excess from 2022			

Schedule A (Form 990) 2022

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

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

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

FAYETTEVILLE FREE LIBRARY

Employer identification number 15-0543618

Pa	TI Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		Similar Funds or	Accounts. Complete if the
		(a) Donor advise	d funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in w	riting that the assets he	eld in donor advised fu	nds
	are the organization's property, subject to the organization's e	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ad	visors in writing that gra	ant funds can be used	only
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for ar	y other purpose confe	erring
	impermissible private benefit?			
Pa	t II Conservation Easements. Complete if the orga	anization answered "Yes	s" on Form 990, Part I	V, line 7.
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).	1	
	Preservation of land for public use (for example, recreating	on or 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 qualified	ed conservation contrib	ution in the form of a o	
	day of the tax year.			Held at the End of the Tax Year
	Total number of conservation easements			
	Total acreage restricted by conservation easements			
	Number of conservation easements on a certified historic stru-			2c
d	Number of conservation easements included in (c) acquired at	•		
	historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	ased, extinguished, or t	erminated by the orga	anization during the tax
	year			
4	Number of states where property subject to conservation ease			
5	Does the organization have a written policy regarding the period		ion, handling of	
	violations, and enforcement of the conservation easements it			
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, ar	nd enforcing conserva	tion easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handli	ing of violations, and en	forcing conservation e	easements during the year
8	Does each conservation easement reported on line 2(d) above	e satisfy the requiremen	ts of section 170(h)(4)	(B)(i)
	and section 170(h)(4)(B)(ii)?	·		
9	In Part XIII, describe how the organization reports conservatio			
	balance sheet, and include, if applicable, the text of the footnot		•	
	organization's accounting for conservation easements.	J		
Pa	t III Organizations Maintaining Collections of	Art, Historical Tre	easures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form 9			
1a	If the organization elected, as permitted under FASB ASC 958	, ,		
	of art, historical treasures, or other similar assets held for publ			ance of public
	service, provide in Part XIII the text of the footnote to its finance			
b	If the organization elected, as permitted under FASB ASC 958	•		
	art, historical treasures, or other similar assets held for public of	exhibition, education, or	r research in furtheran	ce of public service,
	provide the following amounts relating to these items:			_
	(i) Revenue included on Form 990, Part VIII, line 1			
2	If the organization received or held works of art, historical trea			ı, provide
	the following amounts required to be reported under FASB AS	-		
а	Revenue included on Form 990, Part VIII, line 1			"
b	Assets included in Form 990, Part X			\$

Sche	dule D (Form 990) 2022 FAYETTE	VILLE FREE LI	BRARY		15-0	543618	Page <b>2</b>
_	t III Organizations Maintaining C	ollections of Art, His	storical Treasures	or Other			
3	Using the organization's acquisition, accession	on, and other records, che	ck any of the following t	hat make sigr	nificant use of i	ts	
	collection items (check all that apply):						
а	Public exhibition	d	Loan or exchange prog	gram			
b	Scholarly research	е 🗆	Other				
С	Preservation for future generations						
4	Provide a description of the organization's co	ollections and explain how	they further the organiza	ation's exemp	ot purpose in Pa	art XIII.	
5	During the year, did the organization solicit o	r receive donations of art, h	nistorical treasures, or o	ther similar a	ssets		
	to be sold to raise funds rather than to be ma	aintained as part of the org	anization's collection?			Yes	No_
Par	t IV Escrow and Custodial Arran	gements. Complete if th	e organization answere	d "Yes" on Fo	orm 990, Part I\	/, line 9, or	
	reported an amount on Form 990, Par	t X, line 21.					
1a	Is the organization an agent, trustee, custodi	an or other intermediary fo	r contributions or other	assets not in	cluded		
	on Form 990, Part X?					Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII						
						Amount	
С	Beginning balance				1c		
	Additions during the year				1d		
	Distributions during the year				1e		
f	Ending balance				1f		
2a	Did the organization include an amount on Fo				?	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the explanat	ion has been provided o	on Part XIII			
Par	t V Endowment Funds. Complete in	the organization answered		<del>_</del>			
		(a) Current year (b)	Prior year (c) Two ye	ears back (d)	Three years bac	k (e) Four ye	ears back
1a	Beginning of year balance						
b	Contributions						
С	Net investment earnings, gains, and losses						
d	Grants or scholarships						
е	Other expenditures for facilities						
	and programs						
f	Administrative expenses						
g	End of year balance						
2	Provide the estimated percentage of the curr	ent year end balance (line	1g, column (a)) held as:				
а	Board designated or quasi-endowment	%					
b	Permanent endowment	%					
С		%					
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.					
За	Are there endowment funds not in the possession of the organization that are held and administered for the						
	organization by:						es No
	(i) Unrelated organizations						
	(ii) Related organizations					3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as required on	Schedule R?			3b	
4	Describe in Part XIII the intended uses of the		t funds.				
Par	t VI Land, Buildings, and Equipm						
	Complete if the organization answered		<u> </u>	<del> </del>			
	Description of property	(a) Cost or other	(b) Cost or other	1 ' '	umulated	(d) Book v	/alue
		basis (investment)	basis (other)		eciation		000
1a	Land	]	90,000	•		90	,000.

