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Form **990-EZ**

OMB No 1545-1150 2008

Short Form
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form
The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

Department of the Treasury

DAA

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	4	For the	e 2008 calen	dar year,	or tax year beg	inning 10/0	1/08 , an	nd ending	9/30	0/09_			
1	В	Check ı	f applicable	Please	C Name of org	anization						D Emi	ployer identification number
Γ	\neg		s change	use IRS		•							-
1	_	Name c	•	label or	FRIENDS	OF THE	FAIRHOP	E LIBR	ARY			63	-6078513
ľ	٦.	Initial re	_	print or type.		street (or PO box					oom/suite		ephone number
-	_	Termina		See		FICE BOX		ilvered to street	(audiess)	' '``	DOI W Suite		1-928-0339
<u> </u>	┑.			Specific									
- }	_		ed return	Instruc-	-	, state or country, a		26522			i '		up Exemption
L			tion pending	tions.	FAIRHOP			<u>և 36533</u>					nber ◆
		• Sec	tion 501(c)(3			7(a)(1) nonexen	=	trusts must	attach		Accounting	_	X Cash Accrual
-					npleted Schedu	le A (Form 990	or 990-EZ).				ther (specify)		,,
ı			te: ◆ <u>N</u> /		- 1=1						Check ◆	X if the	e organization is not
2	<u></u>	Organ	ization type (check only	one)— X 501((c) (3) ♦ (ır	nsert no)	4947(a)(1) o	or	527	990-EZ, or 9	90-PF)	hedule B (Form 990,
ı	<	Check	◆ [_] if ti	he organı	zation is not a se	ection 509(a)(3) :	supporting orga	anization and	l its gross	s receipts	are normally	not mo	ore than \$25,000 A return
_		is not r	equired, but i	if the orga	anization choose	s to file a return,	be sure to file	a complete r	eturn				
1	-	Add line	s 5b, 6b, and 7	b, to line 9	to determine gross	s receipts, if \$1,000	,000 or more, file	Form 990 inst	ead of For	rm 990-EZ		. ♦ \$	56,409
	P	art I	Rever	nue, Ex	penses, and	Changes in	Net Assets	or Fund I	Balanc	es (See	the instru	ctions	for Part I.)
_		1			nts, and similar amo	•						1	4,057
		2				overnment fees	and contracts					2	
		3			nd assessments			SE	E ST	ATEME	NT 1	3	4,798
		4	Investment									4	
		- 5а			cale of accete of	her than inventor	37		5a				
	i	b			asis and sales e		У		5b			┪	
						•	at line . The forces line	- Fa\ /alla-b				٠.	
	<u>a</u>	C				n inventory (Subtra			•		~ m	<u>5c</u>	-
	Revenue	6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here											
	ě	a Gross revenue (not including \$ of contributions											
	"		reported on	line 1)					6a		17,414		
		b	Less: direct	expense	s other than fund	draising expense	s		6b		5,48	4	
		С	Net income	or (loss)	from special eve	ents and activities	s (Subtract line	6 6b from line	6a)			6c	11,927
	ļ	7a	Gross sales	of invent	tory, less returns	and allowances			7a				
		b Less cost of goods sold 7b											
	ı	С	Gross profit	or (loss)	from sales of inv	ventory (Subtract	line 7b from li	ne 7a)				7c	
	ŀ	8	Other reven	ue (desc	nbe ▶ SEE	STATEME	ENT 2)	8	30,140
		9			ines 1, 2, 3, 4, 5						•	9	50,922
_		10	Grants and	sımılar ar	mounts paid (atta	ach schedule)				<u> </u>		10	
		11	Benefits par		•	•						11	
	6	12	•			nployee benefits						12	
	euse	13	•	•	-	s to independent						13	1,010
	ا <u>چ</u>				ities, and mainte	•	COMMICCIONS					14	2,020
	EX D	14 15			, postage, and s	•						15	
	_						כ יחואי				,		54 646
2010		16		1 1 1		STATEME	711 2					16	54,646
_	-	17			Nines 10 through						<u></u>	17	55,656
re	Net Assets	18				acime 17 from I						18	-4,734
9	AS	19	Net assets &	fund balan	cestet begirining of	f year (from line 27,	column (A)) (mus	t agree with end-o	f-year figure	reported on pr	nor year's return)	19	7,214
JAN	ᇦ	20	Other chang	jes in net	assets or fund b	palances (attach	explanation)					20	
⊸`_	z	21				nyear Combine					_	21	2,480
	P	art II	Balane	ce\She	ets Ifitolal ass	ets on line 25, co	olumn (B) are \$	\$2,500,000 o	r more, fi	ile Form 9	90 instead of	Form 9	990-EZ
#			L		the instructions						nning of year		(B) End of year
2 2	2 (Cash, s	savings, and i	ınvestme	nts						7,214	22	2,480
₹ 2	23 Land and buildings						23						
(כ)			issets (descri	be 🕨					1			24	
		Γotal a		-					—´	•	7,214		2,480
			abilities (des	cribe •					\ 		.,,		
					(line 27 of colu	mn (B) must agr	ee with line 21)	١	—′⊢		7,214		2,480
_	_	_									,,41	- 41	Form 990-EZ (2008)
1-	or	rivacy	y ACL and Pa	perwork	REGUCTION ACT I	Notice, see the I	instructions to	or Form 990.					Form 330-EA (2008)

