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Department of the Treasury

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)

OMB No 1545-0047 2011 Open to Public

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Inspection Internal Revenue Service For the 2011 calendar year, or tax year beginning and ending C Name of organization Employer identification number Check if applicable MANHATTAN LIBRARY FOUNDATION, INC Address change Doing Business As 48-1124869 Name change Number and street (or P O box if mail is not delivered to street address) Room/suite Telephone number Initial return 629 POYNTZ AVENUE 785-776-4741 Terminated City or town, state or country, and ZIP + 4 66502 KS MANHATTAN 103,514 Amended return G Gross receipts \$ Name and address of principal officer Application pending H(a) Is this a group return for affiliates? ROBERT N HAINES 226 FORDHAM ROAD H(b) Are all affiliates included? 66503 If "No," attach a list (see instructions) MANHATTAN X 501(c)(3) Tax-exempt status Website. H(c) Group exemption number Form of organization | X | Corporation Trust Association Other > Year of formation M State of legal domicile Part I Summary 1 Briefly describe the organization's mission or most significant activities ASSISTANCE AND SUPPORT TO MANHATTAN PUBLIC LIBRARY Activities & Governance 2 Check this box ▶ If the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 6 Total number of volunteers (estimate if necessary) 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 Prior Year **Current Year** 895 425 8 Contributions and grants (Part VIII, line 1h) 70. 9 Program service revenue (Part VIII, line 2g) 659 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 44. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 58 554 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part-IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 747 30. 18 Total expenses Addilines 13-17 (must equal Part IX, column (A), line 25) 30,747 19 Revenue less expenses Subtract line 18 from line 12 27.807 99 489 **Beginning of Current Year** End of Year 20 Total assets (Rart X, line_16) 473 666 547 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances Subtract line 21 from line 20 547 Signature Block 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 offiger) is based on all information of which preparer has any knowledge Signature of officer Sign ROBERT N HAINES PRESIDENT Here Type or print name and title Print/Type preparer's name Date of HMills Paid self-employed 02/20/12 JOSEPH H. MILLS Preparer Firm's EIN Firm's name **Use Only** STE 529 HUMBOLDT ST MANHATTAN, KS 66502-6073 785-587-0911 May the IRS discuss this return with the preparer shown above? (see instructions)

Form 990 (2011)

X Yes

Form 99	90 (2011) MANHATTAN LIBRA		1124869	Page 2
Part				G-2
4 5		ns a response to any question in this Par	T III	X
	riefly describe the organization's mission. SISTANCE AND SUPPORT	TO MANHATTAN PUBLIC LIBR	ARY	
2 D	and the organization undertake any significan	nt program services during the year which were not	listed on the	
	nor Form 990 or 990-EZ?	it program services during the year which were not	iisted off the	Yes X No
•	"Yes," describe these new services on Sch	nedule O		
		ake significant changes in how it conducts, any prog	gram	
	ervices?			Yes X No
	"Yes," describe these changes on Schedul	accomplishments for each of its three largest progr	am services, as measured by	
	•	rganizations and section 4947(a)(1) trusts are requi		
gı	rants and allocations to others, the total exp	penses, and revenue, if any, for each program servi	ce reported.	
				
4a (0	Code) (Expenses \$	including grants of \$) (Revenue \$)
				
4b (0	Code) (Expenses \$	including grants of \$) (Revenue \$)
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4c ((Code) (Expenses \$	including grants of \$) (Revenue \$)
	Other program services (Describe in Sched Expenses \$ 4,025		(Revenue \$,
	otal program service expenses▶	4,025	(HOTOHOO W	
DAA				Form 990 (2011)

