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Form **990-EZ****Short Form**
Return of Organization Exempt From Income Tax

OMB No. 1545-1150

2012**Open to Public
Inspection**Department of the Treasury
Internal Revenue ServiceUnder 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 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.

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

A For the 2012 calendar year, or tax year beginning **JULY 1**, 2012, and ending **JUNE 30**, 20 **13****B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization**FRIENDS OF THE CARSON CITY LIBRARY**

Number and street (or P.O. box, if mail is not delivered to street address)

Room/suite

BOX 1814

City or town, state or country, and ZIP + 4

CARSON CITY, NV 89702**D** Employer identification number**88-6006992****E** Telephone number**775/885-9917****F** Group Exemption

Number ▶

N/A**G** Accounting Method: ☒ Cash ☐ Accrual Other (specify) ▶**I** Website: ▶**H** Check ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).**J** Tax-exempt status (check only one) — ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**K** Check ☐ if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.**L** Add lines 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, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ **226,261.00****Part I** **Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)Check if the organization used Schedule O to respond to any question in this Part I ☒

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	393.00
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	6,130.00
	4	Investment income	4	177.00
	5a	Gross amount from sale of assets other than inventory	5a	
	b	Less: cost or other basis and sales expenses	5b	
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events		
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
	b	Gross income from fundraising events (not including contributions of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
c	Less: direct expenses from gaming and fundraising events	6c		
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
7a	Gross sales of inventory, less returns and allowances	7a		
b	Less: cost of goods sold	7b		
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe in Schedule O)	8	60,095.00	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	66,795.00	
Expenses	10	Grants and similar amounts paid (list in Schedule O)	10	44,634.00
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	
	14	Occupancy, rent, utilities, and maintenance	14	4,536.00
	15	Printing, publications, postage, and shipping	15	1,713.00
	16	Other expenses (describe in Schedule O)	16	10,152.00
17	Total expenses. Add lines 10 through 16	17	61,035.00	
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	5,760.00
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	206,091.00
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	14,409.00
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	226,261.00

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No. 106421

Form **990-EZ** (2012)

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Part 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 ☒

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	206,091.00	22 264,562.00
23 Land and buildings		23
24 Other assets (describe in Schedule O)	27,172.00	24 2,700.00
25 Total assets	233,263.00	25 267,262.00
26 Total liabilities (describe in Schedule O)	27,172.00	26 41,001.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	206,091.00	27 226,261.00

Part III Statement of Program Service Accomplishments (see the instructions for Part III)Check if the organization used Schedule O to respond to any question in this Part III ☐What is the organization's primary exempt purpose? Promote/support activities of the public library

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

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

28 DONATIONS ARE MADE TO ENHANCE PROGRAMS AND ACTIVITIES AND ASSIST WITH LOST FUNDING TO THE CARSON CITY/COUNTY LIBRARY, A SUBDIVISION OF THE STATE		
(Grants \$ 44,634.00) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	44,634.00
29		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	
30		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	
31 Other program services (describe in Schedule O)		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32 Total program service expenses (add lines 28a through 31a)	32	44,634.00

Part IV List of Officers, Directors, Trustees, and Key Employees List each one even if not compensated (see the instructions for Part IV)Check if the organization used Schedule O to respond to any question in this Part IV ☐

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
PHYLLIS PATTON PRESIDENT	30	0		
CHRISTOPHER WAHLE VICE-PRESIDENT	2	0		
WILLIAM CROWELL TREASURER	5	0		
SUSAN MATTHES SECRETARY	2	0		
SANDRA OSHEROFF BUDGET/MEMBERSHIP CHAIR	25	0		
FRIEDA FORD MARKETING CHAIR	20	0		
JACQUI COTTE CORRESPONDING SECRETARY	2	0		
CHERYL MATHWIG NEWSLETTER	3	0		
JULIE GIESE HISTORIAN	2	0		
SANDY FOLEY DIRECTOR	5	0		
CINDY BYINGTON DIRECTOR	25	0		
GEORGETTE MADDOX DIRECTOR	3	0		