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value		
1a	Land		90,000.		90,000.		
b	Buildings		2,829,303.	1,755,617.	1,073,686.		
С	Leasehold improvements						
d	Equipment						
e	Other						
Tota	Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)						

Schedule D (Form 990) 2022

			5
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-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"	on Form 990, Part IV, line 1	1c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1) MONEY MARKET FUNDS	3,513.	COST	
(2) U.S. TREASURY BILLS	1,191,034.	COST	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	1,194,547.		
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			

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

### Part X Other Liabilities.

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

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	FINANCE LEASE OBLIGATION	37,487.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	37,487.

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

scne	dule D (Form 990) 2022 FAIETIEVILLE FREE LIBRART			<u> </u>	UJ4JUIU Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statem	ents With	Revenue per R	eturr	٦.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.			
1	Total revenue, gains, and other support per audited financial statements			1	3,307,879.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	17,465.		
е	Add lines 2a through 2d			2e	17,465.
3	Subtract line 2e from line 1			3	3,290,414.
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	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	3,290,414.
Pa	t XII Reconciliation of Expenses per Audited Financial Stater	nents Witl	n Expenses per	Retu	ırn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.			
1	Total expenses and losses per audited financial statements			1	2,237,673.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	17,465.		
е	Add lines 2a through 2d			2e	17,465.
3	Subtract line 2e from line 1			3	2,220,208.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			_
_	Add lines <b>4a</b> and <b>4b</b>			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	2,220,208.

#### Part XIII Supplemental Information.

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

# PART X, LINE 2:

THE 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 JUNE 30, 2023, 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.

Part XIII Supplemental Information (continued) THE LIBRARY'S INFORMATION RETURNS CAN BE SUBJECT TO EXAMINATION BY TAXING AUTHORITIES FOR A PERIOD OF THREE YEARS FROM THE DATE THEY ARE FILED. AS OF JUNE 30, 2023, THE JUNE 30, 2020 THROUGH JUNE 30, 2022 RETURNS ARE SUBJECT TO EXAMINATION. IT IS THE LIBRARY'S POLICY TO RECOGNIZE ANY INTEREST AND PENALTIES AS EXPENSES IN THE YEAR THEY ARE ASSESSED. PART XI, LINE 2D - OTHER ADJUSTMENTS: DONATED FURNITURE AND EQUIPMENT 17,465. PART XII, LINE 2D - OTHER ADJUSTMENTS: DONATED FURNITURE AND EQUIPMENT 17,465.

#### SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization

FAYETTEVILLE FREE LIBRARY

Employer identification number 15-0543618

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

EQUITABLE ACCESS TO IDEAS, INFORMATION AND RESOURCES NEEDED FOR SUCCESS

IN THE 21ST CENTURY LIFE.

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 WAS 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 WAS DOCUMENTED IN
THE MINUTES OF THE MEETINGS OF THE BOARD OF TRUSTEES.

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

THE LIBRARY'S GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST.

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

THE ORGANIZATION'S BOARD OF TRUSTEES ASSUMES RESPONSIBILITY FOR

OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENT AND SELECTION OF THE

INDEPENDENT ACCOUNTANT SAME AS IN PRIOR YEARS.