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Form **990-EZ**

Department of the Treasury
Internal Revenue Service

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 $500,000 and total assets less than $1,250,000 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*

OMB No 1545 1150

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning Jul 1 , 2009, and ending Jun 30 , 2010

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Termination
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type See Specific Instructions

C Name of organization
TRI-STATE COLLEGE LIBRARY COOPERATIVE

Number and street (or P O box, if mail is not delivered to street address) Room/suite
ROSEMONT COLLEGE LIBRARY

City or town, state or country, and ZIP + 4
ROSEMONT PA 19010

D Employer identification number
23-7309267

E Telephone number
(610) 525-0796

F Group Exemption Number ►

• ***Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).***

G Accounting method ☐ Cash ☒ Accrual Other (specify) ►

I **Website:** ► N/A

J Tax-exempt status (check only one) – ☒ 501(c) (3) ◄ (insert no) ☐ 4947(a)(1) or ☐ 527

H Check ► ☒ if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

K Check ► ☐ if the organization is not a section 509(a)(3) supporting organization **and** its gross receipts are normally **not** more than $25,000 A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if $500,000 or more, file Form 990 instead of Form 990-EZ ► $ 136,866.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

REVENUE	1	Contributions, gifts, grants, and similar amounts received		1	73,275.
	2	Program service revenue including government fees and contracts		2	11,405.
	3	Membership dues and assessments		3	50,082.
	4	Investment income		4	1,459.
	5a	Gross amount from sale of assets other than inventory	5a 0.		
	b	Less cost or other basis and sales expenses	5b 0.		
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	0.
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ► ☐			
	a	Gross revenue (not including $ 0. of contributions reported on line 1)	6a 0.		
	b	Less direct expenses other than fundraising expenses	6b 0.		
	c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	0	6c	0.
	7a	Gross sales of inventory, less returns and allowances	7a 0.		
	b	Less cost of goods sold	7b 0.		
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c	0.
	8	Other revenue (describe ► Miscellaneous Income)		8	645.
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 ►		9	136,866.
EXPENSES	10	Grants and similar amounts paid (attach schedule)		10	73,180.
	11	Benefits paid to or for members		11	0.
	12	Salaries, other compensation, and employee benefits		12	46,725.
	13	Professional fees and other payments to independent contractors		13	1,600.
	14	Occupancy, rent, utilities, and maintenance		14	2,774.
	15	Printing, publications, postage, and shipping		15	1,114.
	16	Other expenses (describe ► See Other Expenses Statement)		16	12,010.
	17	**Total expenses.** Add lines 10 through 16 ►		17	137,403.
NET ASSETS	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	-537.
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)		19	78,017.
	20	Other changes in net assets or fund balances (attach explanation) rounding		20	3.
	21	Net assets or fund balances at end of year Combine lines 18 through 20 ►		21	77,483.

Part II Balance Sheets. If Total assets on line 25, column (B) are $1,250,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II)	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	77,949.	22	82,155.
23 Land and buildings	0.	23	0.
24 Other assets (describe ► A/C Receivables)	515.	24	55.
25 **Total assets**	78,464.	25	82,210.
26 **Total liabilities** (describe ► See L-26 Stmt)	447.	26	4,727.
27 **Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	78,017.	27	77,483.

G 9 H

Part III Statement of Program Service Accomplishments (See the instructions.)

What is the organization's primary exempt purpose? see footnotes to fin. st. attached

Describe what was achieved in carrying out the organization's exempt purposes In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title

Expenses (Required for section 501(c)(3) and (4) organizations and section 4947(a)(1) trusts, optional for others)

28	Continuing education awards 1825 (Grants $ 71,355.) If this amount includes foreign grants, check here ▶ ☐	28a	73,180.
29	Programs for member libraries - see attached information (Grants $ 0.) If this amount includes foreign grants, check here ▶ ☐	29a	10,250.
30	40653 (Grants $) If this amount includes foreign grants, check here ▶ ☐	30a	
31	Other program services (attach schedule) (Grants $) If this amount includes foreign grants, check here ▶ ☐	31a	
32	**Total program service expenses** (add lines 28a through 31a) ▶	32	83,430.

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (See the instrs)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
Ellen Gasiewski Rosemont College Library Rosemont PA 19101	Manager 40.00	40,653.	3,158.	
see list of officers of TCLC	Officers 5.00	0.	0.	0.

Part V Other Information (Note the statement requirements in the instrs for Part V.)

