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### Form 990-EZ

OMB No 1545-1150

Open to Public Inspection

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, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$200,000 and total assets less than \$200,000 at the pind of the year may use this form

The organization may have to use a copy of this return to satisfy state reporting requirements.

		2010 calendar year, or tax year beginning and ending		
	Check if applicable	C Name of organization D	Employer	identification number
$\sqsubseteq$	Addre	s change		
	Name	hange LAWRENCE PUBLIC LIBRARY FOUNDATION		.179872
	Initial	Number and street (or P.O. box, if mail is not delivered to street address)  Room/suite   E	Telephone	
	Termir		(785	<u>843-3833</u>
	Amen		Group Exe	emption
	Applica		Number 1	<u> </u>
G /	Accoun	ng Method: X Cash Accrual Other (specify)	Check >	If the organization is <b>not</b>
١ ١	Website	► WWW.LAWRENCE.LIB.KS.US	required t	to attach Schedule B
J 1	Tax-exe	mpt status (check only one) — X 501(c)(3) 501(c) ( ) ◀(insert no.) 4947(a)(1) or 527	(Form 99	0, 990-EZ, or 990-PF).
K (	Check 🕽	of the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not m	ore than \$	50,000. A Form 990-EZ or
ł	Form 99	O return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization cho	oses to fil	e a return, be sure to file a
	comple	return.		
L /	Add line	5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II,	<u></u>	
	line 25,	column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ	▶ \$	
Ρi	art I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instruction	ions for Pa	art I.)
		Check if the organization used Schedule 0 to respond to any question in this Part I		<u> </u>
	1	Contributions, gifts, grants, and similar amounts received	1_1_	168,393.
	2	Program service revenue including government fees and contracts	2_	
	3	Membership dues and assessments	3_	
	4	nvestment income	4_	
	5a	Gross amount from sale of assets other than inventory 5a		
	b	Less: cost or other basis and sales expenses		
	C	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events		
a)	a	Gross income from gaming (attach Schedule G if greater than		
Ž	1	\$15,000)   Ga		
Revenue	ь	Gross income from fundraising events (not including \$ 11,492. of contributions		
Œ		from fundraising events reported on line 1) (attach Schedule G if the sum of such	[	
		gross income and contributions exceeds \$15,000) 6b 30,36	0.	
	C	Less: direct expenses from gaming and fundraising events 6c 6,95	7.	
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	23,403.
	7a	Gross sales of inventory, less returns and allowances 7a		
	Ь	Less: cost of goods sold		
	С	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	8	Other revenue (describe in Schedule O)  SEE SCHEDULE O	8	646.
	_9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	192,442.
	\$10	Grants and similar amounts paid (list in Schedule 0)  SEE SCHEDULE O	10	135.
	<b>₹</b>	Benefits paid to or for members	11	
ŝ	12	Salaries, other compensation, and employee benefits	12	<u> </u>
Š	₁-13	Professional fees and other payments to independent contractors	13	
Expenses	##	Occupancy, rent, utilities, and maintenance	14	
Ш	₽3	Printing, publications, postage, and shipping RECEIVED	15	
	16	Other expenses (describe in Schedule O)  SEE SCHEDULE O	16	78,599.
_		1411 17 14 14 14 14 14	<b>▶</b> 17	78,734.
s	<b>48</b>	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	113,708.
set	<b>5</b> 9	Net assets or fund balances at beginning of year (from line 27, column (A))		Ì
Ş		(must agree with end-of-year figure reported on prior year's return)	19	352,733.
Net Assets	18 19 OSC	Other changes in net assets or fund balances (explain in Schedule O)	20	0.
_	21	Net assets or fund balances at end of year. Combine lines 18 through 20	<b>2</b> 1	466,441.
LH	A For	Paperwork Reduction Act Notice, see the separate instructions.	<u> </u>	Form <b>990-EZ</b> (2010)
		<i>6-</i> 7	8	
			-	•
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Pa	990-EZ (2010) LAWRENCE PUBLIC LIBRARY 1	FOUNDATION		48	<u>-11798</u>	72 Page 2
	rt II Balance Sheets. (see the instructions for Part II.)					
	Check if the organization used Schedule O to respond to any question	in this Part II				
	•	Ĺ	(A) Beginning of ye			nd of year
22	Cash, savings, and investments		352,73		<del></del>	466,441.
23	Land and buildings			2	<del></del>	
24	Other assets (describe in Schedule 0)	<u> </u> _		2		
25	Total assets	<u> </u> _	352,73			466,441.
26	Total liabilities (describe in Schedule 0)	Ļ		0.2		0.
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)  Int III   Statement of Program Service Accomplishme	nto /aaa tha saabaasaa	352,73	33.2		466,441.
Pa	<del></del>	•	s for Part III.)	77	_	rpenses for section
W/ha	Check if the organization used Schedule 0 to respond to any question to the organization's primary exempt purpose? SEE SCHEDULE (			X	<sup>≟</sup> 501(c)(3)	and 501(c)(4)
	cribe what was achieved in carrying out the organization's exempt pu					ons and section ) trusts; optional
	services provided, the number of persons benefited, and other releva			scribe	for others.	.)
	PROVIDING FUNDS TO THE PUBLIC LIBRA		<del></del>		+	
	LAWRENCE, KANSAS	IKI OF THE C	TII OI			
	2121.02 / 11.10110		·			
	(Grants \$ ) If this amount includes foreign	grants, check here			]  28a	81,578.
29	+					<u> </u>
	(Grants \$ ) If this amount includes foreign	grants, check here			] 29a	
30			··		.	
		<del></del>			_	
	(Grants \$ ) If this amount includes foreign	grants, check here			] 30a	
	Other program services (describe in Schedule O)				٦	
	(Grants \$ ) If this amount includes foreign	grants, check here	<del></del>	<u> </u>	] 31a	81,578.
32	Total program service expenses (add lines 28a through 31a)				▶ 32	X 1 5 / X .
	HIVE List of Officers Directors Trustoes and Koy	Employees				
Pa	Int IV List of Officers, Directors, Trustees, and Key		one even if not compensat	ed (see t		
Pa	Check if the organization used Schedule 0 to respond to any question	on in this Part IV	<del></del>	- 1	he instructions (	for Part IV)
Pa	Check if the organization used Schedule 0 to respond to any question	(b) Title and average ho	ours (c) Compensati	on (d)	Contributions of employee	(e) Expense
Pa	<del></del>	on in this Part IV	ours (c) Compensati	on (d)	Contributions of employee enefit plans & deferred	for Part IV)
	Check if the organization used Schedule O to respond to any question	(b) Title and average ho per week devoted to position	ours (c) Compensation (If not paid, en	on (d)	Contributions o employee enefit plans &	(e) Expense account and
	Check if the organization used Schedule 0 to respond to any question	(b) Title and average ho per week devoted to position  DIRECTORS	ours (c) Compensati (If not paid, en	on (d)	Contributions of contri	(e) Expense account and other allowances
	Check if the organization used Schedule O to respond to any question	(b) Title and average ho per week devoted to position	ours (c) Compensati (If not paid, en	on (d)	Contributions of employee enefit plans & deferred	(e) Expense account and
	Check if the organization used Schedule O to respond to any question (a) Name and address	(b) Title and average ho per week devoted to position  DIRECTORS	ours (c) Compensati (If not paid, en	on (d)	Contributions of contri	(e) Expense account and other allowances
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	Check if the organization used Schedule O to respond to any question	(b) Title and average ho per week devoted to position  DIRECTORS	ours (c) Compensati (If not paid, en	on (d)	Contributions of contri	(e) Expense account and other allowances
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	Check if the organization used Schedule O to respond to any question	(b) Title and average ho per week devoted to position  DIRECTORS	ours (c) Compensati (If not paid, en	on (d)	Contributions of contri	(e) Expense account and other allowances
	Check if the organization used Schedule O to respond to any question	(b) Title and average ho per week devoted to position  DIRECTORS	ours (c) Compensati (If not paid, en	on (d)	Contributions of contri	(e) Expense account and other allowances
	Check if the organization used Schedule O to respond to any question	(b) Title and average ho per week devoted to position  DIRECTORS	ours (c) Compensati (If not paid, en	on (d)	Contributions of contri	(e) Expense account and other allowances
	Check if the organization used Schedule O to respond to any question	(b) Title and average ho per week devoted to position  DIRECTORS	ours (c) Compensati (If not paid, en	on (d)	Contributions of contri	(e) Expense account and other allowances