	m 990-EZ (2008) FRIENDS OF THE FAIRHOPE LIBR	ARY 6	3-6078513			Page 2
	art III Statement of Program Service Accomplishments	See the instruc	tions for Part I	II.)		penses
	at is the organization's primary exempt purpose?					d for 501(c)(3)
	EE STATEMENT 4 Cribe what was achieved in carrying out the organization's exempt purposes. In	o along and annua		_		organizations 7(a)(1) trusts,
	cribe the services provided, the number of persons benefited, or other relevant					for others)
28	TO PROVIDE PERSONNEL AND EQUIPMENT SUPPORT FOR THE				1	
	FAIRHOPE PUBLIC LIBRARY.				İ	
	(Grants \$) If this amount includes foreign grants, c	heck here	<u> </u>	2	Ва	52,262
29						
	(Grants \$) If this amount includes foreign grants, c	heck here	•	2	9a	
30						
	(O			<u> ا ۔</u>	_	
	(Grants \$) If this amount includes foreign grants, c Other program services (attach schedule)	neck nere		30	Da	.
	(Grants \$) If this amount includes foreign grants, c	heck here	•	^[] ₃.	1a	
	Total program service expenses (add lines 28a through 31a)				2	52,262
P	art IV List of Officers, Directors, Trustees, and Key Employees. List ea			the ins	tructions fo	
	(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0)	employee	ntributions to benefit plans & compensation	(e) Expense account and other allowances
SEE	SCHEDULE					
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	,					

Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of

"Yes," Form 990 must be completed instead of Form 990-EZ

Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If

44

Yes

No

X

Form 990-EZ	(2008) FRIENDS OF THE FAIRHOPE LIBRA	ARY 63	3-6078513			P	age 4
Part VI	Section 501(c)(3) organizations only. All section 50	1(c)(3) organiz	ations must ar	swer question	s 46–	49	
4C Did Abs	and complete the tables for lines 50 and 51.	n habalf of an in an				Yes	No
	organization engage in direct or indirect political campaign activities o	n benait of or in op	position to		46	res	X
	ates for public office? If "Yes," complete Schedule C, Part I	lo C. Port II			47		$\frac{x}{x}$
	organization engage in lobbying activities? If "Yes," complete Schedul		Schedule E		48		X
	rganization operating a school as described in section 170(b)(1)(A)(ii) ² organization make any transfers to an exempt non-charitable related of		Scriedule L		49a		$\frac{x}{x}$
	was the related organization(s) a section 527 organization?	organization	•		49b		
	ete this table for the five highest compensated employees (other than o	officers directors ti	rustees and key en	nnlovees) who			
	ceived more than \$100,000 of compensation from the organization. If						
	(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	acc	Expensiount ar allowa	nd
NONE .							
							