			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	33		X
34	Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes	34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), butnot reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
a	Did the organization have unrelated business gross income of $1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		X
b	If 'Yes,' has it filed a tax return on**Form 990-T** for this year?	35b		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N	36		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a 0.			
b	Did the organization file**Form 1120-POL** for this year?	37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employe**or** were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		X
b	If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b			
39	Section 501(c)(7) organizations Enter:			
a	Initiation fees and capital contributions included on line 9 39a			
b	Gross receipts, included on line 9, for public use of club facilities 39b			
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ► 0., section 4912 ► 0., section 4955 ► 0.			
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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	40b		X
c	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ► 0.			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ► 0.			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T	40e		X
41	List the states with which a copy of this return is filed ► Pennsylvania			

42a The organization's books are in care of ► Ellen Gasiewski Telephone no ► (610) 525-0796

Located at ► Rosemont College Libr PA ZIP + 4 ► 19010

			Yes	No
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country ►	42b		X
	See the instructions for exceptions and filing requirements for **Form TD F 90-22 1, Report of a Foreign Bank and Financial Accounts.**			
c	At any time during the calendar year, did the organization maintain an office outside of the U S ? If 'Yes,' enter the name of the foreign country ►	42c		X

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu o**Form 1041** – Check here ► ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ► 43

			Yes	No
44	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	45		X

Part VI **Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

		Yes	No
46	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I		X
47	Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II		X
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		X
49a	Did the organization make any transfers to an exempt non-charitable related organization?		X
49b	If 'Yes,' was the related organization a section 527 organization?		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than $100,000 of compensation from the organization If there is none, enter 'None'

(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 and deferred compensation	(e) Expense account and other allowances
NONE				

f Total number of other employees paid over $100,000 ►

51 Complete this table for the organization's five highest compensated independent contractors who each received more than $100,000 of compensation from the organization If there is none, enter 'None.'

(a) Name and address of each independent contractor paid more than $100,000	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over $100,000 ►

Sign Here

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

► Catherine Fennell — Signature of officer — Date 5/12/2011

► Catherine Fennell Vice President, TCLC — Type or print name and title

Paid Preparer's Use Only

Preparer's signature ► P.S. Hutchinson	Date 05/09/11	Check if self-employed ► X	Preparer's Identifying Number (See instructions) 155-48-6810
Firm's name (or yours if self-employed), address, and ZIP + 4 ► P S Hutchinson CPA 277 COUNTRY GATE ROAD WAYNE PA 19087		EIN ►	
		Phone no ► (610) 293-1867	

May the IRS discuss this return with the preparer shown above? See instructions ► X Yes No

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

► **Attach to Form 990 or Form 990-EZ.** ► **See separate instructions.**

OMB No 1545 0047

2009

Open to Public Inspection

Name of the organization	Employer identification number
TRI-STATE COLLEGE LIBRARY COOPERATIVE	23-7309267

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 11, 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)

3 ☐ A hospital or cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 ☒ An 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)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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 that describes the type of supporting organization and complete lines 11e through 11h

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 persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	**11g (i)**		
(ii) a family member of a person described in (i) above?	**11g (ii)**		
(iii) a 35% controlled entity of a person described in (i) or (ii) above?	**11g (iii)**		

h Provide the following information about the supported organizations

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document? Yes	(iv) No	(v) Did you notify the organization in col (i) of your support? Yes	(v) No	(vi) Is the organization in col (i) organized in the U S ? Yes	(vi) No	(vii) Amount of Support
Total									

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)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ')						
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge						
4 **Total.** Add lines 1-through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 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						

12 Gross receipts from related activities, etc (see instructions) **12**

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)	**14**	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	**15**	%

16a **33-1/3 support test – 2009.** If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

b **33-1/3 support test – 2008.** If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

17a **10%-facts-and-circumstances test – 2009** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part IV how the organization meets the 'facts-and-circumstances' test The organization qualifies as a publicly supported organization. ► ☐

b **10%-facts-and-circumstances test – 2008.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part IV how the organization meets the 'facts-and-circumstances' test The organization qualifies as a publicly supported organization ► ☐

18 **Private foundation.** If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► ☐

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

(Complete only if you checked the box on line 9 of Part I)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ')	47,235.	75,790.	48,435.	49,723.	123,357.	344,540.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose	9,494.	20,318.	11,020.	13,194.	11,405.	65,431.
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	0.	0.	0.	0.	0.	0.
5 The value of services or facilities furnished by a governmental unit to the organization without charge	0.	0.	0.	0.	0.	0.
6 **Total.** Add lines 1 through 5	56,729.	96,108.	59,455.	62,917.	134,762.	409,971.
7a Amounts included on lines 1, 2, 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year	0.	0.	7,753.	0.		7,753.
c Add lines 7a and 7b	0.	0.	7,753.	0.	0.	7,753.
8 **Public support** (Subtract line 7c from line 6)						402,218.