	Other Information (Note the statement requirements in the instructions for Part V)  Check if the organization used Schedule 0 to respond to any question in this Part V			$\overline{\mathbf{x}}$
			Yes	
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in			
	Schedule O	33		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended			
	documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but <b>not</b>			
	reported on Form 990-T, explain in Schedule O why the organization did not report the income on Form 990-T.	1	İ	
а	Did the organization have unrelated business gross income of \$1,000 or more or was it a section 501(c)(4), 501(c)(5), or			
	501(c)(6) organization 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	N/	
	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
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions.			
	Did the organization file Form 1120-POL for this year?	37b		х
	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made			
	in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X
ь	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A			
39	Section 501(c)(7) organizations. Enter:	1 :		
	Initiation fees and capital contributions included on line 9  N/A			
	Gross receipts, included on line 9, for public use of club facilities  39b  N/A	1		ĺ
	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			
	section 4911 ▶ O . ; section 4912 ▶ O . ; section 4955 ▶ O .			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the			1
-	year, or did it engage in an excess benefit transaction in a prior year, that has not been reported on any of its prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	40b		X
G	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			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the			{
Ī	organization D.			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter			1
Ť	transaction? If "Yes," complete Form 8886-T	40e		X
41	List the states with which a copy of this return is filed.   NONE			
	The organization's books are in care of ▶ DENISE BERKLEY Telephone no. ▶ (785)	843	-38	33
	Located at ► 707 VERMONT, LAWRENCE, KS ZIP+4 ►			
h	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		Yes	No
	account)?	42b		X
	If "Yes," enter the name of the foreign country:			1
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
c	At any time during the calendar year, did the organization maintain an office outside of the U.S?	42c	ļ	X
٠	If "Yes," enter the name of the foreign country:			<u>, -</u> -
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here		•	
10	and enter the amount of tax-exempt interest received or accrued during the tax year	N/A		
	and onto the difficult of the exempt interest received of according the the year	11/1	<u> </u>	
			Yes	No
44 >	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of			
770	Form 990-EZ	44a		L <sub>X</sub>
	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead	774		+ <u>**</u>
U		446		
	of Form 990-EZ	44b	<del> </del>	X
_	Did the organization receive any payments for indoor tanning services during the year?	44c	L	<u> </u>
			T	
	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	440		

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It is any related organization controlled entity of the organization within the meaning of section 512(b)(13)?  10 dith en organization accesse any page-interest from engage in any transaction within other meaning of section 512(b)(13)?  10 dith en organization engage, directly or indirectly, in political campagin activities on behalf of or in opposition to candidates for public office?  11 diff vs. Complete Schedule (Part)  11 diff vs. Complete Schedule (Part)  12 diff vs. Complete Schedule (Part)  13 diff vs. Complete Schedule (Part)  14 diff vs. Complete Schedule (Part)  15 diff vs. Complete Schedule (Part)  16 diff vs. Complete Schedule (Part)  16 diff vs. Complete Schedule (Part)  17 diff vs. Complete Schedule (Part)  18 diff vs. Complete Schedule (Part)  19 diff vs. Complete Schedule (Part)  19 diff vs. Complete Schedule (Part)  10 diff vs. Complete Schedule (Part)  10 diff vs. Complete Schedule (Part)  11 diff vs. Complete Schedule (Part)  11 diff vs. Complete Schedule (Part)  12 diff vs. Complete Schedule (Part)  13 diff vs. Vs. vs. series feetable difference schools (Part)  19 diff vs. Vs. vs. series feetable difference schools (Part)  19 diff vs. Vs. vs. series feetable difference schools (Part)  19 diff vs. Vs. vs. series feetable difference schools (Part)  19 diff vs. Vs. vs. series feetable difference schools (Part)  19 diff vs. vs. vs. series difference schools (Part)  10 diff vs. vs. vs. series discharganization vs. vs. series schools (Part)  10 diff vs. vs. vs. series discharganization vs. vs. series vs. series schools (Part)  10 diff vs. vs. vs. series discharganization vs. vs. series vs. series vs. series schools (Part)  10 diff vs. vs. vs. series discharganization vs. vs. series	rm 990-EZ (	<sup>2010)</sup> LAWREI	NCE PUBLIC	LIBRARY	FOUNDATION		<u>48-1179</u>	872		Page 4
od the cryanization receive any payment from or regage in any transaction with a controlled entity within the meaning of section 512(b)(13)?    17								,	Yes	
If Yes, From 900 and Schedule R may reed to be completed matead of from 900-E2  Dut the organization engage, directly on ordinectly, an princial campaign activities on behalf of or in opposition to candidates for public office?  If Yes, complete Schedule C, Part I  Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All sections 501(c)(3) organization and section 4947(a)(1) nonexempt charitable trusts only. All sections 501(c)(3) organization and section 4947(a)(1) nonexempt charitable trusts only. All sections 501(c)(3) organization and section 4947(a)(1) nonexempt charitable trusts only. All sections 501(c)(3) organization and section 17(b)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)		· · · · ·			• • • • • • • • • • • • • • • • • • • •	• •		45	ļ	<u> </u>
Dot the organization engage, directly or inderectly, in policial campainy activities on behalf of or an opposition to candidates for public office?  If 'Ys, complete Schedule, C, Part II  Dot the organization and section 447(3)(1) monerangly and sold and sold sold sold sold sold sold sold sol						e meaning of section	512(b)(13)?			
If Yes, complete Schedules, C part   46   17   17   17   17   17   17   17   1								45a	ļ	X
Section 501(c)(3) organizations and section 4947(c)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(c)(1) nonexempt charitable trusts must answer questions 47-49b and 52, and complete the tables for less 50 and 51 in Check if the organization used Schedule O to respond to any questions and section 4947(c)(1) nonexempt charitable related organization as school as described in section 170(b)(1)(A)(p) (1) *Yes,* complete Schedule E 48 2 3 organization as school as described in section 170(b)(1)(A)(p) (1) *Yes,* complete Schedule E 48 2 3 organization on which the first section of the plants of the organization make any transfers to an exempt none-farisable related organization as school 25 organization? 49 organization of the organization which the first section of the plants organization. If there is none, enter *None.*  (a) Hame and address of each employee paid more than \$100,000 of compensation from the organization in the relation of the plants organization in the plants organization in the plants of the plants organization in the plants organization in the plants of the plants organization in the plants of the plants organization in the plants organization in the plants of t			• • • • •	ical campaign actr	vities on behalf of or in oppositio	n to candidates for pu	ıblıc office?			
organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47-49s and 52, and complete the tables for lines 50 and 51.  Check if the organization as Schedule 50 respend to any question in the Part VI  If yes IN  If yes IN  If the organization is biobying activities? If Yes, complete Schedule C, Part II  If Yes IN  If Yes I					<del></del>				<u> </u>	<u>X</u>
Did the organization as choice as described in services. **Complete Schedule C, Part II							-			
Dot the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II Is the organization a school as described in section 170(b)(1)(A)(n)? If "Yes," complete Schedule E  Old the organization asknool as described in section 170(b)(1)(A)(n)? If "Yes," complete Schedule E  Old the organization make any transfers to an exempt non-charable related organization?  If "Yes," was the related organization asknool as extend \$27\$ organization? Section \$27\$ organization is five highest compensated employees (other than officers, directors, trustices 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 NONE  Total number of other employees paid over \$100,000  NONE  Total number of other employees paid over \$100,000  Complete this table for the organization if whose is none, enter "None."  (a) Name and address of each melependent contractor paid more than \$100,000 (b) Type of service.  (a) Name and address of each melependent contractor paid more than \$100,000 (b) Type of service.  (b) Title and average hours.  (c) Compensation (10) Compensation from the organization. If there is none, enter "None."  (a) Name and address of each melependent contractor paid more than \$100,000 (b) Type of service.  (b) Type of service.  (c) Compensation from the organization of other melependent 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 melependent contractor paid more than \$100,000 (b) Type of service.  (b) Type of service.  (c) Compensation from the analysis of the service of the paid of my Nonethelph (10) Compensation of the paid of					•	and 52, and complete	the tables for I	ines 50	and 5	·
Did the organization a school as described in section 170(b)(1)(A)(n)? If "Yes," complete Schedule E  1. Did the organization a school as described in section 170(b)(1)(A)(n)? If "Yes," complete Schedule E  1. Did the organization make any transfers to an exempt non-charitable related organization?  1. If "Yes," was the related organization a section 527 organization?  1. If "Yes," was the related organization a section 527 organization?  1. If yes, "was the related organization a section 527 organization." If there is none, enter "None."  1. (a) Name and address of each employee paid more than \$100,000 of compensation from the organization. If there is none, enter "None."  1. (b) Title and average hours per week devoted to position  1. (c) Compensation  1. (d) Commensation organization?  1. (e) Compensation  1. (e)		Check if the organization	used Schedule O to re	spond to any ques	tion in this Part VI		<del></del>		T <b>x</b>	
Is the organization as aclosed as described in section 170(b)(1)(A)(a)? If Yes, 'complete Schedule E	5.10							<del></del>		NC
Dut the organization make any transfers to an exempt non-charitable related organization?  If Yes, 'was the related organization ascetion 527 organization?  Complete this table for the organization is 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 NONE  Total number of other employees paid over \$100,000  NONE  (b) Title and average hours per week devoted 10 position  (c) Compensation  (d) Compensation  (e) Compensation  (d) Compensation  (e) Expensation  (e) Expensation  (f) Compensation  (e) Expensation  (f) Compensation  (o) Name and address of each employee paid more than \$100,000  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  (d) Compensation  (e) Compensation  (e) Total number of other independent contractors each receiving over \$100,000  (b) Type of service  (c) Compensation  (d) Total number of other independent contractors each receiving over \$100,000  (e) Type of service  (e) Compensation  (f) Compensation from the organization of other independent contractors each receiving over \$100,000  (f) Type of service  (g) Compensation  (g) Compensation  (g) Type of other many and file  (g) Compensation  (g) Compensation  (g) Compensation  (g) Type of service  (g) Compensation  (g) Compensation  (g) Type of service  (g) Compensation  (g) Type of other many and file  (g) Type of position  (g)			• -	•					X	
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reparer se Only  Firm's name ► LOWENTHAL, WEBB & ODERMANN, P.A.  Firm's address ► 900 MASSACHUSETTS, SUITE 301  LAWRENCE, KS 66044-2868  By the IRS discuss this return with the preparer shown above? See instructions  Self- employed  106/16/11  Firm's EIN ►  Phone no. (785)749-505  LAWRENCE, KS 66044-2868	oro /	Stringture of officer					- u.u	,		
reparer   PATRICIA L. WEBB   Datum		July	inder,	Treasur	V					
Firm's name LOWENTHAL, WEBB & ODERMANN, P.A.  Firm's address > 900 MASSACHUSETTS, SUITE 301  LAWRENCE, KS 66044-2868  say the IRS discuss this return with the preparer shown above? See instructions	)	Type or print name and to		Preparer's signat	ure Date	Check	ıf PTIN			
Firm's name LOWENTHAL, WEBB & ODERMANN, P.A.  Firm's address > 900 MASSACHUSETTS, SUITE 301  LAWRENCE, KS 66044-2868  say the IRS discuss this return with the preparer shown above? See instructions	)	Type or print name and to		Preparer's signat	ure Date					
Firm's address ► 900 MASSACHUSETTS , SUITE 301 Phone no. (785)749-505  LAWRENCE , KS 66044-2868  ay the IRS discuss this return with the preparer shown above? See instructions  ► X Yes	aid	Type or print name and to Print/Type preparer's	name	Preparer's signat	01111	self- emplo				
LAWRENCE, KS 66044-2868  by the IRS discuss this return with the preparer shown above? See instructions  X Yes	aid reparer	Print/Type preparer's  PATRICIA L	name	Patrice à	L. West 06/1	self- emplo	pyed			
ay the IRS discuss this return with the preparer shown above? See instructions	aid reparer	Print/Type preparer's  PATRICIA L Firm's name  LO	name WEBB WENTHAL, W	Patricia à	L. Well 06/1 ERMANN, P.A.	self- emplo	oyed N	749	9-50	
	aid reparer	Type or print name and to  Print/Type preparer's  PATRICIA L.  Firm's name ▶ LO  Firm's address ▶ 9	name  WEBB WENTHAL, W 00 MASSACH	Datues à EBB & OD USETTS,	S. Well 06/10 ERMANN, P.A. SUITE 301	self- emplo	oyed N	749	9-50	50
	Paid Preparer Jse Only	Print/Type preparer's  PATRICIA L Firm's name   LO Firm's address   9	name  WEBB  WENTHAL, W  OO MASSACH AWRENCE, K	Datuis à EBB & OD USETTS, S 66044-	S. Well 06/10 ERMANN, P.A. SUITE 301 2868	self- emplo	oyed			50