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V ☐

	Yes	No
33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	✓
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	✓
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a	✓
b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	✓
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c	✓
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	✓
37a Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a		
b Did the organization file Form 1120-POL for this year?	37b	✓
38a 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	✓
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9	39a	
b Gross receipts, included on line 9, for public use of club facilities	39b	
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► ; section 4912 ► ; section 4955 ►		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or 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	✓
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ►		
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ►		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	✓
41 List the states with which a copy of this return is filed ► NONE REQUIRED IN NEVADA		
42a The organization's books are in care of ► S.L.OSHEROFF Telephone no. ► 77/885-9917		
Located at ► 900 S. ROOP STREET, CARSON CITY, NV ZIP + 4 ► 89701-4145		
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	✓
If "Yes," enter the name of the foreign country: ►		
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 the U.S.?	42c	✓
If "Yes," enter the name of the foreign country: ►		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here ► <input type="checkbox"/>	43	
	Yes	No
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	✓
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	✓
c Did the organization receive any payments for indoor tanning services during the year?	44c	✓
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d	✓
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	✓
45b 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b	✓

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

	Yes	No
46		<input checked="" type="checkbox"/>

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this Part VI ☐

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

	Yes	No
47		<input checked="" type="checkbox"/>

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

48		<input checked="" type="checkbox"/>
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49a Did the organization make any transfers to an exempt non-charitable related organization?

49a		<input checked="" type="checkbox"/>
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b If "Yes," was the related organization a section 527 organization?

49b		<input checked="" type="checkbox"/>
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50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee paid more than \$100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
UNPAID VOLUNTEERS ONLY				

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

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

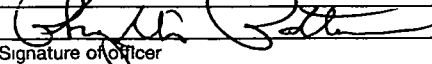
(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

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

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A

▶ ☒ Yes ☐ No

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

Sign Here	Signature of officer 	Date 7-20-13
	Type or print name and title PHYLLIS PATTON, PRESIDENT	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶	Firm's EIN ▶			
	Firm's address ▶	Phone no ▶			

May the IRS discuss this return with the preparer shown above? See instructions ▶ ☐ Yes ☐ No

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2012

Open to Public Inspection

Name of the organization

FRIENDS OF THE CARSON CITY LIBRARY

Employer identification number

88-6006992

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☒ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a ☐ Type I b ☐ Type II c ☐ Type III—Functionally integrated d ☐ Type III—Non-functionally integrated
 - e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
 - f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
 - g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? ☐
 - (ii) A family member of a person described in (i) above? ☐
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above? ☐
 - h Provide the following information about the supported organization(s).

	Yes	No
11g(i)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11g(ii)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11g(iii)	<input type="checkbox"/>	<input checked="" type="checkbox"/>

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A) CARSON CITY PUBLIC LIBRARY	88-600189	GOVERNMENTAL	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	44,634.00
(B)									
(C)									
(D)									
(E)									
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	%
16a 33¹/₃% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 ¹ / ₃ % or more, check this box and stop here . The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33¹/₃% support test—2011. 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		<input type="checkbox"/>
17a 10%-facts-and-circumstances test—2012. 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		<input type="checkbox"/>
b 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4,755.	4,707.	6,803.	3,083.	6,523.	25,871.
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	57,105.	57,543.	65,913.	63,930.	60,095.	304,586.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	61,860.	62,250.	72,716.	67,013.	66,618.	330,457.
7a 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.)						330,457.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6	61,860.	62,250.	72,716.	67,013.	66,618.	330,457.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	946.	1,898.	541.	249.	177.	3,811.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	946.	1,898.	541.	249.	177.	3,811.
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	62,806.	64,148.	73,257.	67,262.	66,795.	334,268.
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	99 %
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	98 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	2 %
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	3 %
19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions <input checked="" type="checkbox"/>		

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. 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.

