

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Inspection

A	For the 2	2013 calendar year, or tax year beginning , 2013, and en	ding		, 20	
В	Check if a	pplicable. C Name of organization Wallkill Public Library		D Employ	er identification nu	ımber
	Address c	hange Doing Business As			14-6018441	
	Name cha	nge Number and street (or P.O. box if mail is not delivered to street address) Room	/suite	E Telepho	ne number	
	Initial retui	P O. Box C			845-895-3707	
	Terminate	City or town, state or province, country, and ZIP or foreign postal code				
	Amended	return Wallkill, NY 12589		G Gross re	ecerpts \$	415259
	Applicatio		H(a) Is this a c	·	subordinates? Yes	No
		Kenneth Simon, President P O Box C Wallkill NY 12589	ı		s included? Tes	
ī	Tax-exem				list. (see instruction	_
J	Website:		H(c) Group	exemption	number ▶	
K	Form of or	ganization ✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of for			of legal domicile:	NY
Р	art I	Summary				
	1 8	Briefly describe the organization's mission or most significant activities: The	mission of the	Wallkill P	ublic Library is	to
ě	1	provide our community with access to the highest quality materials, services, and	***********			
Activities & Governance		entertainment and cultural enrichment. The library enables people to expand their	~~~~~~~~~~~~~~~			
ē		Check this box ▶ ☐ if the organization discontinued its operations or dispose				
Š		Number of voting members of the governing body (Part VI, line 1a)		3		11
ಹ		Number of independent voting members of the governing body (Part VI, line-1		79.4		11
ies		otal number of individuals employed in calendar year 2013 (Part Valine 2a)		0.5		17
¥		Total number of volunteers (estimate if necessary)	2 3 2014	6		20
Aci		otal unrelated business revenue from Part VIII, column (C), line 12		10 7a		0
	1	Net unrelated business taxable income from Form 990-T, line 34	TN UT	7b		0
			Prior Y	ear	Current Ye	ar
ø.	8 (Contributions and grants (Part VIII, line 1h)		7689		78429
Ž	L	Program service revenue (Part VIII, line 2g)		294098		335044
Revenue		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		1230		1204
Œ	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		607		582
	12 7	otal revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		303624		415259
	13 (Grants and similar amounts paid (Part IX, column (A), lines 1-3)	T	200		200
	14 E	Benefits paid to or for members (Part IX, column (A), line 4)		0		0
ø	15 5	Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10)		192479		207359
Expenses	16a F	Professional fundraising fees (Part IX, column (A), line 11e)		0		0
ĝ	b 7	otal fundraising expenses (Part IX, column (D), line 25) ▶				
ũ	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		117667		102909
	18 1	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		310345		310468
	19 F	Revenue less expenses. Subtract line 18 from line 12		-6721		104791
5 8			Beginning of Cu	ırrent Year	End of Yea	ar
Net Assets or Fund Balances	20 1	Total assets (Part X, line 16)		359310		465312
A Por	21 7	Total liabilities (Part X, line 26)		3667		4833
žį	22 1	Net assets or fund balances. Subtract line 21 from line 20		355643		460479
P	art II	Signature Block		· · · · · · · ·	 _	
Un	der penalti	es of perjury, I declare that I have examined this return, including accompanying schedules and st	atements, and to t	he best of r	my knowledge and	belief, it is
	e, correct,	and complete beolaration of preparer (other than officer) is based on all information of which prepared	erer nas any know	leage	11	
•		M Cono C		<u> </u>	15/14	
Sig	- :	Signature Mofficer CADOL CADOL DIOCCTOR WAS ALLE		ite l	0.0.1	
He	re		L PUBLIC	· UBK	LITTRY	
		Type or print name and title	D-4-		· Imu	
Pa	id	Print/Type preparer's name Preparer's signature	Date	Check [
Pr	eparer			self-emp	pioyed	
Us	e Only		Firr	n's EIN ▶		
14-		Firm's address >	Pho	one no		
_		6 discuss this return with the preparer shown above? (see instructions)	· · · · ·	- ; :		No No
For	Paperwo	ork Reduction Act Notice, see the separate instructions. Ca	t. No. 11282Y	112	I Form 9	90 (2013)