#### **SCHEDULE A**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

## **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

2010

Open to Public Inspection

Name of the organization

Employer identification number

			E PUBLIC LIB						48	<u>-1179872</u>
Part I	Reason f	for Public Chari	ty Status (All organiza	ations mus	st complete	e this part	.) See inst	ructions		
The organ	nization is not a	private foundation t	pecause it is (For lines 1	through 1	1, check c	only one b	ox)			
1 🔲	A church, cor	nvention of churches	, or association of churc	hes descr	ibed in sec	ction 170	b)(1)(A)(i).	,		
2 🔲	A school desc	cribed in section 17	0(b)(1)(A)(ii). (Attach Sch	nedule E)						
з 🗔			al service organization d	-	n section	170(b)(1)(	A)(iii).			
4		•	perated in conjunction v					b)(1)(A)(iii	. Enter th	ne hospital's name.
• —	city, and state	-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					- / · //· · / · · · ·		,
5 🔲	•		penefit of a college or un	iversity ov	vned or on	erated by	a governo	nental unit	describe	d in
<b>5</b>	-	(b)(1)(A)(iv). (Comple	-	iivoronty ov	med or op	crated by	a govern	noma om	00001100	<b></b>
<u> </u>			ent or governmental unit	docomboo	l .nati	- 470/bV/4	VAVGA			
7 🗓			erk or governmentar unit					r fram tha	aanaral n	ublic described in
ا لما	-	-		its supp	on monia	governine	intai uniit O	rironitile	general p	abiic described in
• —	•	b)(1)(A)(vi). (Complet	•	O	Deat II \					
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									
					-	-				_
			axable income (less sect	ion 511 ta:	x) from bus	sinesses a	cquired b	y the orgar	nization a	fter June 30, 1975
		<b>509(a)(2).</b> (Complete	•							
10	_	-	perated exclusively to tes	•	•			•		_
11	_		perated exclusively for th		•			-		
	· · · · · · · · · · · · · · · ·	· · ·	tions described in section				) See sec	tion 509(a	ı)( <b>3</b> ). Che	ck the box that
			organization and comple						. —	
_	a Type I		•		e III - Func		•		d∟	Type III - Other
e 📖	=		t the organization is not			-				
			han one or more publicly		_				(a)(1) or s	ection 509(a)(2)
f	If the organize	ation received a writ	ten determination from t	he IRS tha	at it is a Ty	pe I, Type	II, or Type	e III		
	supporting or	rganization, check th	nis box							
g	Since August	t 17, 2006, has the c	rganization accepted an	ny gift or co	ontribution	from any	of the folk	owing pers	ons?	<del></del>
	(i) A persor	n who directly or ind	irectly controls, either al	one or tog	ether with	persons o	lescribed i	n (ii) and (i	ii) below,	Yes No
	the gove	erning body of the si	upported organization?							11g(ı)
	(ii) A famıly	member of a persor	n described in (i) above?							11g(ii)
	(iii) A 35% d	controlled entity of a	person described in (i) o	or (ii) above	∍?					11g(iii)
h	Provide the fe	ollowing information	about the supported org	ganization	(s)					
			· · · · · · · · · · · · · · · · · · ·							
(i) Nam	e of supported	(ii) EIN	(iii) Type of		organization			(vi) Is		(vii) Amount of
	ganization	(,	organization (described on lines 1-9		sted in your		ion in col.	organizatio	ed in the	support
	-		above or IRC section			(i) of your sup	r support?	(i) organize U.S.	7	
		<u> </u>	(see instructions))	Yes	No	Yes	No	Yes	No	
						<u>L</u>		<u></u>		
	_	I _					1			
									<del>    </del>	
						1				
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			1	1		1				
			†	<del> </del>	<del> </del>	<del>                                     </del>	1	<del>                                     </del>	<del>                                     </del>	<del></del>
			1	1				İ		
		<del> </del>	<del> </del>	<del> </del>	<del> </del>	<del> </del>	<del> </del>	<del> </del>	<del>   </del>	
Total										
Total	Denemicate S	dusting A - A B1 - 11	L	<u>.                                    </u>	<u> </u>	L	<u> </u>	<u> </u>	<u> </u>	
LUN LOL	raperwork Re	equetion Act Notice	e, see the Instructions f	Of				Schedul	e A (Forn	n 990 or 990-EZ) 2010