OMB No 1545-0047

2012

**Open to Public
Inspection**

Name of the organization

FRIENDS OF THE CARSON CITY LIBRARY

Employer identification number

88-6006992

LINE 8, ATTACHED EXPLANATION

LINE 10, EXPLANATION ATTACHED

LINE 16, EXPLANATION ATTACHED

LINE 20 14,409.00 AMOUNT ENTERED TO BALANCE

-13,829.00 DEDICATED FUNDS, LIABILITY ACCOUNT

+ 20.00 RECLASSIFICATION OF AN EXPENSE TO INCOME, CHECK #4757

600.00 2008 ASSET ENTERED FOR PROPER ACCOUNTING

LINE 24 2,700.00 NEWLY PURCHASED ASSETS

LINE 26 41,001.00 ACCUMULATED DEDICATE FUNDS

Name of the organization

Employer identification number

Area with horizontal dashed lines for supplemental information.

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Accrual Basis

FRIENDS OF THE CARSON CITY LIBRARY
LINE 8
July 2012 through June 2013

Type	Date	Num	Memo	Amount
Ordinary Income/Expense				
Income				
BOOK SALES				
11/NOVEMBER (Holiday Sale)				
Deposit	11/15/2012		Deposit	2,335 95
Deposit	11/16/2012		Deposit	772 80
Deposit	11/19/2012		Deposit	1,909 50
Total 11/NOVEMBER (Holiday Sale)				5,018 25
2/FEBRUARY (Book Lovers)				
Deposit	2/18/2013		Deposit	3,871 70
Total 2/FEBRUARY (Book Lovers)				3,871 70
3/MARCH				
General Journal	3/31/2013	7		1,449 00
Total 3/MARCH				1,449 00
4/APRIL (Nat.Library Week)				
Deposit	4/22/2013		Deposit	2,221 35
Total 4/APRIL (Nat Library Week)				2,221 35
5/MAY BOOK SALE				
Deposit	5/20/2013		TH	440 00
Deposit	5/20/2013		FR	618 00
Deposit	5/20/2013		SA	346 00
Total 5/MAY BOOK SALE				1,404 00
6/JUNE (Pancake)				
Deposit	6/17/2013		Deposit	1,492 50
Total 6/JUNE (Pancake)				1,492 50
8/AUGUST (Dollar Sale)				
General Journal	8/31/2012	3		1,520 75
Total 8/AUGUST (Dollar Sale)				1,520 75
9/SEPTEMBER (Harvest Sale)				
General Journal	9/30/2012	4		3,940 00
Total 9/SEPTEMBER (Harvest Sale)				3,940 00
BARGAIN BOOK SALE				
Deposit	6/10/2013		Deposit	912 20
Total BARGAIN BOOK SALE				912 20
Total BOOK SALES				21,829 75
BREAKFAST RAFFLE				
Deposit	5/2/2013		Deposit	207 00
Total BREAKFAST RAFFLE				207 00
BROWSERS SALES				
General Journal	7/31/2012	1		2,785 25
General Journal	8/31/2012	3		3,167 25
General Journal	9/30/2012	4		2,804 50
Deposit	10/9/2012		Deposit	452 00
Deposit	10/15/2012	CASH	Deposit	664 50
Deposit	10/29/2012	CASH	Deposit	905 60
Deposit	10/30/2012		Deposit	262 00
Deposit	10/31/2012		Deposit	257 00
Deposit	11/14/2012		Deposit	984 50
Deposit	11/16/2012		Deposit	322 50
Deposit	11/27/2012		Deposit	689 25
Deposit	11/30/2012		Deposit	572 50
Deposit	12/8/2012		Deposit	515 00
Deposit	12/14/2012		Deposit	560 50
Check	12/19/2012	BAD CHECK	RETURNED CHECK	-34.25
Check	12/19/2012	BAD CHECK	BANK CHARGE	-12.00
Deposit	12/22/2012		Deposit	497 00
Deposit	12/31/2012		Deposit	698 50