		<u> </u>					
Total number	of other employees paid over \$100,000						
-	te this table for the five highest compensated independent contractors is ation from the organization. If there is none, enter "None."	wno each received	more than \$100,0	JUU of			
(a)	Name and address of each independent contractor paid more than \$100,000	(b)	Type of service	(c) C	ompens	ation	
NONE							
	······································						
						-	
T-1-1 1							
rotal number	of other independent contractors each receiving over \$100,000 Under penalties of perjury, I declare that I have examined this return, including	accompanying schedu	ulae and statements	and to the boot of mir.	knowle d		
Sign Here	and belief, it is true, correct, and complete freclaration of preparer (other than						
Paid	Preparer's signature C.O.M = Cawley on CP	A Date 11/20	Check if self-employed	Preparer's Ident		•	ee instr)
Preparer's	Firm's name (or yours C. O. MCCAWLEY) JR.,	CPA, LLC			3-1		130
Use Only	ıf self-employed), PO BOX 452			Phone			
	address, and ZIP + 4 FAIRHOPE, AL 36533-0	452		no ♦ 251	-92	8-0	339
May the IRS	discuss this return with the preparer shown above? See instructions			F 0	Ye		No (2008)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

◆ Attach to Form 990 or Form 990-EZ. ◆ See separate instructions.

Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service		♦ A	ttach to	tach to Form 990 or Form 990-EZ. ◆ S						
Name of the organization										
	FRIENDS	OF	THE	FAIRHOPE	LIBRARY					

The organization is not a private foundation because it is. (Please check only one organization)

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

Employer identification number 63-6078513

2	Ц	A school des	scribed in section 170(b)(1))(A)(ii). (Attach Schedule E)									
3	Ц	A hospital or	r a cooperative hospital sen	vice organization described in se	ection 170	(b)(1)(A)	(iii). (Att	ach Sch	edule H	l)			
4	Ц	A medical re	search organization operat	ed in conjunction with a hospital	described	d in sectio	on 170(b)(1)(A)(iii). Ente	er the h	ospital's name,		
		city, and sta	te										
5	لِا	An organizat	tion operated for the benefit	t of a college or university owned	l or operat	ted by a g	overnm	ental un	ıt descr	ibed in			
	_		(b)(1)(A)(iv). (Complete Par	•									
6	Н			governmental unit described in									
7	LJ			a substantial part of its support f	rom a gov	ernmenta	l unit or	from the	e genera	al public	C		
_ 1	_		section 170(b)(1)(A)(vi). (0										
8	3,7			170(b)(1)(A)(vi). (Complete Par	•								
9	X			(1) more than 33 1/3 % of its su									
		-		mpt functions—subject to certain	•		•				•		
			-	and unrelated business taxable i	•			x) from l	ousines	ses			
1				30, 1975. See section 509(a)(2)			•						
10	\dashv			exclusively to test for public safe									
11	Ш			exclusively for the benefit of, to									
	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 that describes the type of supporting organization and complete lines 11e through 11h												
							nes 11e						
e [a Type I b Type II c Type III—Functionally Integrated d Type III—Other e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified												
e (persons other than foundation managers and other than one or more publicly supported organizations described in section												
			section 509(a)(2)	o una otnor than one or more pa	oncry supp	ported org	jamzano	113 0030	inbed in	36000	•		
f			, , , ,	termination from the IRS that it is	s a Type I	Type II	or Type	III sunni	ortina				
•			check this box			, 1,00 11,	o,po	capp	orting				
g		-		ation accepted any gift or contrib	oution fron	n anv of ti	ne						ш
3		following per	=	- · · · · · · · · · · · · · · · · · · ·									
		• •		controls, either alone or together	with persi	ons descr	ibed ın (in)			Г	Yes	No
			•	of the supported organization?				,			11g(ı)		
			member of a person descr	· · · =							11g(ii)		
				described in (i) or (ii) above?							11g(ııi)		
h		Provide the	following information about	the organizations the organization	on suppor	ts					(x 	•	
(i) N	ame	of supported	(ii) EIN	(iii) Type of organization	(iv) is the	organization	(v) Did v	ou notify	(vi)	s the	(vii) Amou	nt of	
		nization		(described on lines 1-9	ın col (i) lı	sted in your	the organ	nization in	organizat	ion in col	suppoi		
				above or IRC section (see Instructions))	governing	document?		of your port?	(i) organı	zed in the S ?			
				(oos menaduonom	Yes	No	Yes	No	Yes	No			
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				N	<u> </u>								
Total				<u> </u>	1	ŧ		L.,,,,,,,,,					
For Pri	vac	v Act and Pap	erwork Reduction Act Notice	e, see the Instructions for Form 99	90.				Sch	nedule A	(Form 990 or 99	90-EZ)	2008