032021 12-21-10

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010 LAWRENCE PUBLIC LIBRARY FOUNDATION 48-1179872 Page 2

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	tion A. Public Support	<del></del>					
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")	13,105.	53,293.	17,408.	111,081.	168,393.	363,280.
2	Tax revenues levied for the organ-						
	ization'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		l		:		
4	Total. Add lines 1 through 3	13,105.	53,293.	17,408.	111,081.	168,393.	363,280.
	The portion of total contributions						, , ,
_	by each person (other than a		Ì				
	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						363,280.
	ction B. Total Support	I			L	I	303,200.
	ndar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Amounts from line 4	13,105.	53,293.	17,408.	111,081.	168,393.	363,280.
8	Gross income from interest,	2072001	33,233.	2772000	111/0010	200,000	000/2001
Ŭ	dividends, payments received on						
	securities loans, rents, royalties	ļ				ļ	
	and income from similar sources	6,142.	8,815.	4,147.	27,661.	646.	47,411.
_		0,142.	0,013.	4,14/.	27,001.	040.	2/,314.
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)						410 601
	Total support. Add lines 7 through 10	L	L	l <u></u>	L	<u> </u>	410,691.
12	•	•	•			12	70,211.
13	First five years, If the Form 990 is fo	•	s tirst, second, thir	d, fourth, or fifth to	ax year as a section	on 501(c)(3)	
50	organization, check this box and stoction C. Computation of Pub	p here lic Support Pe	rcentage	····			
	·····						99 16 %
	Public support percentage for 2010 (	• • • • • • • • • • • • • • • • • • • •	•	column (t))		14	88.46 %
	Public support percentage from 2009			1 40	44 - 00 4 (00)	15	81.15 %
168	a 33 1/3% support test - 2010.If the c	•			14 IS 33 1/3% OF II	nore, check this bo	
	stop here. The organization qualifies	, , , ,	•		45		<b>▶ X</b>
t	o 33 1/3% support test - 2009. If the c	-			line 15 is 33 1/3%	or more, cneck to	nis box
_	and stop here. The organization qua				46.46	.,, .,	
178	10% -facts-and-circumstances tes	•					
	and if the organization meets the "fa			•		irt IV how the orga	nization
	meets the "facts-and-circumstances"	-	•		-		▶∟_
ŀ	o 10% -facts-and-circumstances tes	_					
	more, and if the organization meets t						e
	organization meets the "facts-and-cir				_		
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17			
					Sch	edule A (Form 99)	0 or 990-EZ) 2010

032022 12-21-10

## Schedule A (Form 990 or 990-EZ) 2010 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 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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
-	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-		<b>1</b>			<del>                                     </del>	<del> </del>
•	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities		<del> </del>	-	<del>                                     </del>		
3	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			_			
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	: Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
	ction B. Total Support	7.0					
Cale	ndar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
11	Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is						
12	regularly carried on Other income. Do not include gain or loss from the sale of capital						-
12	assets (Explain in Part IV)	<del></del>	<del> </del>	<del> </del>	<del> </del>	<del></del>	
	Total support (Add lines 9, 10c, 11, and 12)	the organization	'e firet econd the	rd fourth or 665	tov voor co o occ*:	on 501/c\/3\ c==	anization
14	First five years. If the Form 990 is for	ule organization	s iirst, second, thi	ru, iourtri, or timh i	iax year as a secti	on son(c)(s) orga	zi iizatioi i,
<u>~</u>	check this box and stop here	o Support D	arcontage		<del></del>		
	ction C. Computation of Publi					145	
	Public support percentage for 2010 (li	• •	•	column (f))		15	9
16	<del></del>			<del> </del>		16	9
_	ction D. Computation of Inves		<u>_</u>			T.= 1	
17	Investment income percentage for 20		· · ·	ine 13, column (f))		17	<del>9</del>
18	, ,					18	9
19	a 33 1/3% support tests - 2010. If the	-					ne 17 is not
	more than 33 1/3%, check this box ar	*	•	, ,	• • •		▶∟
- 1	b 33 1/3% support tests - 2009. If the	_					. —
	line 18 is not more than 33 1/3%, che			•	•	· ·	ion
<u>20</u>	Private foundation. If the organization	n did not check a	a box on line 14, 19	9a, or 19b, check '	this box and see it	nstructions	
0330	123 12-21-10				Sc	hedule A (Form	990 or 990-EZ) 201

### SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Open to Public Inspection

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A.