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Accrual Basis

FRIENDS OF THE CARSON CITY LIBRARY

LINE 8

July 2012 through June 2013

Type	Date	Num	Memo	Amount
Deposit	1/17/2013		Deposit	1,237 50
Deposit	1/26/2013		Deposit	867 25
Deposit	1/31/2013		Deposit	509 50
Deposit	2/15/2013		Deposit	1,018 00
Deposit	2/28/2013		Deposit	1,394 00
General Journal	3/31/2013	7		1,804 00
Deposit	4/1/2013		Deposit	795 75
Deposit	4/8/2013		Deposit	460 50
Deposit	4/19/2013		Deposit	1,033 00
Deposit	5/2/2013		Deposit	1,033 50
Deposit	5/17/2013		Deposit	1,439 75
Deposit	6/13/2013		Deposit	1,420 00
Deposit	6/17/2013		Deposit	1,235 00
Total BROWSERS SALES				30,339 35
INTERNET SALES				
General Journal	7/31/2012	1		232 80
General Journal	8/31/2012	3		253 69
General Journal	9/30/2012	4		234 50
Deposit	10/30/2012	666	Deposit	305 54
Deposit	11/14/2012		Deposit	726 59
Deposit	12/8/2012	670	Deposit	261 28
Deposit	1/17/2013	672	Deposit	266 84
Deposit	2/15/2013		Deposit	257 36
General Journal	3/31/2013	7		218 81
Deposit	4/1/2013		Deposit	214 78
Deposit	5/17/2013		Deposit	242 45
Deposit	6/17/2013		Deposit	393 19
Total INTERNET SALES				3,607 83
MEMBERSHIP				
ANNUAL DINNER				
General Journal	7/31/2012	1		240 00
Total ANNUAL DINNER				240 00
ANNUAL RAFFLE				
General Journal	7/31/2012	1		66 00
Total ANNUAL RAFFLE				66 00
DRIVE, AUCTION				
General Journal	7/31/2012	1		675 00
Deposit	6/22/2013		Deposit	580 00
Total DRIVE, AUCTION				1,255 00
DRIVE, RAFFLE				
General Journal	7/31/2012	1		247 00
Deposit	6/22/2013		Deposit	189 00
Total DRIVE, RAFFLE				436 00
Total MEMBERSHIP				1,997 00
SCANNING				
Deposit	11/27/2012		Deposit	41 99
Deposit	12/14/2012		Deposit	397 10
Deposit	1/17/2013		Deposit	374 92
Deposit	2/28/2013		Deposit	287 20
General Journal	3/31/2013	7		326 91
Deposit	4/1/2013		Deposit	349 00
Deposit	5/17/2013		Deposit	140 65
Deposit	6/17/2013		Deposit	196 76
Total SCANNING				2,114 53
Total Income				60,095 46
Net Ordinary Income				60,095 46
Net Income				60,095.46

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Accrual Basis

FRIENDS OF THE CARSON CITY LIBRARY
LINE 10
July 2012 through June 2013

Type	Date	Num	Memo	Amount
Ordinary Income/Expense				
Expense				
CARSON CITY LIBRARY DONATIONS				
Books				
Check	6/27/2013	2815	BOOKS	20,000 00
Total Books				20,000 00
Media Enhanced Books				
Check	6/27/2013	2815	BOOKS	3,000 00
Total Media Enhanced Books				3,000 00
RFID Technology				
Check	1/17/2013	2759	RFID EXPANSION	10,500 00
Total RFID Technology				10,500 00
Youth Department				
Check	3/4/2013	2770		3,650 00
Total Youth Department				3,650 00
Total CARSON CITY LIBRARY DONATIONS				37,150 00
CARSON CITY LIBRARY PROGRAMS				
Carson City Branch Anywhere				
Check	11/5/2012	2731		4,000 00
Total Carson City Branch Anywhere				4,000 00
National Library Week				
Check	3/20/2013	2779		1,600 00
Check	4/8/2013	2783		283 99
Check	4/13/2013	2784		800 00
Check	4/13/2013	2785		800 00
Total National Library Week				3,483 99
Total CARSON CITY LIBRARY PROGRAMS				7,483 99
Total Expense				44,633 99
Net Ordinary Income				-44,633.99
Net Income				-44,633.99