Part IV Checklist of Required Schedules

1 is the organization described in section 501(x)) or 4847(a)(x) (where than a private foundation? If ITYES,* complete Schedule D, Schildule D, Schi		,		Yes	No
2 Is the organization required to complete Schedule B, Schedule of Contributors (see misructions)? 2 In the organization engage in direct or indrect pointines on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I section 3 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
3 Det the organization engage in direct or inferet political campaign activities on behalf of or in opposition to candidates for public offices? If Yes, Complete Schedube C, Part II 4 Section \$91(c)(3) organizations, Oid the organization engage in lobbying activities, or have a section \$91(h) electron in effect during the tax year? If Yes, Complete Schedube C, Part II 5 Is the organization as section \$01(c)(4), \$91(c)(5) or \$91(c)(6) organization that receives membrarship dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If Yes, Complete Schedube C, Part II 6 Det the organization mantain any donor advised funts or any similar funds or accounts for which donors have the night to provide advise on the distribution or mestment of amounts in such funds or accounts? If "Yes," complete Schedube D, Part II 7 Det the organization receive or hold a conservation easement, including easements to preserve open space, the environment, hattonic land areas, or historic structures? If Yes," complete Schedube D, Part II 8 Det the organization maintain collections of winds of art, hattorical freserves, or other similar seasets? If Yes," complete Schedube D, Part III 9 Det the organization maintain collections of winds of art, hattorical freserves, or other similar seasets? If Yes," complete Schedube D, Part III 9 Det the organization amounts of the part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit preparation, and the part X, inc. 100 pa		complete Schedule A		_X	
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4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If IT-96. "complete Schedule C, Part III	3				
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20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20a X 20b	19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		If "Yes," complete Schedule G, Part III	19		
	20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H			_X_
	b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Pi	art IV Checklist of Required Schedules (continued)		_	
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
~~	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			<u> </u>
24 a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		X
L	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
b		240		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		1
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		$\vdash \vdash$
25a	, , , , , , , , , , , , , , , , , , ,	0=-		v
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			1
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			.,
	If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			1
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			1
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<u>X</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		_X_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		_X_
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	IV, and V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Χ
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Χ
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38		<u>X</u>

Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V				
		1 1		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	_		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	_		İ
С	Did the organization comply with backup withholding rules for reportable payments to vendors and				
	reportable gaming (gambling) winnings to prize winners?		1c	ļ	X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	_		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				١
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
þ	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other au				1
	over, a financial account in a foreign country (such as a bank account, securities account, or other finan	cial			
	account)?		4a		X
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Ac	counts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	n?	_5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				١
	organization solicit any contributions that were not tax deductible?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	or			
_	gifts were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).	. 4.			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for good	ods			
_	and services provided to the payor?		7a 7b		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		/ B		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		1
ч	If "Yes," indicate the number of Forms 8282 filed during the year	7d	1,0		
d e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit conf		7e		l
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract		7f		<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form		7g		
9 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		1		
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring				ĺ
	organization, have excess business holdings at any time during the year?		8		ĺ
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the organization make any taxable distributions under section 4966?		9a		ĺ
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations.Enter				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			٠.
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations.Enter		7		1
а	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources	1			l
	against amounts due or received from them)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	041?	12a		L
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	_		1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		L		
а	is the organization licensed to issue qualified health plans in more than one state?		13a		<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O				
b	Enter the amount of reserves the organization is required to maintain by the states in which	1 1			
	the organization is licensed to issue qualified health plans	13b	_		ĺ
С	Enter the amount of reserves on hand	13c	\dashv		<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		<u>X</u>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule C		_ 14b		

X

Governance Management and Disclosure For each "Yes" response to lines 2 through 7h below, and for a Part VI

Governance, management, and disclosure for each fires response to lines 2 through 70 below, and it	OI 9
"No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedu	ıle
O. See instructions. Check if Schedule O contains a response to any question in this Part VI	

Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a				
	If there are material differences in voting rights among members of the governing body, or					
	if the governing body delegated broad authority to an executive committee or similar					
	committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with					
	any other officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			ļ		
	supervision of officers, directors, or trustees, or key employees to a management company or other person?			3		<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint					
	one or more members of the governing body?			<u>7a</u>		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			l		.,
	stockholders, or persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year b	y the fo	ollowing		.,	
a	The governing body?			8a	X	
þ	Each committee with authority to act on behalf of the governing body?			_8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9	Х	
Sec	tion B. Policies (This Section B requests information about policies not required by the Internation	ıl Rev	enue Code			
				·/	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		Χ
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,					
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the	form?		11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a		_X_
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	conflic	ts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"					
	describe in Schedule O how this was done			12c		
13	Did the organization have a written whistleblower policy?			13		X
14	Did the organization have a written document retention and destruction policy?			14		X
15	Did the process for determining compensation of the following persons include a review and approval by					
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
a	The organization's CEO, Executive Director, or top management official			15a		X
b	Other officers or key employees of the organization			15b		_X_
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			40-		v
	with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			16a		<u>X</u>
b	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the					
	organization's exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure			.00		
17	List the states with which a copy of this Form 990 is required to be filed ▶ NONE					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c	(3)s o	nly)			
	available for public inspection. Indicate how you made these available. Check all that apply					
	Own website Another's website Upon request					
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest	policy,				
	and financial statements available to the public during the tax year					
20	State the name, physical address, and telephone number of the person who possesses the books and records of the					
	organization >					

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations List persons in the following order: individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons.

X Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(d bo	o not x, unl ficer a	Pos check ess pe	C) sition more erson	that Highest compensated	one an ee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) JOHN WALTERS										***
DIRECTOR	0.00					<u> </u>		0	0	0
(2) JOSEPH H. MILLS	L .							_		
TREASURER	0.00	<u> </u>				ļ		0	0	0
(3) HELEN COOPER	0.00				1					•
VICE PRESIDENT	0.00	<u> </u>	ļ			-	_	0	0	0
(4) SUSAN ADAMCHAK	0.00							_		
DIRECTOR	0.00				-	 		0	0	0
(5) EARL ALLEN DIRECTOR	0.00							0	0	0
(6) TERRY ARTHUR	0.00	\vdash			\vdash			0		
SECRETARY	0.00							0	0	0
(7) LORI LEVIN	- 0.00	╁	_		T					<u> </u>
DIRECTOR	0.00							0	0	0
(8) TODD SIMON										
DIRECTOR	0.00					ļ		00	0	0
(9) HEARTHER LANSDOW	NE									
DIRECTOR	0.00				<u> </u>	_		0	0	0
(10) ROBERT HAINES		ŀ				l				
PRESIDENT	1.00	Х			<u> </u>	$ldsymbol{ldsymbol{ldsymbol{eta}}}$	<u> </u>	0	0'	0
(11)							<u> </u>			
(12)										
(13)							_			
(14)			-	-						

Pa	rt VII Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	loye	es, a	and Highest Compensated	i Employee(continued)				
	(Á) Name and title	(B) Average hours per week (describe hours for	of	ix, uni ficer a	Pos check ess po and a	erson directo	than is both or/trus	n an tee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)		(F) Estimate amount of other ompensa from the	of ition	
		related organizations in Schedule O)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)			organizati and relati rganizati	ed	
(15)														
(16)										1			<u> </u>	
(17)											-			
(18)		-												
(19)														
(20)														
(21)								ļ						
(22)								_						
(23)													·	
(24)														
(25)	****								1-44					
1b	Sub-total	ete te Dert VIII S		ion /		<u></u>		•						
c d	Total from continuation she Total (add lines 1b and 1c)	ets to Part VII,	secu	ion <i>i</i>	•			•						
2	Total number of individuals (increportable compensation from the				ose	liste	d abo	ove)	who received more than \$10	00,000 in			-	
3	Did the organization list any for				uste	e ke	v em	nlov	vee or highest compensated		Г	—	/es	No
4	employee on line 1a? If "Yes," of For any individual listed on line	complete Schedu 1a, is the sum of	ile J f rep	for s ortab	uch de c	indiv ompe	ndual ensat	tion	and other compensation from		-	3		X
	organization and related organi individual											4		X
5	Did any person listed on line 1a for services rendered to the org	ganization? If "Ye	s," c	ompe omp	nsat lete	tion f Sche	rom edule	any J fo	unrelated organization or inc or such person	dividual 		5		Χ
Sec 1	ction B. Independent Contract Complete this table for your five			-d 10	4050	ndo	nt on	ntra	ators that recovered more than	n \$100,000 of				
<u>'</u>	compensation from the organiz								ir year ending with or within t		1		(C) pensatio	
	Name and	business address						 	Descrip	tion of services		Comp	pensatio	on
		· - · - · · · · · · · · · · · · · · · ·						 						
								-						
						-								
								-						
2	Total number of independent c								e listed above) who	_				
DAA	received more than \$100,000 c	of compensation	from	the	orga	nızat	ion)			0		Form	990	(2011)