ame of organization			<u> </u>	Employ	yer identificati	on number
LA	WRENCE PUBLIC LI	BRARY FOUNDATION	N		48-1179	872
Part I-A Complete in	f the organization is exe	mpt under section 501(c	c) or is a section 5	27 org	ganization.	
1 Provide a description of t	the organization's direct and ind	irect political campaign activitie	s in Part IV			
2 Political expenditures				<b>&gt;</b> \$ _		<u>3,557</u>
3 Volunteer hours				_		
Part I-B Complete i	f the organization is exe	mpt under section 501(c	c)(3).		<del></del>	
	excise tax incurred by the organ			▶\$_		0
2 Enter the amount of any	excise tax incurred by organizat	ion managers under section 49	55	▶\$_		0
3 If the organization incurre	ed a section 4955 tax, did it file l	Form 4720 for this year?			Yes	No
4a Was a correction made?					Yes	No
b If "Yes," describe in Part	IV.		<del> </del>	<del></del>	1/01	
Part I-C Complete	f the organization is exe	mpt under section 501(	c), except section	501(c	(3).	
•	y expended by the filing organiza	•		<b>▶</b> \$_		
	filing organization's funds contri	outed to other organizations for	section 527			
exempt function activitie				▶ \$ _		
<ol><li>Total exempt function ex</li></ol>		inter here and an Earm 1120 D/	<b>~</b> I			
•	penditures Add lines 1 and 2 E	inter here and on Form 1120-PC	JL,			
line 17b	•		JL,	▶\$_		<del></del>
line 17b  4 Did the filing organization	n file Form 1120-POL for this ye	ar?			└── Yes	□ No
line 17b  4 Did the filing organization  5 Enter the names, addres	n file Form 1120-POL for this ye ses and employer identification	ar? number (EIN) of all section 527	political organizations to	o which	Yes the filing organ	nization
line 17b  4 Did the filing organization  5 Enter the names, address made payments For each	n file Form 1120-POL for this ye ses and employer identification th organization listed, enter the a	ar? number (EIN) of all section 527 amount paid from the filing orga	political organizations to inization's funds. Also e	o which nter the	Yes  the filing organ  amount of poli	nization itical
<ul> <li>line 17b</li> <li>Did the filing organization</li> <li>Enter the names, address made payments. For each contributions received the</li> </ul>	n file Form 1120-POL for this ye ses and employer identification th organization listed, enter the a nat were promptly and directly d	ar? number (EIN) of all section 527 amount paid from the filing orga elivered to a separate political c	political organizations t inization's funds Also e organization, such as a s	o which nter the	Yes  the filing organ  amount of poli	nization itical
<ul> <li>line 17b</li> <li>Did the filing organization</li> <li>Enter the names, address made payments. For each contributions received the political action committee.</li> </ul>	n file Form 1120-POL for this yeses and employer identification the organization listed, enter the anat were promptly and directly die (PAC) If additional space is ne	ar? number (EIN) of all section 527 amount paid from the filing orga elivered to a separate political of seeded, provide information in Pa	political organizations to inization's funds. Also e organization, such as a start IV	o which nter the separate	Yes  the filing organ amount of police segregated fu	nization itical ind or a
<ul> <li>line 17b</li> <li>Did the filing organization</li> <li>Enter the names, address made payments. For each contributions received the</li> </ul>	n file Form 1120-POL for this ye ses and employer identification th organization listed, enter the a nat were promptly and directly d	ar? number (EIN) of all section 527 amount paid from the filing orga elivered to a separate political of seeded, provide information in Pa	political organizations to inization's funds. Also e organization, such as a sart IV	o which nter the separate	Yes the filing organ amount of police segregated fu  (e) Amount of	nization itical and or a
<ul> <li>line 17b</li> <li>Did the filing organization</li> <li>Enter the names, address made payments. For each contributions received the political action committee.</li> </ul>	n file Form 1120-POL for this yeses and employer identification the organization listed, enter the anat were promptly and directly die (PAC) If additional space is ne	ar? number (EIN) of all section 527 amount paid from the filing orga elivered to a separate political of seeded, provide information in Pa	political organizations to inization's funds. Also e organization, such as a start IV	o which nter the separate	Yes  the filing organ amount of police segregated fu	nization itical and or a of political eccived and
<ul> <li>line 17b</li> <li>Did the filing organization</li> <li>Enter the names, address made payments. For each contributions received the political action committee.</li> </ul>	n file Form 1120-POL for this yeses and employer identification the organization listed, enter the anat were promptly and directly die (PAC) If additional space is ne	ar? number (EIN) of all section 527 amount paid from the filing orga elivered to a separate political of seeded, provide information in Pa	political organizations to inization's funds. Also e organization, such as a sart IV  (d) Amount paid filing organization.	o which nter the separate	Yes  a the filing organ  a amount of police  e segregated fu  (e) Amount of  contributions re  promptly and  delivered to a	nization itical ind or a of political eccived and directly a separate
<ul> <li>line 17b</li> <li>Did the filing organization</li> <li>Enter the names, address made payments. For each contributions received the political action committee.</li> </ul>	n file Form 1120-POL for this yes ses and employer identification the organization listed, enter the anat were promptly and directly de (PAC) If additional space is not become the space of the control	ar? number (EIN) of all section 527 amount paid from the filing orga elivered to a separate political of seeded, provide information in Pa	political organizations to inization's funds. Also e organization, such as a sart IV  (d) Amount paid filing organization.	o which nter the separate	Yes  a the filing organ  a amount of police segregated fu  (e) Amount of contributions repromptly and delivered to a political organ	of political acceived and directly a separate anization
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<ul> <li>line 17b</li> <li>Did the filing organization</li> <li>Enter the names, address made payments. For each contributions received the political action committee.</li> </ul>	n file Form 1120-POL for this yes ses and employer identification the organization listed, enter the anat were promptly and directly de (PAC) If additional space is not become the space of the control	ar? number (EIN) of all section 527 amount paid from the filing orga elivered to a separate political of seeded, provide information in Pa	political organizations to inization's funds. Also e organization, such as a sart IV  (d) Amount paid filing organization.	o which nter the separate	Yes  a the filing organ  a amount of police segregated fu  (e) Amount of contributions repromptly and delivered to a political organ	of political acceived and directly a separate anization
<ul> <li>line 17b</li> <li>Did the filing organization</li> <li>Enter the names, address made payments. For each contributions received the political action committee.</li> </ul>	n file Form 1120-POL for this yes ses and employer identification the organization listed, enter the anat were promptly and directly de (PAC) If additional space is not become the space of the control	ar? number (EIN) of all section 527 amount paid from the filing orga elivered to a separate political of seeded, provide information in Pa	political organizations to inization's funds. Also e organization, such as a sart IV  (d) Amount paid filing organization.	o which nter the separate	Yes  a the filing organ  a amount of police segregated fu  (e) Amount of contributions repromptly and delivered to a political organ	of political acceived and directly a separate anization
<ul> <li>line 17b</li> <li>Did the filing organization</li> <li>Enter the names, address made payments. For each contributions received the political action committee.</li> </ul>	n file Form 1120-POL for this yes ses and employer identification the organization listed, enter the anat were promptly and directly de (PAC) If additional space is not become the space of the control	ar? number (EIN) of all section 527 amount paid from the filing orga elivered to a separate political of seeded, provide information in Pa	political organizations to inization's funds. Also e organization, such as a sart IV  (d) Amount paid filing organization.	o which nter the separate	Yes  a the filing organ  a amount of police segregated fu  (e) Amount of contributions repromptly and delivered to a political organ	of political acceived and directly a separate anization
<ul> <li>line 17b</li> <li>Did the filing organization</li> <li>Enter the names, address made payments. For each contributions received the political action committee.</li> </ul>	n file Form 1120-POL for this yes ses and employer identification the organization listed, enter the anat were promptly and directly de (PAC) If additional space is not become the space of the control	ar? number (EIN) of all section 527 amount paid from the filing orga elivered to a separate political of seeded, provide information in Pa	political organizations to inization's funds. Also e organization, such as a sart IV  (d) Amount paid filing organization.	o which nter the separate	Yes  a the filing organ  a amount of police segregated fu  (e) Amount of contributions repromptly and delivered to a political organ	of political acceived and directly a separate anization
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<ul> <li>line 17b</li> <li>Did the filing organization</li> <li>Enter the names, address made payments. For each contributions received the political action committee.</li> </ul>	n file Form 1120-POL for this yes ses and employer identification the organization listed, enter the anat were promptly and directly de (PAC) If additional space is not become the space of the control	ar? number (EIN) of all section 527 amount paid from the filing orga elivered to a separate political of seeded, provide information in Pa	political organizations to inization's funds. Also e organization, such as a sart IV  (d) Amount paid filing organization.	o which nter the separate	Yes  a the filing organ  a amount of police segregated fu  (e) Amount of contributions repromptly and delivered to a political organ	of political acceived and directly a separate anization
<ul> <li>line 17b</li> <li>Did the filing organization</li> <li>Enter the names, address made payments. For each contributions received the political action committee.</li> </ul>	n file Form 1120-POL for this yes ses and employer identification the organization listed, enter the anat were promptly and directly de (PAC) If additional space is not become the space of the control	ar? number (EIN) of all section 527 amount paid from the filing orga elivered to a separate political of seeded, provide information in Pa	political organizations to inization's funds. Also e organization, such as a sart IV  (d) Amount paid filing organization.	o which nter the separate	Yes  a the filing organ  a amount of police segregated fu  (e) Amount of contributions repromptly and delivered to a political organ	of political acceived and directly a separate anization
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<ul> <li>line 17b</li> <li>Did the filing organization</li> <li>Enter the names, address made payments. For each contributions received the political action committee.</li> </ul>	n file Form 1120-POL for this yeses and employer identification the organization listed, enter the anat were promptly and directly die (PAC) If additional space is ne	ar? number (EIN) of all section 527 amount paid from the filing orga elivered to a separate political of seeded, provide information in Pa	political organizations to inization's funds. Also e organization, such as a sart IV  (d) Amount paid filing organization.	o which nter the separate	Yes  a the filing organ  a amount of police segregated fu  (e) Amount of contributions repromptly and delivered to a political organ	of political acceived and directly a separate anization
<ul> <li>line 17b</li> <li>Did the filing organization</li> <li>Enter the names, address made payments. For each contributions received the political action committee.</li> </ul>	n file Form 1120-POL for this yeses and employer identification the organization listed, enter the anat were promptly and directly die (PAC) If additional space is ne	ar? number (EIN) of all section 527 amount paid from the filing orga elivered to a separate political of seeded, provide information in Pa	political organizations to inization's funds. Also e organization, such as a sart IV  (d) Amount paid filing organization.	o which nter the separate	Yes  a the filing organ  a amount of police segregated fu  (e) Amount of contributions repromptly and delivered to a political organ	of political acceived and directly a separate anization
<ul> <li>line 17b</li> <li>Did the filing organization</li> <li>Enter the names, address made payments. For each contributions received the political action committee.</li> </ul>	n file Form 1120-POL for this yeses and employer identification the organization listed, enter the anat were promptly and directly die (PAC) If additional space is ne	ar? number (EIN) of all section 527 amount paid from the filing orga elivered to a separate political of seeded, provide information in Pa	political organizations to inization's funds. Also e organization, such as a sart IV  (d) Amount paid filing organization.	o which nter the separate	Yes  a the filing organ  a amount of police segregated fu  (e) Amount of contributions repromptly and delivered to a political organ	of political acceived and directly a separate anization
line 17b  4 Did the filing organization  5 Enter the names, addres made payments For eac contributions received the political action committee  (a) Name	n file Form 1120-POL for this yeses and employer identification the organization listed, enter the anat were promptly and directly die (PAC) If additional space is ne	number (EIN) of all section 527 amount paid from the filing orga elivered to a separate political o eeded, provide information in Pa ss (c) EIN	political organizations to inization's funds. Also e organization, such as a sart IV  (d) Amount paid filing organization funds. If none, ent	o which nter the separate from on's ter -0	Yes  a the filing organ  a amount of police segregated fu  (e) Amount of contributions repromptly and delivered to a political organ	nization itical and or a of political eccived and directly a separate anization inter -0