Form 99			ا	Page 3			
Part	V Checklist of Required Schedules			1 22-			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No			
_	complete Schedule A	1	1				
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	ļ			
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I						
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 "Yes," complete Schedule C, Part II	4		1			
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	-		V			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		✓			
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1			
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1			
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	1				
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1			
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1			
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.		الم • •				
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1				
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1			
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		√			
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1			
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		V			
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		1			
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		✓			
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓			
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1			
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	440		1			
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	14b					
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	15		√			
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		√			
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II						
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	18		1			
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1			
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		_			
			n 99 0	(2013)			

Form 99			i	Page 4
Part	Checklist of Required Schedules (continued)			,
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		Yes	No
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants or 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		√
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		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$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 25a	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		1
đ 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d 25a		√
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 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		1
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):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
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		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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? <i>If "Yes," complete Schedule R, Part I</i>	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		✓
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
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,			
38	Part VI	37	1	V
		Forr	n 990	(2013)

Form **990** (2013)

Part	V Statements Regarding Other IRS Filings and Tax Compliance			age
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 2		l	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	إ	l	į
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	ļ	l	
	reportable gaming (gambling) winnings to prize winners?	1c	\	İ
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 17	1	1	1
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	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	ł	}] .
	account)?	4a	<u> </u>	V
þ	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 Accounts.	}		}
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		√
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	ļ	ļ
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	t	ļ	ر ا
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	<u> </u>	1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		ĺ	
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	1		}
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			
_		7a		 -
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u> </u>	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			
a	If "Yes," indicate the number of Forms 8282 filed during the year	7c		ļ
d e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	70		
f	Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f	ļ	
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		 -
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		 -
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			 -
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	1		
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	<u> </u>		
a	Did the organization make any taxable distributions under section 4966?	9a		ļ
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			<u> </u>
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1		
11	Section 501(c)(12) organizations. Enter:	1		1
а	Gross income from members or shareholders	j '	i)
þ	Gross income from other sources (Do not net amounts due or paid to other sources	1		l l
	against amounts due or received from them.)			İ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		Ĺ
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	ļ		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	L	L	L
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	L	<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O.			
þ	Enter the amount of reserves the organization is required to maintain by the states in which]
	the organization is licensed to issue qualified health plans	1)
C	Enter the amount of reserves on hand	 	L	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓_
b	If "Yes." has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14b	Į.	ı

	ט (צטזפ)			Page 6
Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response or note to any line in this Part VI	See ins	tructi	ons.
Secti	on A. Governing Body and Management		-• -	<u>~</u>
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . 11	4		
	If there are material differences in voting rights among members of the governing body, or]		
_	of the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
þ	Enter the number of voting members included in line 1a, above, who are independent . 1b 11	4		
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		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		√
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		√
5	Did the organization become aware during the year of a significant diversion of the organization's assets?. Did the organization have members or stockholders?	5		1
6 7a	Did the organization have members or stockholders?	-		Y
	one or more members of the governing body?	7a	1	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	✓	
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		✓_
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	iue C	ode.) Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	165	<u> </u>
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	100		<u>v</u>
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Ì	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	√	
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	√	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give use to conflicts?	12b	V	
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	1	
13	Did the organization have a written whistleblower policy?	13	1	
14	Did the organization have a written document retention and destruction policy?	14	•	√
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?			
а	The organization's CEO, Executive Director, or top management official	15a		✓_
b	Other officers or key employees of the organization	15b		✓_
460	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
16a	with a taxable entity during the year?	16a		1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	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		
	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed New York		-\/0\-	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	1 5U1(င)(ၓ)ၭ	only)
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule C)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of infinancial statements available to the public during the tax year.	erest	policy	, and
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: Mary Lou Carolan, 7 Bona Ventura Ave, Wallkill NY 12589	of the	•	

_			
-om	ggn	(2013)	

Page 7

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

Check if Schedule O contains a response or note to any line 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.