Sche	dule A (Form 990 or 990-EZ) 2008 FRI	ENDS OF T	THE FAIRH	OPE LIBRA		-6078513	
	rt II Support Schedule for O	rganizations [Described in S	ections 170(b)(1)(A)(iv) and	l 170(b)(1)(A)	(vi)
	(Complete only if you che	ecked the box	on line 5, 7, o	r 8 of Part I.)			
Sec	tion A. Public Support						
Cal	endar year (or fiscal year beginning in) ◆	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge					·····	
4	Total. Add lines 1-3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	·				ī	
6	Public support. Subtract line 5 from line 4						
	tion B. Total Support	4) 0004	4 > 0005	(-) 0000	(4) 2007	(a) 2008	(f) Total
	lendar year (or fiscal year beginning in) ◆	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(I) Total
7	Amounts from line 4			<u> </u>			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10	<u></u>			<u> </u>	<u></u>	
12	Gross receipts from related activities, etc.					1:	2
13	First five years. If the Form 990 is for the	organization's first	t, second, third, fo	urth, or fifth tax yea	ar as a section 50	1(c)(3)	. \square
	organization, check this box and stop her	e					<u> </u>
Sec	tion C. Computation of Public Su	ipport Percen	tage				
14	Public support percentage for 2008 (line 6	, column (f) divide	d by line 11, colun	nn (f))		1.	
15	Public support percentage from 2007 Sch					1:	5 %
16a	33 1/3 % support test-2008. If the organ	ization did not che	ck the box on line	13, and line 14 is	33 1/3 % or more	, check this box	. \square
	and stop here. The organization qualifies						▶ ⊔
b	33 1/3 % support test-2007. If the organ	ization did not che	eck a box on line 1	3 or 16a, and line	15 is 33 1/3 % or	more, check this	. —
	box and stop here. The organization qual						▶ ∐
17a	10%-facts-and-circumstances test—200						
	more, and if the organization meets the "fa						, \Box
	organization meets the "facts-and-circums	tances" test. The	organızatıon qualif	ies as a publicly si	upported organiza	tion	▶ []
b	10%-facts-and-circumstances test—200	7. If the organizati	on did not check a	box on line 13, 16	Sa, 16b, or 17a, ar	nd line 15 is 10%	or
	more, and if the organization meets the "fo						⊾ □
	organization meets the "facts-and-circums						Z H
18	Private foundation. If the organization did	not check a box of	on line 13, 16a, 16	b, 1/a, or 1/b, che	eck this box and s	ee instructions	

Schedule A (Form 990 or 990-EZ) 2008

Page 3

Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Sec	ction A. Public Support						
Ca	llendar year (or fiscal year beginning in) ◆	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	70,500	27,894	14,631	11,516	8,855	133,396
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	-215	6,019	20,095	26,291	28,595	80,785
3	Gross receipts from activities that are not an unrelated trade or business under section 513					-	
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5	70,285	33,913	34,726	37,807	37,450	214,181
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for			15.005		00.505	61.000
_	the year or \$5,000 Add lines 7a and 7b		1,019	15,095 15,095	21,291	23,595	61,000 61,000
8	Public support (Subtract line 7c from	70,285	32,894	19,631	16,516	13,855	01,000
•	line 6)	.,,,,,,,,	32,031		10,515		153,181
Sec	tion B. Total Support				······································		
Ca	lendar year (or fiscal year beginning in) 🗢	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	70,285	33,913	34,726	37,807	37,450	214,181
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	290	4,511	904			5,705
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	290	4,511	904			5,705
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 IV)						
13	Total support. (Add lines 9, 10c, 11,	70,575	38,424	35,630	37,807	37,450	_
	and 12)						219,886
4	First five years. If the Form 990 is for the organization, check this box and stop here	-	second, third, four	th, or fifth tax year	r as a section 501((c)(3)	▶ □
Sec	tion C. Computation of Public Su	pport Percenta	age				
5	Public support percentage for 2008 (line 8,		-	ı (f))		15	69.6638 %
6_	Public support percentage from 2007 Sche					16	96.9370 %
	tion D. Computation of Investme						
7	Investment income percentage for 2008 (lii		=	column (f))		17	2.5945 %
Investment income percentage from 2007 Schedule A, Part IV-A, line 27h							3.0630 %
19a	33 1/3 % support tests—2008. If the organ 17 is not more than 33 1/3 %, check this bo	ox and stop here.	The organization q	ualifies as a public	cly supported orga	nızatıon	▶ 🗓
D	33 1/3 % support tests—2007. If the organ						▶ □
20	line 18 is not more than 33 1/3 %, check the		_				