032041 02-02-11

LHA

Schedule C (Form 990 or 990-EZ) 2010 L.Z	WRENCE P	UBLIC LIBRA	RY FOUNDATION	N 48-1	179872 Page 2
Part II-A   Complete if the organiz		mpt under section	n 501(c)(3) and file	ed Form 5768	
(election under section	<del></del> _				
A Check I if the filing organization to		-			
B Check Lifthe filing organization of	checked box A a	nd "limited control" pro	visions apply		<del></del>
Limits on	Lobbying Expe	nditures		(a) Filing organization's	(b) Affiliated group totals
(The term "expenditure	es" means amoi	unts paid or incurred.)		totals	totais
* ************************************	- I-1	/		2 557	
1a Total lobbying expenditures to influence	•		-	3,557.	<del></del>
b Total lobbying expenditures to influence	•	ay (airect lobbying)	-	2 557	
c Total lobbying expenditures (add lines	ia and ib)		}	3,557.	
<ul> <li>d Other exempt purpose expenditures</li> <li>e Total exempt purpose expenditures (ad</li> </ul>	d lines to and t	<b>~</b> Λ	-	82,134.	
f Lobbying nontaxable amount Enter the		•	- actumna	85,691. 17,138.	
				17,130.	
If the amount on line 1e, column (a) or (b) Not over \$500,000		bying nontaxable amount on line 1e.	ount is:		
Over \$500,000 but not over \$1,000,000		00 plus 15% of the exce	055 0V0r \$500 000		
Over \$1,000,000 but not over \$1,500,00		00 plus 10% of the exce			
Over \$1,500,000 but not over \$17,000,0		00 plus 5% of the exce			
Over \$17,000,000	\$1,000		ss over \$1,500,000		
0401 417,000,000	1 41,000	,000.			
g Grassroots nontaxable amount (enter 2	25% of line 1f)			4,285.	
h Subtract line 1g from line 1a If zero or l	•			0.	<del></del>
i Subtract line 1f from line 1c If zero or le			Į	0.	
j If there is an amount other than zero or	•	line 1i, did the organiza	ation file Form 4720	<del></del>	l
reporting section 4911 tax for this year		mic ii, die iiie digaii		ſ	Yes N
	ns that made a	eraging Period Under section 501(h) election ne instructions for line	do not have to comp		
	Lobbying Expe	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying nontaxable amount				17,138.	17,138
b Lobbying ceiling amount					
(150% of line 2a, column(e))					25,707
c Total lobbying expenditures				3,557.	3,557
d Grassroots nontaxable amount				4,285.	4,285
e Grassroots ceiling amount (150% of line 2d, column (e))					6,428
6 Creamanta labbuma auramiditura				3 557	3 557