		(2011) MANHALLAN I		KI LOONDIII.	ION, INC.	40 1124007	· · · · · · · · · · · · · · · · · · ·	Page 3
Pa	rt V	III Statement of Reve	enue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
S S	12	Federated campaigns	1a			TOTALIGO		012, 010, 01014
발			1b	· · · · · · · · · · · · · · · · · · ·				
유턴		Membership dues	1c					
Z,ŧ		Fundraising events	-					
<u> </u>		Related organizations	1d					
Sir		Government grants (contributions)	1e					
e ti	T	All other contributions, gifts, grants, and similar amounts not included above	,,	70 425				
<u> </u>			1f	70,425				
Contributions, Gifts, Grants and Other Similar Amounts	_		1f \$		70,425			
	п	Total. Add lines 1a-1f			70,423			
ğ	0-			Busn. Code				
e e	2a							
형	þ							+
اێۣٙ	С.			 				-
ဖွ	d							+
la l	e	All II						-
Program Service Revenue		All other program service rever	nue			<u> </u>		
-		Total. Add lines 2a–2f					 	
	3	Investment income (including of	lividenas,		32,586	-10,423		43 000
		and other similar amounts)			32,300	-10,423		43,009
	4	Income from investment of tax-	exempt of	ond proceeds		· · · · · ·		
	5	Royalties	1	(v) Passage	+		· · · · · · · · · · · · · · · · · · ·	
	_	(ı) Real		(II) Personal				
		Gross rents	-					
		Less rental exps						
1		Rental inc or (loss)						
		Net rental income or (loss) Gross amount from (i) Securities	. T	(ii) Other				
		sales of assets	<u> </u>	503	ľ			
	_	other than inventory						
	D	Less cost or other						
	_	Gain or (loss)		503				
		Net gain or (loss)		503	503	503		
		Gross income from fundraising ever	nts		303	303		
e l	va	(not including \$						
Ven		of contributions reported on line 1c)	. 1					
Other Revenue		See Part IV, line 18	a			1		
ě	h	Less direct expenses	<u>.</u> –					
ŏ		Net income or (loss) from fund		ents				
		Gross income from gaming activitie						
	Ju	See Part IV, line 19	a					
	b	Less direct expenses	b					
		Net income or (loss) from gam	ına actıvıtı	es				
		Gross sales of inventory, less						
		returns and allowances	a					
	ь	Less cost of goods sold	ь					
		Net income or (loss) from sales	s of invent	orv •				
	Ť	Miscellaneous Revenue		Busn. Code				
	11a							
	b							
	c				•			
	d	All other revenue					· · ·	
				•				
		Total revenue. See instruction	าร	•	103,514	-9,920	,	0 43,009
	_ _ _						·	Form 990 (2011)

Form 990 (2011) Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	Check if Schedule O contains a response	to any question in this Part	IX		
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	8b, 9b, and 10b of Part VIII. Grants and other assistance to governments and	~	Охронаса	general expenses	
1	organizations in the U.S. See Part IV, line 21				
•	Grants and other assistance to individuals in				- · · · · · · · · · · · · · · · · · · ·
2	the U.S. See Part IV, line 22				
,					
3	Grants and other assistance to governments, organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
	Benefits paid to or for members	1			
4 5	Compensation of current officers, directors,				
3	trustees, and key employees				
6	Compensation not included above, to disqualified	··			
٠	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
•	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
	Accounting				,,
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses			···	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				,
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	- · · · · · · · ·			
19	Conferences, conventions, and meetings				
20	Interest	-			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization			<u> </u>	
23	Insurance			<u></u>	
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)	1,800	1,800		
a	AUDIT FEE	1,061	1,061		
b	INSURANCE EMPLOYEE TUITION	600	600		
c C	MISCELLANEOUS	331	331		
d		233	233		
е 25	All other expenses Total functional expenses. Add lines 1 through 24e	4,025	4,025		0
26	Joint costs. Complete this line only if the	7,025	3,023		
_•	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation Check here ▶ If				
	following SOP 98-2 (ASC 958-720)	<u> </u>			