Schedule A (Form 990 or 990-EZ) 2008 FRIENDS OF THE FAIRHOPE LIBRARY

63-6078513

Page 4

Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part IV Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

0.0	_		Special	Events	Schedule)			0000
Form 99	90.	For calendar year 2008	or tax year beginning	10	0/01/08	, and ending	9.	/30/09	2008
Name •		Tor caloridat your 2000	tor tax your boginning		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, and onding			ntification Number
FRIENDS	S OF T	HE FAIRHOPE	LIBRARY					63-6078	3513
		(A)	(B)		(C)	Ot	hers		Total
Gross receipt	s	17,414		0		0		0	17,414
Less contrib	outions	0		0		0		0	0
Gross revenu		17,414		0		0		0	17,414
Less direct		5,487		0		0		<u> </u>	5,487
Net income (I	oss)	11,927		<u> </u>		0		<u> </u>	11,927
Description	(A)	FUNDRAISER	2009		_				
	(B)								
					_				
	(C)				_				
	Others				_				
		· · · · · · · · · · · · · · · · · · ·		· · · · · ·					
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636078513 FRIENDS OF THE FAIRHOPE LIBRARY

Federal Statements

FYE: 9/30/2009

63-6078513

Statement 1 - Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments

	Description	 Amount			
MEMBERSHIP	DUES	\$ 4,798			
TOTAL		\$ 4,798			

Statement 2 - Form 990-EZ, Part I, Line 8 - Other Revenue

Description	 Amount			
BOOK STORE SALES	\$ 30,140			
TOTAL	\$ 30,140			

Statement 3 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
BOOK STORE SALES	\$
SUPPLIES	617
SALES TAX PAID	1,545
CC FEES	495
EXPENSES	
ANNUAL MEETING-SUPPLIES	29
ANNUAL MEETING-SPEAKERS	250
ANNUAL MEETING-FOOD	144
POSTAGE & SHIPPING	185
BANK CHARGES	19
DUES	65
INSURANCE	935
LIBRARY-EQUIPMENT	4,493
LIBRARY-BOOK REVIEW MATER	143
LIBRARY-BOOK REVIEW FOOD	275
LIBRARY-RAISE-A-READER PR	2,623
LIBRARY-SUMMER READING	3,722
LIBRARY-SEMINARS/WORKSHOP	120
LIBRARY-DONATION	32,000
LIBRARY-DISCRETIONARY DON	740
LIBRARY-GRANT MATCH	5,000
LIBRARY-TRAINING, TRAVEL	66
MEMBERSHIP-POSTAGE	105
MEMBERSHIP-SUPPLIES/NEWSL	555
OFFICE SUPPLIES & EXPENSE	520
TOTAL	\$ 54,646

636078513 FRIENDS OF THE FAIRHOPE LIBRARY

Federal Statements

FYE: 9/30/2009

63-6078513

11/20/2009 4:50 PM

Statement 4 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose

Description

PROVIDE FINANCIAL PERSONNEL AND EQUIPMENT SUPPORT FOR THE FAIRHOPE PUBLIC LIBRARY

636078513 FRIENDS OF THE FAIRHOPE LIBRARY

FYE: 9/30/2009

63-6078513

Federal Statements

11/20/2009 4:50 PM

Schedule A, Part III, Line 7b - Excess Gross Receipts

Donor Name	Total	Excess		
	\$	\$		
2008	28,595		23,595	
2007	26,291		21,291	
2006	20,095		15,095	
2005	6,019		1,019	
TOTAL	\$81,000	\$	61,000	

636078513 FRIENDS OF THE FAIRHOPE LIBRARY
63-6078513 Federal Statements

11/20/2009 4:50 PM

FYE: 9/30/2009

Special Events Direct Expenses

Description	Amount
COLUMN A	\$
FUNDRAISER 2009 FUNDRAISER SUPPLIES	5,487
SUBTOTAL	5,487
TOTAL	5,487
_	

DIRECT EXPENSES OTHER THAN FUNDRAISING EXPENSES REPORTED ON FORM 990-EZ, PAGE 1, LINE 6B.

FRIENDS OF FAIRHOPE PULIC LIBRARY 2009 BOARD OF DIRECTORS

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Vice President Jim Damico—11429 Mockingbird Lane, Fairhope;

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Treasurer Harriet Gutknecht—109 Echo Lane E, Fairhope;

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