Schedule C (Form 990 or 990-EZ) 2010

Schedule C (Form 990 or 990 EZ) 2010 LAWRENCE PUBLIC LIBRARY FOUNDATION 48-1179872 Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		(a)			(b)	
		Yes	No	0	Am	ount
1 Dur	ring the year, did the filing organization attempt to influence foreign, national, state or	<u> </u>	1			
loca	al legislation, including any attempt to influence public opinion on a legislative matter			- 1		
	eferendum, through the use of					
a Vol	unteers?					
b Pai	d staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c Me	dia advertisements?					
d Mai	ilings to members, legislators, or the public?					
e Put	plications, or published or broadcast statements?					
f Gra	ints to other organizations for lobbying purposes?					
g Dire	ect contact with legislators, their staffs, government officials, or a legislative body?			Ī		
-	lies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		1			
	ner activities? If "Yes," describe in Part IV					
	al. Add lines 1c through 1i		1			
2a Did	the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
	Yes," enter the amount of any tax incurred under section 4912					
	Yes," enter the amount of any tax incurred by organization managers under section 4912		1	ļ		
	ne filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		1			
art III		on 501(c	)(5), c	r se	ction	
	501(c)(6).	•-	,, ,, ,			
					Yes	No
ı We	ere substantially all (90% or more) dues received nondeductible by members?		Γ	1		<del>                                     </del>
	re substantially all (90% or more) dues received nondeductible by members?  I the organization make only in-house lobbying expenditures of \$2,000 or less?					
2 Did	the organization make only in-house lobbying expenditures of \$2,000 or less?  the organization agree to carryover lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 2 are answ	_		2 3 or se	ction	
2 Did 3 Did Part III	the organization make only in-house lobbying expenditures of \$2,000 or less?  the organization agree to carryover lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes."	_		2 3 or se is ar	ction	
2 Did 3 Did Part III	the organization make only in-house lobbying expenditures of \$2,000 or less?  I the organization agree to carryover lobbying and political expenditures from the prior year?  I-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Party "Yes."  I the organization make only in-house lobbying expenditures of \$2,000 or less?  I the organization make only in-house lobbying expenditures of \$2,000 or less?  I the organization agree to carryover lobbying and political expenditures from the prior year?  I the organization make only in-house lobbying expenditures of \$2,000 or less?  I the organization agree to carryover lobbying and political expenditures from the prior year?  I the organization agree to carryover lobbying and political expenditures from the prior year?  I the organization agree to carryover lobbying and political expenditures from the prior year?  I the organization agree to carryover lobbying and political expenditures from the prior year?  I the organization agree to carryover lobbying and political expenditures from the prior year?	rt III-A, I		2 3 or se	ction	
2 Did 3 Did art III	the organization make only in-house lobbying expenditures of \$2,000 or less?  The organization agree to carryover lobbying and political expenditures from the prior year?  The Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Partyes."  The estimates and similar amounts from members contained and political expenditures (do not include amounts of political expenditures).	rt III-A, I		2 3 or se is ar	ction	
2 Did 3 Did art III 1 Dud 2 Sec	the organization make only in-house lobbying expenditures of \$2,000 or less?  I the organization agree to carryover lobbying and political expenditures from the prior year?  I the organization agree to carryover lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Partyes."  The estion 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	rt III-A, I		2 3 or se is ar	ction	
2 Did 3 Did art III 1 Dud 2 Sec exp a Cui	the organization make only in-house lobbying expenditures of \$2,000 or less?  I the organization agree to carryover lobbying and political expenditures from the prior year?  I the organization agree to carryover lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Partyes."  The expenditures are answered in the prior year?  The organization agree to carryover lobbying 1 and 2 are answered in the prior year?  The organization agree to carryover lobbying and 2 are answered in the prior year?  The organization agree to carryover lobbying and 2 are answered in the prior year?  The organization agree to carryover lobbying and 2 are answered in the prior year?  The organization agree to carryover lobbying and 2 are answered in the prior year?  The organization agree to carryover lobbying and 2 are answered in the prior year?  The organization agree to carryover lobbying and 2 are answered in the prior year?  The organization agree to carryover lobbying and 2 are answered in the prior year?  The organization agree to carryover lobbying and 2 are answered in the prior year?  The organization agree to carryover lobbying and 2 are answered in the prior year?  The organization agree to carryover lobbying and 2 are answered in the prior year?  The organization agree to carryover lobbying and 2 are answered in the prior year?  The organization agree to carryover lobbying and 2 are answered in the prior year?  The organization agree to carryover lobbying and 2 are answered in the prior year?  The organization agree to carryover lobbying and 2 are answered in the prior year?  The organization agree to carryover lobbying and 2 are answered in the prior year?  The organization agree to carryover lobbying and 2 are answered in the prior year?  The organization agree to carryover lobbying and 2 are answered in the prior year?  The organization agree to carryover lobbying and 2 are answer	rt III-A, I		2 3 or se is ar	ction	
Did Did art III	the organization make only in-house lobbying expenditures of \$2,000 or less?  I the organization agree to carryover lobbying and political expenditures from the prior year?  I-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Partyes."  The est of the section 100 or include amounts of political expenditures (do not include amounts of political expenditures for which the section 527(f) tax was paid).  The organization make only in-house lobbying and political expenditures (do not include amounts of political expenditures from the section 527(f) tax was paid).  The organization make only in-house lobbying and political expenditures (do not include amounts of political expenditures from the prior year?	rt III-A, I		2 3 or se is ar 1 2a 2b	ction	
Did Did art III Dud Sec exp a Cul b Cal	the organization make only in-house lobbying expenditures of \$2,000 or less?  I the organization agree to carryover lobbying and political expenditures from the prior year?  I the organization agree to carryover lobbying and political expenditures from the prior year?  Solicited if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Partyes."  The estimate of the organization is exempt under section 501(c)(4), section 162(e) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Partyes."  The estimate of the organization is exempt under section 501(c)(4), section 162(e) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Partyes."  The estimate of the organization is exempt under section 501(c)(4), section 501(c)(4), section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Partyes."  The estimate of the organization is exempt under section 501(c)(4), section 501(c)	rt III-A, I		2 3 or se is ar 1 2a 2b 2c	ction	
2 Did 3 Did 2 Sec exp a Cul b Cal c Tot 3 Ag	the organization make only in-house lobbying expenditures of \$2,000 or less?  Ithe organization agree to carryover lobbying and political expenditures from the prior year?  In Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes."  In es, assessments and similar amounts from members cution 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures for which the section 527(f) tax was paid).  In the organization agree to carryover from last year tryover from last year greater amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	rt III-A, I		2 3 or se is ar 1 2a 2b	ction	
2 Did 3 Did 4 art III 1 Dud 2 Sec exp a Cui b Cai c Tot 3 Agg 4 If n	the organization make only in-house lobbying expenditures of \$2,000 or less?  I the organization agree to carryover lobbying and political expenditures from the prior year?  I-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Partyes."  The est of the section 527(f) the expenditures (do not include amounts of political expenditures for which the section 527(f) tax was paid).  The expenditures from last year reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditures was partial to the expenditures of the amount on line 3, what portion of the expenditures were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditures was paid to the expenditures of the amount on line 3.	cess		2 3 or se is ar 1 2a 2b 2c	ction	
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032043 02-02-11

## SCHEDULE G

(Form 990 or 990-EZ)

## **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047

Open To Public

Name of the organization

Department of the Treasury

Internal Revenue Service

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

Employer identification number

	PUBLIC LIBRARY				48-1179	
Part I Fundraising Activities. required to complete this part.	Complete if the organization ansv	vered "Y	'es" to	Form 990, Part IV, I	ine 17 Form 990-EZ	filers are not
1 Indicate whether the organization raise a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written or key employees listed in Form 990, Pail b If "Yes," list the ten highest paid indivicompensated at least \$5,000 by the organization have a written or key employees listed in Form 990, Pail b If "Yes," list the ten highest paid indivicompensated at least \$5,000 by the organization have a written or key employees listed in Form 990, Pail b If "Yes," list the ten highest paid individual to the property of the propert	e Solicità f Solicità g X Specia  oral agreement with any individua rt VII) or entity in connection with iduals or entities (fundraisers) pur	ation of ation of al fundra al (includ profess	non-ga gover using a ding of ional f	overnment grants nment grants events fficers, directors, true undraising services?	stees or Yes	<del></del>
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have con contrib	ustody	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
		-				
	·	<del> </del>				
		<del> </del>				
		-				
		-				
			:			
	<del></del>	1	l			
Total  3 List all states in which the organization or licensing.	ı ıs registered or licensed to solici	t contrib	outions	s or has been notified	d it is exempt from r	egistration
		_				
			<del>-</del>		<del></del>	
		<del></del>		<del></del>		
LHA Paperwork Reduction Act Notice, s	ee the Instructions for Form 99	0 or 990	)-EZ.		Schedule G (For	m 990 or 990-EZ) 2010

032081 01-13-11

		<u>1179872</u>	Page 3
11 Do	pes the organization operate gaming activities with nonmembers?	Yes	☐ No
12 Is	the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed		
to	administer charitable gaming?	. ☐ Yes	☐ No
13 Inc	dicate the percentage of gaming activity operated in:	1 1	
a Th	e organization's facility	13a	%
<b>b</b> An	outside facility	13b	%
14 En	nter the name and address of the person who prepares the organization's gaming/special events books and records		
Na	ame		
Ac	ddress ►		
<b>15a</b> Do	pes the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	□ No
	"Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
	gaming revenue retained by the third party  \$  "Yes," enter name and address of the third party:		
Ac	ddress -		
16 Ga	aming manager information.		
Na	ame		
Ga	aming manager compensation > \$		
_			
De	escription of services provided		<del></del>
_			·
١	Director/officer Employee Independent contractor		
17 M	andatory distributions:		
	the organization required under state law to make charitable distributions from the gaming proceeds to		
re	tain the state gaming license?	Yes	☐ No
b Er	nter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
	rganization's own exempt activities during the tax year ▶ \$		
Part	Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (i	i) and (v), and	Part III,
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information	n (see instru	ctions)
		·-	
			·
	· · · · · · · · · · · · · · · · · · ·		
	Schodulo C (For		. 57) 2242

#### **SCHEDULE 0**

(Form 990 or 990-EZ)

Department of the Treasury

## Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Name of the organization

LAWRENCE PUBLIC LIBRARY FOUNDATION

Employer identification number 48-1179872

FORM 990-EZ, PART I, LINE 8, OTHER REVENUE:	
DESCRIPTION OF OTHER REVENUE:	AMOUNT:
INVESTMENT INCOME	646.
FORM 990-EZ, PART I, LINE 10, GRANTS AND ALLOCATIONS:	
ACTIVITY CLASSIFICATION:	
GRANTEE NAME: LAWRENCE ROTARY CLUB	
GRANTEE ADDRESS: 200 MCDONALD DRIVE LAWRENCE, KS 66044	
GRANTEE RELATIONSHIP: NONE	
PROPERTY DESCRIPTION: CASH	
DATE OF GIFT: 07/16/10	
AMOUNT GIVEN:	25.
ACTIVITY CLASSIFICATION:	
GRANTEE NAME: LAWRENCE PUBLIC LIBRARY	
GRANTEE ADDRESS: 707 VERMONT ST LAWRENCE, KS 66044	
GRANTEE RELATIONSHIP: NONE	
PROPERTY DESCRIPTION: CASH	
DATE OF GIFT: 12/28/10	
AMOUNT GIVEN:	110.
TOTAL INCLUDED ON FORM 990-EZ, LINE 10	135.
FORM 990-EZ, PART I, LINE 16, OTHER EXPENSES:	
DESCRIPTION OF OTHER EXPENSES:	AMOUNT:
PROGRAM EXPENSE	39,787.
	e O (Form 990 or 990-EZ) (2010)