Section B. Total Support

Calendar year (or fiscal yr beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	56,729.	96,108.	59,455.	62,917.	134,762.	409,971.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	1,833.	2,498.	2,181.	1,646.	1,459.	9,617.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	1,833.	2,498.	2,181.	1,646.	1,459.	9,617.
11 Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on	0.	0.	0.	0.	0.	0.
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support.** (add lns 9, 10c, 11, and 12)						419,588.

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	95.86%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	94.81%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2009** (line 10c, column (f) divided by line 13, column (f))	17	2.29%
18 Investment income percentage from **2008** Schedule A, Part III, line 17	18	2.89%

19a **33-1/3 support tests – 2009.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☒

b **33-1/3 support tests – 2008.** If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

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

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

Form 990-EZ
Part II

Other Assets and Liabilities

2009

Name as Shown on Return	Employer Identification No
TRI-STATE COLLEGE LIBRARY COOPERATIVE	23-7309267

Line 24 - Other Assets:	Beginning of Year	End of Year
Totals to Form 990-EZ, Part II, line 24		

Line 26 - Total Liabilities:	Beginning of Year	End of Year
Deferred Revenue	0.	3,405.
Accounts Payable	447.	1,322.
Totals to Form 990-EZ, Part II, line 26	447.	4,727.

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

Other expenses (describe)	
Office supplies	549.
Staff Development & Training	4,448.
Annual Program and Other Program Expenses	5,802.
unemployment insurance	239.
miscellaneous expenses	972.
Total	12,010.

TCLC Officers 2008/2010

President	Jeffrey Rollison Immaculata University Gabriel Library 1145 King Road Immaculata, PA 19345
VP/President-Elect	James McCloskey (2009-10) Wilmington University Peoples Library 320 DuPont Highway New Castle, DE 19720
	Kathy Mulroy (2008) Philadelphia University Gutman Library School House Lane & Henry Avenue Philadelphia, PA 19144
Secretary:	Mary Anne Adler The American College Vane B. Lucas Memorial Library 270 S. Bryn Mawr Avenue Bryn Mawr, PA 19010
Treasurer:	Diane Arnold Chestnut Hill College Logue Library 9601 Germantown Avenue Philadelphia, PA 19118

TCLC OFFICERS

2010/2012

President	James McCloskey Wilmington University Peoples Library 320 DuPont Highway New Castle, DE 19720
VP/President-Elect	Catherine Fennell Rosemont College Gertrude Kistler Memorial Library 1400 Montgomery Avenue Rosemont, PA 19010
Secretary:	Lianne Hartman Montgomery County Comm College The Brendlinger Library Box 400 3340 DeKalb Pike Blue Bell, PA 19422-0758
Treasurer:	Michael LaMagna Cabrini College Holy Spirit Library 610 King of Prussia Road Radnor, PA 19087-3698

Continuing Education Council Awards 2009/2010

FALL 2009

David Perry	Bryn Athyn Coll.	ILLiad International Conf. Virginia Beach, VA March 24-26, 2010	$ 450.
Sara Franks	St Joseph's Univ.	LOEX Dearborn, MI April 29 – May 1, 2010	$ 275.
Eamon Tewell	Moore College	ARLIS/NA 2010 Conference Boston, MA April 23-26, 2010	$ 225.
		Total awarded Fall 2009:	**$ 950.**

Spring 2010 Awards

Dee Simms, Gwynedd-Mercy College $ 350 to attend the ALA convention in Washington, DC, June 25-28, 2010

Sharon Watson-Mauro, Moore College $100 to attend the ARLIS/NA 38th Annual Conference in Boston April 23-26, 2010

Brynne Norton, Philadelphia University $ 225 to attend the ARLIS/NA 38th Annual Conference in Boston April 23-26, 2010

Kate Pourshariati, MCCC $ 200 to attend the Orphan Film Symposium in NYC April 7-10, 2010

Total awarded Spring 2010: $ 875.