<u>Part</u>	X Balance Sheet		1		
_			(A) Beginning of year		(B) End of year
1	Cash—non-interest bearing		874	1	4,339
2	Savings and temporary cash investments			2	
3	Pledges and grants receivable, net			3	
4	Accounts receivable, net			4	
5	Receivables from current and former officers, directors	s, trustees, key			
	employees, and highest compensated employees Co	mplete Part II of			
	Schedule L			5	
6	Receivables from other disqualified persons (as define	ed under section			
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
ļ	employers and sponsoring organizations of section 50	1(c)(9) voluntary			
g	employees' beneficiary organizations (see instructions)		6	
Assets	Notes and loans receivable, net			7	
8 ¥	Inventories for sale or use			8	
9	Prepaid expenses and deferred charges			9	
10	a Land, buildings, and equipment cost or				
	other basis Complete Part VI of Schedule D	10a			
	b Less accumulated depreciation	10Ь		10c	
11	•	1,472,792	11	1,543,216	
12			12		
13			13		
14			14		
15	-			15	
16		34)	1,473,666	16	1,547,555
17				17	
18				18	
19				19	
20	Tax-exempt bond liabilities			20	
21	Escrow or custodial account liability Complete Part IV	of Schedule D		21	
ທ 22	Payables to current and former officers, directors, trus	tees, key			
Liabilities	employees, highest compensated employees, and dis	qualified persons			
<u> </u>	Complete Part II of Schedule L			22	
בֿ 23	Secured mortgages and notes payable to unrelated th	ird parties		23	
24				24	
25	Other liabilities (including federal income tax, payables	s to related third			
	parties, and other liabilities not included on lines 17-24) Complete Part X			
	of Schedule D			25	
26	Total liabilities. Add lines 17 through 25		0	26	0
	Organizations that follow SFAS 117, check here	X and complete			
s	lines 27 through 29, and lines 33 and 34.				
E 27	Unrestricted net assets		1,346,636	27	1,417,525
<u>명</u> 28	Temporarily restricted net assets			28	
듣 29	Permanently restricted net assets		127,030	29	130,630
₫	Organizations that do not follow SFAS 117, chec	k here ≯			
۵	complete lines 30 through 34.				
왕 30				30	
Ş 31 Ş 31	Paid-in or capital surplus, or land, building, or equipme	ent fund		31	
Net Assets or Fund Balances 25 25 25 25 25 25 25 25 25 25 25 25 25	Retained earnings, endowment, accumulated income,	or other funds		32	
Z 33	· .			33	1,548,155
34	Total liabilities and net assets/fund balances			34	1,548,155

Form	990 (2011) MANHATTAN LIBRARY FOUNDATION, INC. 48-1124869			Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
		1 1			
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u>514</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2			025
3	Revenue less expenses. Subtract line 2 from line 1	3			<u>489</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,4		
5	Other changes in net assets or fund balances (explain in Schedule O)	5	<u> </u>	<u>25,</u>	<u>000</u>
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,	1			
	column (B))	6	1,5	48,	<u> 155</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b			2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				İ
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were				
	issued on a separate basis, consolidated basis, or both				İ
	Separate basis Consolidated basis Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
-	the Single Audit Act and OMB Circular A-133?		3a		ĺ
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
-	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		36		

Form **990** (2011)

SCHEDULE A (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

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

MANHATTAN LIBRARY FOUNDATION, INC.