#### SCHEDULE O

(Form 990 or 990-EZ)
Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Name of the organization

AWRENCE PUBLIC LIBRARY FOUNDATION Employer identification number 48-1179872

LAWRENCE PUBLIC LIBRARY FOUNDATION	48-1179872			
REIMBURSEMENT OF PAYROLL EXPENSES	23,920.			
LICENSES AND PERMITS	40.			
SUPPLIES	809.			
MISCELLANEOUS	527.			
CONTRACT SERVICES	6,875.			
ADVERTISING	945.			
POSTAGE AND DELIVERY	731.			
PRINTING AND REPRODUCTION	411.			
DUES AND SUBSCRIPTIONS	481.			
TRAVEL	516.			
LOBBYING EXPENSE	3,557.			
TOTAL TO FORM 990-EZ, LINE 16	78,599.			
FORM 990-EZ, PART III, PRIMARY EXEMPT PURPOSE - PROVIDING FUNDS TO THE CITY OF LAWRENCE KANSAS PUBLIC LIBRARY TO ENHANCE THE LIBRARY COLLECTION.  FORM 990-EZ, PART V, INFORMATION REGARDING PERSONAL BENEFIT CONTRACTS: THE ORGANIZATION DID NOT, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY, OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT.  THE ORGANIZATION, DID NOT, DURING THE YEAR, PAY ANY PREMIUMS, DIRECTLY, OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT.				

### Form **8868**

(Rev January 2011)

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

-	are filing for an Automatic 3-Month Extension, comple	-			<b>&gt;</b>	$\mathbf{x}$
	are filing for an Additional (Not Automatic) 3-Month Ex					
	omplete Part II unless you have already been granted a					
	ic filing (e-file). You can electronically file Form 8868 if y					
	to file Form 990-T), or an additional (not automatic) 3-mo					
of time to	ofile any of the forms listed in Part I or Part II with the exi	ception of	Form 8870, Information Return for Trans	sfers A	Associated With Cer	taın
Personal	Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions) For more details on ti	ne elec	tronic filing of this fo	orm,
visit www	v.irs gov/efile and click on e-file for Charities & Nonprofits					
Part I	Automatic 3-Month Extension of Time	• Only su	bmit original (no copies needed).			
A corpor	ation required to file Form 990-T and requesting an autor	matic 6-mc	onth extension - check this box and com	plete		
Part I on	ly				•	
All other	corporations (including 1120-C filers), partnerships, REM	IICs, and t	rusts must use Form 7004 to request ar	exten	sion of time	
	ome tax returns.					
Type or	Name of exempt organization			Empl	oyer identification	number
print				Z. p.o., o. r.o. r.o. r.o. r.o.		
•	LAWRENCE PUBLIC LIBRARY FO	UNDAT	ION	48-1179872		
File by the due date for	Number street and seem as suite as 16 - D.O. have				<del> </del>	
filing your	707 VERMONT STREET					
return See instructions		oreign add	Iress, see instructions			
	LAWRENCE, KS 66044					
Enter the	Return code for the return that this application is for (file	e a senara	te application for each return)			0 3
2,110, 11,1	the application to the following the application to the	o a oopala	application for cash retain,			رفاعا
Applicat	ion	Return	Application			Return
	1011		1 ''			
Is For Form 99	<u> </u>	01	Is For			
			Form 990-T (corporation)			08
	orm 990-BL 02 Form 1041-A				<del></del>	<del></del>
	990-EZ 03 Form 4720				09	
	m 990-PF 04 Form 5227				<del></del>	10
	rm 990-T (sec 401(a) or 408(a) trust) 05 Form 6069				11	
Form 99	0-T (trust other than above)	06	Form 8870			12
	DENISE BERKLEY	* ****	NOT 70 CC044			
	ooks are in the care of $\triangleright$ 707 VERMONT - 3	LAWKE.				
	hone No ► <u>(785)</u> 843-3833		FAX No 🕨			
	organization does not have an office or place of busines			_		
	is for a Group Return, enter the organization's four digit					
box 🕨	If it is for part of the group, check this box		ach a list with the names and EINs of all		<u>ers the extension is</u>	for
1 in	equest an automatic 3-month (6 months for a corporation		·			
_		ot organiza	ition return for the organization named a	above	The extension	
	for the organization's return for.					
	X calendar year $2010$ or					
<b>&gt;</b>	tax year beginning	, ar	nd ending		<u> </u>	
2 lf 1	the tax year entered in line 1 is for less than 12 months, o	check reas	son: Initial return Fin	al retur	n	
L	Change in accounting period					
3a If 1	his application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any			
ng	nrefundable credits. See instructions.			3a	\$	0.
b If	this application is for Form 990-PF, 990-T, 4720, or 6069,	, enter any	refundable credits and			
es	timated tax payments made. Include any prior year over	payment a	illowed as a credit.	3b	\$	0.
	alance due, Subtract line 3b from line 3a. Include your pa					
	using EFTPS (Electronic Federal Tax Payment System).	-	· ·	3c	\$	0.
	. If you are going to make an electronic fund withdrawal				EO for payment inst	
	For Paperwork Reduction Act Notice, see Instruction				Form <b>8868</b> (R	
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# Lawrence Public Library Foundation Board of Directors

Board of Directors	Class of
Mary Kate Ambler 1600 Inverness Drive Lawrence KS 66047 785-842-9973 daalawrence@sunflower.com	2013
Chuck Blaser 4404 Heritage Drive Lawrence KS 66047 785-843-8776 (home) cblaser@sunflower.com	2013
Marsha Buhler (Vice Chair) 1000 Sunset Lawrence KS 66044 785-841-0481 (home) randomtas@sunflower.com	2013
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Margie Coggins (Secretary) 625 Sunnyside Avenue Lawrence KS 66044 785-842-2900 mcoggins@usd497.org	2012
Laura Denneler 1583 N 1100 Road Lawrence KS 66046 785-749-3842 (home) lauraden@hotmail.com	2012
Linda Elwell 1648 Crescent Road Lawrence KS 66044 785-856-1257 Idelwell@sunflower.com	2012
Jill Fincher (Treasurer) 1700 Inverness Drive Lawrence, KS 66047 785-865-5870 (home) 785-865-2694 (fax) jfincher@sunflower.com	2011

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Thomas E. Howe (Chair) 1582 N. 1500 Rd. Lawrence, KS 66046 785-841-6271 (home) Thomas@TEHowe.com

2012

2012

Bill Lienhard (Investment Committee Chair) 1320 Lawrence Avenue Lawrence KS 66049 785-842-4242 billienhard@aol.com

2013

Katie Lord 4209 Goldfield Street Lawrence KS 66049 785-550-4763 kwlord@gmail.com

Diane Low (Friends representative) 2011

317 Boulder Street Lawrence KS 66049 785-841-4897 (home) d2low@sunflower.com

Mike Machell (Trustees representative) 2011

1105 Crestline Drive Lawrence KS 66049 785-841-6376 (home) 913-904-5523 (work)

madmachell@sunflower.com

Michael.machell@ingenix.com

2011 Gail Vick

4704 Cherry Hills Court Lawrence KS 66044 785-865-1638 (home) gvick@sunflower.com

Kathleen Morgan **Foundation Development Director** PO Box 973 Lawrence KS 66044 785-843-3833 x131 (Library) 785-842-6268 (Home) 785-766-5875 (Cell)

As of December 31, 2010

### Lawrence Public Library Foundation Advisory Board

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