TOTAL AWARDED 2009-2010: $ 1825.

PROGRAMS 2009/2010

Educational Development Committee

Summer Camp 8 sessions — July 13-16, 2009
101 workshops/62 attendees

Navigating the Perilous Seas of Information Literacy — August 6, 2009
26 attendees

Managing Change — October 29, 2009
18 attendees

Altered Books Workshop — January 7, 2010
13 participants

Bus Trip to ALA Convention/Exhibits — June 28, 2010
19 participants

Spring Program

Transform: People Places Libraries — April 30, 2010
105 attendees

TCLC received an LSTA grant through PaLA (Pennsylvania Library Association) in the amount of $ 2000.00 for expenses for the spring program.

Social Committee

Triple Play: Blue Rocks Baseball Game — August 13, 2009
19 participants

Jim Henson Exhibit and Jazz Concert — November 22, 2009
24 participants

Happy Hour — March 10, 2010
11 participants

TRI-STATE COLLEGE LIBRARY COOPERATIVE
NOTES TO THE FINANCIAL STATEMENTS
June 30, 2010 and 2009

NOTE #1- Nature of Organization and Summary of Significant Accounting Policies

Basis of Presentation

The financial statements of Tri-State College Library Cooperative have been prepared on the accrual basis. The significant accounting policies followed by the organization are described below to enhance the usefulness of the financial statements. Depreciation is provided on assets as described in Note#2. The Tri-State College Library Cooperative occupies space in the Rosemont College Library. Rosemont College is a member of the Tri-State College Library Cooperative. The rent paid for the use of the office space is recorded as rent expense.

Nature of the Organization

Tri-State College Library Cooperative is a non-profit organization exempt from federal income taxes under section 501(c)(3) of the Internal Revenue Code. Accordingly, TCLC is exempt from federal and state income taxes. TCLC did not have any unrelated business income for the years ended June 30, 2010 and 2009 that would be subject to federal or state income taxes. TCLC's Forms 990-EZ – Federal Return of Organization Exempt from Income Tax remains subject to examination by the Internal Revenue Service for the years ended June 30, 2007 through June 30, 2010.

The purpose of this organization is to exchange information and share existing resources to a greater advantage and to strengthen resource and library services through joint application for private and government funds. There is an increased research potential through a mutually supporting acquisition program.

One of the goals of the Tri-State College Library Cooperative (herein called TCLC) is to continue to develop an online, union list of periodicals of all of all of its members' holdings, in order to make it possible for all libraries to engage in resource sharing.

The financial statements have been prepared in accordance with Statement of Financial Accounting Standards(SFAS) No.116, *Accounting for Contributions Received and Contributions Made,* and SFAS No. 117, *Financial Statements of Not-for-Profit Organizations.* SFAS No. 116 establishes accounting standards for contributions received. Generally, the Statement prescribes that all contributions received, including unconditional promises to give, are recognized as revenue in the period received at their fair values. The Statement also requires that contributions received be distinguished between those that increase permanently restricted, temporarily restricted and unrestricted net assets.

SFAS No. 117 prescribes standards for general-purpose financial statements for all not-for-profit organizations. The Statement requires the classification of an organization's net assets, its revenue and expenses based on the existence or absence of donor-imposed

restrictions. It requires that amounts for each of three classes of net assets(permanently restricted, temporarily restricted and unrestricted) be displayed in a statement of financial position and that the amounts of the change in each of the three classes of net assets be displayed in a statement of activities. In accordance with this requirement, the net assets of TCLC and changes therein are reported as follows:

Unrestricted net assets – Net assets that are not subject to donor-imposed stipulations. These assets may be designated for specific purposes by TCLC.

Temporarily restricted net assets – Net assets subject to donor-imposed stipulations that will be met by TCLC and/or the passage of time. They include gifts restricted by donors for specific programs and other operating purposes.

Permanently restricted net assets – Net assets subject to donor-imposed stipulations that they be permanently maintained by TCLC.

Contributions received have been recorded as increases in temporarily restricted net assets. When the restriction expires(that is, when a stipulated time restriction ends or purpose restriction is accomplished), temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions.

NOTE#2 – FURNITURE AND FIXTURES

Furniture, fixtures and office equipment have been recorded at the acquisition cost. Depreciation was provided over a 10 year life on the straight line basis for furniture and fixtures and over a 5 year life for office equipment.