Employer identification number 48-1124869

Pa	art I	Reaso	on for Public Charity S	Status (All organizations r	nust cor	nplete t	his par	t.) See	ınstru	ictions	i		
Γhe	orgar	nization is not a	private foundation because	it is (For lines 1 through 11, che	ck only or	ne box)				<u>-</u>			
1	\bigcap	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).											
2		A school desc	nbed in section 170(b)(1)(A	(ii).(Attach Schedule E)									
3	H		a cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
4	H	•	· ·	in conjunction with a hospital des)(A)(iii).	Enter th	ne hospi	ital's name.		
•	ш	city, and state						NN					
5		•		a college or university owned or	onerated	hy a gove	ernmenta	al unit de	scribed	ın			
9	ш	-	b)(1)(A)(iv).(Complete Part I		ороганов	o, a gove			oonbed				
		•	,, ,, ,, , ,	vernmental unit described in sec	tion 170(h)/1)/A)/\	Λ						
6	X		•	ubstantial part of its support from				n the ne	neral nu	blic			
7	[2]	•	ection 170(b)(1)(A)(vi).(Co		u govern	mentar an	0	ii iiic gci	ici di pu	DIIC			
				'0(b)(1)(A)(vi).(Complete Part II	١								
8 9	\vdash	•		more than 33 1/3% of its suppor		atabutione	membe	archin fo	ae and	aross			
9		_	·	t functions—subject to certain ex									
		•	·	unrelated business taxable inco						11.5			
			•	1975 See section 509(a)(2).				om basii	103303				
10			•	clusively to test for public safety	-	•	(2)(4)						
11	H	-	_	clusively for the benefit of, to pe				carry or	t the				
••	Ш			d organizations described in sec						tion			
				e type of supporting organization									
		a Type	<u> </u>	c Type III–Functiona			d		e III–Oti	her			
е			··	nization is not controlled directly									
C	لــا		-	than one or more publicly suppo									
		or section 509	_	, , , , , , , , , , , , , , , , , , , ,	3					(-/(-/			
f				mination from the IRS that it is a	Type I, Ty	pe II, or T	ype III s	upportin	g				
		organization,							•				
g				on accepted any gift or contributi	on from a	ny of the							
9		following pers				•							
		• .		itrols, either alone or together wi	th persons	s describe	ed in (ii) a	and				Yes	No
		• • •	, the governing body of the s		•						11g(i)		
		` '	member of a person describe	-							11g(ii		
		• •	ontrolled entity of a person de								11g(ii	7	1
h		• •	ollowing information about the										
	ı) Nam	e of supported	(II) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Did)	ou notify	(vi)	ls the	(vii) An	ount of	
	org	ganization		(described on lines 1–9	1	sted in your		nization in of your	organizat	on in col	sup	port	
				above or IRC section (see instructions)	governing	document?		port?		S?			
				,	Yes	No	Yes	No	Yes	No			
(A)													
					ļ								
(B)													
					ļ		ļ	ļ	ļ				
(C)					İ								
					 								
(D)													
—— (E)													
		_	.		<u> </u>			ļ	ļ	<u> </u>			
Tota	ai				1	i			l	1			

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										
Caler	ndar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total				
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")			96,457	13,895	70,425	180,777				
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf										
3	The value of services or facilities furnished by a governmental unit to the organization without charge										
4	Total. Add lines 1 through 3			96,457	13,895	70,425	180,777				
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						180,777				
Sec	tion B. Total Support										
Caler	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total				
7	Amounts from line 4			96,457	13,895	70,425	180,777				
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			46,331	43,531	43,913	133,775				
9	Net income from unrelated business activities, whether or not the business is regularly carned on										
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)										
11	Total support. Add lines 7 through 10		<u> </u>	<u> </u>			314,552				
12	Gross receipts from related activities, etc. (12	-10,423				
13	First five years. If the Form 990 is for the	organization's first,	second, third, four	th, or fifth tax year as	a section 501(c)(3	3)	. —				
	organization, check this box and stop here		-				<u> </u>				
Sec	tion C. Computation of Public Su										
14	Public support percentage for 2011 (line 6,			(f))		14	57.47 %				
15	Public support percentage from 2010 Sche					15	55.12 % _				
16a	33 1/3% support test—2011. If the organi				/3% or more, chec	k this	▶ ☑				
	box and stop here . The organization qualifies as a publicly supported organization										
b	33 1/3% support test—2010. 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—2011. 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—2010. 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										
40	supported organization Private foundation. If the organization did	not chook a how a	n line 13 16a 16h	17a or 17h abook t	hie how and coc						
18		not check a box of	п ште тэ, тоа, тоо,	, ira, oi irb, cneck t	IIIS DUX 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 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.)