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Accrual Basis

FRIENDS OF THE CARSON CITY LIBRARY

LINE 16

July 2012 through June 2013

Type	Date	Name	Memo	Account	Class	Amount
BOOK SALE						
General J	7/31/2012			ADVERTISING	BOOK SALE	348 00
General J	9/30/2012			ADVERTISING	BOOK SALE	360 00
Check	10/6/2012	SIERRA NEVAD		ADVERTISING	BOOK SALE	360 00
Check	12/13/2012	SIERRA NEVAD		ADVERTISING	BOOK SALE	480 00
Check	3/20/2013	SIERRA NEVAD		ADVERTISING	BOOK SALE	270 00
Check	4/14/2013	SIERRA NEVAD		ADVERTISING	BOOK SALE	990 00
Check	5/28/2013	SIERRA NEVAD		ADVERTISING	BOOK SALE	240 00
Check	6/10/2013	SIERRA NEVAD		ADVERTISING	BOOK SALE	240 00
Total BOOK SALE						3,288 00
BROWSERS						
General J	8/31/2012		CARSON DISC	ADVERTISING	BROWSERS	50 00
General J	8/31/2012		CARSON DISC	ADVERTISING	BROWSERS	160.00
Total BROWSERS						210 00
CHAMBER						
General J	7/31/2012			DUES, FEES	CHAMBER	275 00
General J	7/31/2012			ADVERTISING	CHAMBER	30 00
General J	8/31/2012		HOST FEE	CHAMBER MIXER EXP	CHAMBER	200 00
General J	8/31/2012		DIRECTORY	ADVERTISING	CHAMBER	30 00
General J	9/30/2012			ADVERTISING	CHAMBER	30 00
Check	10/6/2012	SIERRA NEVAD		ADVERTISING	CHAMBER	30 00
Check	11/19/2012			ADVERTISING	CHAMBER	30 00
Check	12/13/2012	SIERRA NEVAD		ADVERTISING	CHAMBER	30 00
Check	1/14/2013	VOID	VOID	ADVERTISING	CHAMBER	0 00
Check	1/17/2013	SIERRA NEVAD		ADVERTISING	CHAMBER	30 00
Check	2/17/2013	SIERRA NEVAD		ADVERTISING	CHAMBER	30 00
Check	5/28/2013	SIERRA NEVAD		ADVERTISING	CHAMBER	30 00
Check	6/10/2013	SIERRA NEVAD		ADVERTISING	CHAMBER	30 00
Total CHAMBER						775 00
ICE RINK						
Check	11/16/2012	VITAL SIGNS		ADVERTISING	ICE RINK	125 00
Check	11/16/2012	CARSON CITY		ADVERTISING	ICE RINK	275 00
Check	1/15/2013	CARSON CITY	BUSINESS LISC	DUES, FEES	ICE RINK	25 00
Total ICE RINK						425 00
MEMBERSHIP						
General J	8/31/2012		LEADERBOARD	WEBSITE	MEMBERS	50 00
General J	8/31/2012		FRIEND US	ADVERTISING	MEMBERS	245 00
Total MEMBERSHIP						295 00
OTHER						
General J	7/31/2012			GIFTS	OTHER	85 04
General J	7/31/2012		VENUE	MEMBERSHIP EXPENS	OTHER	500 00
General J	7/31/2012			FURNITURE	OTHER	175 97
General J	7/31/2012		FOOD	MEMBERSHIP EXPENS	OTHER	65 00
General J	7/31/2012			SUPPLIES	OTHER	8 00
General J	8/31/2012		BREAKFAST	MEETINGS/ENTERTAIN	OTHER	23 89
General J	9/30/2012		WINE SALE	CHAMBER MIXER EXP	OTHER	-48 00
General J	9/30/2012		FOOD	CHAMBER MIXER EXP	OTHER	74 92
General J	9/30/2012		DRINKS	CHAMBER MIXER EXP	OTHER	26 29
General J	9/30/2012			LIABILITY INSURANCE	OTHER	390 98
Check	10/1/2012	AWARD ZONE	CHARLENES PL	GIFTS	OTHER	44 41
Check	11/5/2012	FRIEDA FORD	VOLUNTEER ME	MEETINGS/ENTERTAIN	OTHER	19 67
Check	11/5/2012	PHYLLIS PATTON	JACQUI AND LA	GIFTS	OTHER	70 00
Check	11/5/2012	FRIEDA FORD	REIMBURSMENT	SUPPLIES	OTHER	49 35
Check	12/4/2012	CARSON CITY	SUBSCRIPTION	DUES, FEES	OTHER	15 00
Check	12/18/2012	GREEN HOUSE	FLOWER BASKE	GIFTS	OTHER	225 00
Check	12/31/2012	FRIEDA FORD	STICKERS	BROWSERS	OTHER	23 42
Check	12/31/2012	FRIEDA FORD	BOOKCASES	FURNITURE	OTHER	107 48
Check	1/17/2013	NV SOS	LIST OF OFFICE	DUES, FEES	OTHER	25 00
Check	2/1/2013	SECRETARY O.	LIST OF OFFICE	DUES, FEES	OTHER	25 00
Check	2/17/2013	CARSON CITY L	SHOPPING BAS	SUPPLIES	OTHER	142 33
Check	3/11/2013	PATTI FERGUS	BOOK CASES	FURNITURE	OTHER	165 00
Check	3/20/2013	STATE FARM IN		LIABILITY INSURANCE	OTHER	632 85
Check	4/14/2013	AMERICAN LIB		DUES, FEES	OTHER	80 00