Cost:	**6/30/10**	**6/30/09**
Furniture & fixtures	10,931.	10,931.
Office equipment	11,772.	11,772.
	22,703.	22,703.
Accumulated deprec.	(22,703.)	(22,703.)
	0.	0.

All assets are fully depreciated and no depreciation expense was recorded for the year ended 6/30/10 and 6/30/2009. Repairs are expensed as incurred. TCLC capitalizes all expenditures for furniture, fixtures and office equipment in excess of $200.

NOTE#3 – INVESTMENTS

TCLC had a certificate of deposit in the face amount of $ 26,843 which matured on May 21, 2010, with an interest rate of 3.45%. Accrued interest income of $898 was recorded. A 13 month certificate in the face amount of $29,761, which matures on June 21, 2011 was acquired. There is accrued interest income for the year of $20. The value at 6/30/10

is $29,781. The funds for this certificate were provided by member institutional contributions, personal contributions and the contributions of outside vendors over a several year period. The purpose of this fund is to provide a fund which will support the continuing education of TCLC members. This will enable them to better serve the population of library users. Contributions to TCLC for continuing education are recorded in income in the year received and transferred to the certificate when it matures and is rolled over. In the year ended 6/30/10, $1,825. was awarded to members to further their education and $ 2,075. in the year ended 6/30/09. For the year ended 6/30/10 and 6/30/09 contributions received totaled $1,920 and $1,755 respectively.

TCLC also has a certificate in the face amount of $ 20,175 with interest income for the year of $ $416, which matures on June 23, 2011, with an interest rate of 2.00%. The value at 6/30/10is $21,005..

NOTE#4 – CONTRIBUTED SERVICES

TCLC receives a significant contribution of time and services from its members, who serve on committees and as officers of TCLC. Member schools view time spent by their employees as valuable in increasing information and resource sharing among libraries. The value of this time is not reflected in the statements, since it is not susceptible to objective measurement or valuation and does not meet the criteria necessary for recognition.

NOTE#5 –REVENUE

Dues include basic membership dues. Dues are recognized as revenue in the applicable membership period. Dues paid in advance are classified as deferred revenue until the appropriate membership period.

The Union List is prepared approximately every other year. It is sold to members and non-members at cost. The income from the sale of the Union List is recorded in the year the list is distributed and the expenses for printing and on-line expenses are recorded in the year paid.

TCLC received a grant from the PA Department of Education, LSTA for the period September, 2009 through July, 2010 in the amount of $71,355. These grant receipts and expenditures are included in the financial statements for the year ended June 30, 2010. This grant was provided to allow TCLC member organizations to install OCLC ILLiad Resource Sharing Management Software packages in thirteen Pennsylvania libraries in order to facilitate Ill service, increasing and formalizing connectivity among libraries and thereby providing more resources to users.

NOTE#6 – PENSION CONTRIBUTIONS

During the year ended 6/30/10and 6/30/09, TCLC contributed $3,158 and $3,037 to TIAA-CREF's pension plan for their full-time employee. The contributions to the pension plan are fully vested.

NOTE#7 – CASH

TCLC maintains a money market account and checking account in a commercial bank. The amounts in these accounts do not exceed the federally insured limit. TCLC has not experienced any losses in such accounts and TCLC believes it is not exposed to any significant credit risk in cash.

NOTE#8 – USE OF ESTIMATES

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying footnotes. Actual results could differ from those estimates.

FUNCTIONAL ALLOCATION OF EXPENSES

The cost of providing the various programs and other activities have been summarized on a functional basis in the Statement of Activities. Accordingly, certain costs have been allocated between Program Services and General and Administrative categories.

SUPPLEMENTARY INFORMATION

TRI-STATE COLLEGE LIBRARY COOPERATIVE
Schedule of Functional Expenses
Years Ended June 30, 2010 and 2009

2010

	Program Services	General and Administrative	Total
Salaries & P/roll Taxes	43,567.	0.	43,567.
Pension	3,158.		3,158.
Insurance		239.	239.
Internet Access		108.	108.
Miscellaneous Expenses		972.	972.
Postage		854.	854.
Program Costs	10,249.	0.	10,249.
Continuing Education Awards	1,825.	0.	1,825.
Professional Fees		1,600.	1,600.
Rent		1,200.	1,200.
Supplies & Equipment		1,169.	1,169.
980.			
Telephone		845.	845.
Grant Expenditures		71,355.	71,355.
Printing		260.	260.
	$58,799.	$78,602.	$137,401.