Calendar year (or fiscal year beginning in) ▶ 1 Gifts, grants, contributions, and membershy fees received (Do not include any "unusual grants") 2 Gross receipts from admissions, merchandises old or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from admissions, merchandises sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from admissions that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and enther paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts mudded 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 called any early of fiscal year beginning In) ▶ 8 Public support (Subtract line 7c from line 6) Section B. Total Support 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from smilar sources b Unrelated business taxable income (less section 5.11 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b	Sec	tion A. Public Support			· ·						
test riceved (Do not include any "unusual yarats") 2. Cross recepts from administrations in methods the second program of the secon			(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 201°	1	(f) Total		
2 Gissa receptio from admissable, merchandes sold or services performed, of fallowings better with at selected the organization is developed purpose. 3 Grass recepts from admissable and selected to the organization to benefit and either part or control to be the fall of the organization to benefit and either part or control to benefit and either part or control to benefit and either part or control to benefit and either part organization to benefit and either part organization to expensed on as behalf it is necessary to the organization of services or facilities. 5 Total Add lines 1 through 5 6 Total Add lines 1 through 5 7 Amounts included on lines 12, and 3 received from disqualified persons the traceoff benefit and sequelified persons the traceoff benefit and sequelified persons the traceoff benefit and sequelified persons that exceed the grades of \$5,000 or 1% of the amount on line 13 for the year 5 8 Public support (Guithreat line 7c from line 6) 9 Amounts from line 6 10 Grass recepts from admissable income (less search organization) and the part of the part	1	fees received (Do not include any "unusual"									
unrelated tride or business under section 513 1 Tax revenues leved for the end of the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization's without charge 6 Total. Add lines 1 through 5 7 Announts included on lines 1, 2, and 3 received from disqualified persons be Announts included on lines 2 and 3 received from disqualified persons be Announts included on lines 2 and 3 received from disqualified persons and a received from disqualified persons that exceed the greater of 55,000 or 1% of the amount on line 13 for the year C Add lines 7 and 77 be Public support (Subtract line 7 c from line 6) 8 Public support (Subtract line 7 c from line 6) 9 Announts from line 6 10a Gross income from interest, dividends, payments review or a service of the service of the part of the first payments from line 6) 10b Unrelated business stables income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Ne income from unrelated business activities not included in line 100, whether or not the business included a line 100, whether or not the business included a line 100, whether or not the business included a line 100, whether or not the business included in line 100, whether or not the business included in line 100, whether or not the business activities not included in line 100, whether or not the business activities not included in line 100, whether or not the business activities not included in line 100, whether or not the business activities not included in line 100, whether or not the business activities not included in line 100, whether or not the business activities not included in line 100, whether or not the business activities not included in line 100, whether or not the business activities not included in line 100, whether or not the 300 tax of the organization is first, second, third, fourth, or fifth tax year as a section 501(is)(3) organization, check this b	2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the									
organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization's whole of the paid of the	3								·		
furnished by a governmental unit to the organization without charge 5 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons by a received from disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 of the year c Add lines 7a and 7b 8 Public support (Subtract line 7c from line 6) 9 Amounts from line 6 10a Gross income from interest, dividends, payments received from similar sources payments from line 6 b 10b Unrelated business taxable income (less section 51 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unralated business acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unralated business acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unralated business acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unralated business acquired after June 30, 1975 c Total support. Add lines 9, 10c, 11, and 12) 15 Total support. Add lines 9, 10c, 11, and 12) 17 Total support (subtract line 7c from sinilar sources) 18 Public support percentage from 2010 Schedule A, Part III, line 15 19 Public support percentage from 2010 Schedule A, Part III, line 15 10 Public support percentage from 2010 Schedule A, Part III, line 15 10 Public support percentage from 2010 Schedule A, Part III, line 15 10 Total support texts—2011. If the organization of the role to ke 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 10 In the size of the properties of the size of the properties of the orien 19a, and line 16 is more than 33 1/3%, and line 18 is nor thin and 31/3%, check this box and stop here. The organization qualifies as a publicly supported organization	4	organization's benefit and either paid									
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48-1124869

Page 4

Schedule A (Form 990 or 990-EZ) 2011 MANHATTAN LIBRARY FOUNDATION, INC.

Part IV Supplemental Information. Complete this part to provide the explanations. 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. Also complete this part for any additional information (See instructions).

SCHEDULE O . (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Supplemental Information to Form 990 or 990-EZ

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

• Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Name of the organization

MANHATTAN LIBRARY FOUNDATION, INC.

Employer identification number 48-1124869

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT LIBRARY EMPLOYEE TUITION GRANTS

FORM 990, PART VI, LINE 9 - OFFICERS WHO CANNOT BE REACHED ROBERT HAINES
226 FORDHAM ROAD
MANHATTAN, KS 66503

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 NO REVIEW WAS OR WILL BE CONDUCTED.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION NO DOCUMENTS AVAILABLE TO THE PUBLIC