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Accrual Basis

FRIENDS OF THE CARSON CITY LIBRARY

LINE 16

July 2012 through June 2013

Type	Date	Name	Memo	Account	Class	Amount
Check	4/24/2013	SILVER OAK	BREAKFAST	MEETINGS/ENTERTAIN	OTHER	777 00
Check	6/19/2013	CARSON CITY L	BOOK SUPPORTS	SUPPLIES	OTHER	144 50
Check	6/25/2013	PHYLLIS PATTON	DRIVE	MEMBERSHIP EXPENS	OTHER	249 33
Check	6/26/2013	CARSON NUGG	VENUE/FOOD	MEMBERSHIP EXPENS	OTHER	649 77
Total OTHER						4,747 20
SUPPLIES						
General J	7/31/2012			BOOK SALES	SUPPLIES	41 85
General J	8/31/2012		TAPE	BOOK SALES	SUPPLIES	21 99
General J	8/31/2012		DOTS	BOOK SALES	SUPPLIES	15 62
General J	8/31/2012		AUTHOR BASKE	MEMBERSHIP EXPENS	SUPPLIES	196 21
General J	11/19/2012		CHECK #2733	BOOK SALES	SUPPLIES	18 83
Check	12/28/2012	JOSEPH MODE		BOOK SALES	SUPPLIES	19 50
Check	2/17/2013	JOSEPH MODE	SHELVING	FURNITURE	SUPPLIES	57 07
Check	5/20/2013	FRIEDA FORD		SUPPLIES	SUPPLIES	40 16
Total SUPPLIES						411 23
TOTAL						10,151.43