SUPPLEMENTARY INFORMATION

TRI-STATE COLLEGE LIBRARY COOPERATIVE
Schedule of Functional Expenses
Years Ended June 30, 2010 and 2009

2009

	Program Services	General and Administrative	Total
Salaries & P/roll Taxes	40,955.	0.	40,955.
Pension & benefits	4,210.		4,210.
Insurance		247.	247.
Internet Access		163.	163.
Miscellaneous Expenses		749.	749.
Postage		534.	534.
Program Costs	9,689.	0.	9,689.
Grant Program Costs	0.	0.	0.
Continuing Education Awards	2,075.	0.	2,075.
Professional Fees		1,595.	1,595.
Rent		1,200.	1,200.
Supplies & Equipment		1,171.	1,171.
Telephone		810.	810.
Grant Expenses		0.	0.
Printing	0.	0.	0.
Depreciation expense	0.	0.	0.
	$56,929.	$6,469.	$63,398.

Form **8868**
(Rev April 2009)

Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► **File a separate application for each return.**

OMB No 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box ► [X]
- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ► [ ]

All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns

Electronic Filing ***(e-file).*** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868 For more details on the electronic filing of this form, visit *www irs gov/efile* and click on *e-file for Charities & Nonprofits*

Type or print	Name of Exempt Organization	Employer identification number
	TRI-STATE COLLEGE LIBRARY COOPERATIVE	23-7309267
File by the due date for filing your return See instructions	Number, street, and room or suite number If a P O box, see instructions ROSEMONT COLLEGE LIBRARY	
	City, town or post office, state, and ZIP code For a foreign address, see instructions ROSEMONT PA 19010	

Check type of return to be filed (file a separate application for each return)

[ ] Form 990	[ ] Form 990-T (corporation)	[ ] Form 4720
[ ] Form 990-BL	[ ] Form 990-T (section 401(a) or 408(a) trust)	[ ] Form 5227
[X] Form 990-EZ	[ ] Form 990-T (trust other than above)	[ ] Form 6069
[ ] Form 990-PF	[ ] Form 1041-A	[ ] Form 8870

- The books are in the care of ► Ellen Gasiewski
  Telephone No ► (610) 525-0796 FAX No ►
- If the organization does not have an office or place of business in the United States, check this box ► [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ► [ ] . If it is for part of the group, check this box ► [ ] and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until Feb 15, 20 11, to file the exempt organization return for the organization named above. The extension is for the organization's return for

► [ ] calendar year 20 ___ or
► [X] tax year beginning Jul 1, 20 09, and ending Jun 30, 20 10

2 If this tax year is for less than 12 months, check reason [ ] Initial return [ ] Final return [ ] Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	**3a**	$ 0.
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit	**3b**	$ 0.
c Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	**3c**	$ 0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions. Form **8868** (Rev 4-2009)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** and check this box ► [X]

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print / File by the extended due date for filing the return See instructions	Name of Exempt Organization	Employer identification number
	TRI-STATE COLLEGE LIBRARY COOPERATIVE	23-7309267
	Number, street, and room or suite number If a P O box, see instructions	For IRS use only
	ROSEMONT COLLEGE LIBRARY	
	City, town or post office, state, and ZIP code For a foreign address, see instructions	
	ROSEMONT PA 19010	

Check type of return to be filed (File a separate application for each return)

[ ] Form 990	[ ] Form 990-PF	[ ] Form 1041-A	[ ] Form 6069
[ ] Form 990-BL	[ ] Form 990-T (section 401(a) or 408(a) trust)	[ ] Form 4720	[ ] Form 8870
[X] Form 990-EZ	[ ] Form 990-T (trust other than above)	[ ] Form 5227	

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in care of ► Ellen Gasiewski
  Telephone No ► (610) 525-0796 FAX No ►
- If the organization does not have an office or place of business in the United States, check this box ► [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ► [ ] If it is for part of the group, check this box ► [ ] and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until May 16 , 20 11

5 For calendar year , or other tax year beginning Jul 1 , 20 09 , and ending Jun 30 , 20 10

6 If this tax year is for less than 12 months, check reason [ ] Initial return [ ] Final return [ ] Change in accounting period

7 State in detail why you need the extension Additional time is needed to finalize the financial statements which are needed to file a complete and accurate tax return

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	**8a**	$ 0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	**8b**	$ 0.
c Balance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instrs	**8c**	$ 0.

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ► Title ► Date ►