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

E SHOOK WAS SON IN HORIZON AND ONGENIZATION TO					C)			1		
(A)	(B)		-4 -4		ition			(D)	(E)	(F)
Name and Title	Average	(do not check more than one box, unless person is both an				Reportable	Reportable	Estimated		
!	hours per week (list any	office	officer and a director/trustee)		compensation compensation fro related		amount of other			
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Christı Crowley,	5									
President		✓		1			ļ	0	0	0
(2) Elaine Schultz	5			Γ						
Vice-President		1		1				j o	0	0
(3) Leslie Soto	5							}		
Treasurer		1		√				o	0	0
(4) Susan Haldeman	5									
Recording Secretary		✓		1	1	l	}) 0	o	0
(5) Merle Bercow	5									
Corresponding Secretary		✓		1	ĺ	[ĺ	0	0	0
(6) Eileen Masterson	5	1						0	0	0
(7) Carla Amthor	5	_	-		<u> </u>		-			
(8) Michael Palmer	5	✓	-	<u> </u>			<u> </u>	0	0	0
(9) Kenneth Simon	5	√	-	-	-			0	0	0
		1		Ì	}	Ì	1) 0	o	0
(10)Ed Rubenstein	5	1							0	0
(11)Stewart Crowell	5			<u> </u>		<u> </u>	<u> </u>			
(12)		√	-	-	-		-	0	0	0
(13)			-		-			 		
(14)			-	\vdash	-					<u></u>

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees			lighe	st C	ompensated E	mployees (conti	nuea)		
·	(A) Name and title	(B) Average hours per	Position (do not check more than on box, unless person is both a officer and a director/truste		(B) Average hours per hours per week (list any week list any list		to not check more than one ox, unless person is both an officer and a director/trustee) (D) (E) Reportable Reportable compensation compensation		(E) Reportable compensation from related	on from amo			
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	,	other ompensa from the organizate and relate organizate	e ed
(15)								-		L	 -		<u> </u>
(16)											-		<u> </u>
(17)											ļ		
(18)													
(19)					-								
(20)													
(21)													
(22)								-					
(23)		-											
(24)										 			
(25)						\dashv							
1b c	Sub-total		 n A	<u>. </u>	· ·			 	0	0			0
<u>d</u> 2	Total (add lines 1b and 1c)	not limited					above	<u>▶</u>	0 ho received ma		00 of	·	0
3	Did the organization list any former of	ficer, direct							-	-	ı	Ye	s No
4	employee on line 1a? If "Yes," complete S For any individual listed on line 1a, is the organization and related organizations	sum of rep	oortat	ole d	com	per	satio	n a	nd other comp		ne 🗀	3	1
5	Did any person listed on line 1a receive o										al	4	1
Section	for services rendered to the organization? on B. Independent Contractors	r ir res, c	отр	ete .	Scn	eau	ile J 1	or s	ucn person	· · · · · ·	L_	5	ــــــــــــــــــــــــــــــــــــــ
1	Complete this table for your five highest of compensation from the organization. Replyear.												tax
	(A) Name and business add	ress							(B) Description of so	ervices		(C) censation	1
2	Total number of independent contractor	•	-					th	ose listed abo	ove) who			

Form **990** (2013)

Par	VIII	Statement of Revenue				~
<u> </u>		Check if Schedule O contains a response or note to	to any line in this (A) Total revenue	Part VIII (B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
क क	1a	Federated campaigns 1a			 	1
ĒŽ	Ь	· · · · · · · · · · · · · · · · · · ·	5			
۾ ٽي ڪ	С	· • • • • • • • • • • • • • • • • • • •	5		į.	
ar A	d	Y	5			
S, E	e	Government grants (contributions) 1e 1820	d 1]	
<u>8</u> 8	f	All other contributions, gifts, grants,	1			}
bet Be	ŀ	and similar amounts not included above 1f 7660				
<u>_</u> <u>_</u> <u>_</u> <u>_</u> <u>_</u> <u>_</u> <u>_</u> <u>_</u> <u>_</u> <u>_</u>	g	Noncash contributions included in lines 1a-1f: \$	1		l	-
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a–1f ▶	78429		ļ	
		Business Code	1			
en e	2a	Tax Levy	319125		ţ	
æ	b	Operational fines/coples/etc	9918		·	ļ
<u>.2</u>	c	Books Alive! Children's program	6001		 	
Š	d					
Ē	е					T
Program Service Revenue	f	All other program service revenue .				
5	g	Total. Add lines 2a–2f ▶	335044			······································
	3	Investment income (including dividends, interest, and other similar amounts)	1204			
	4	Income from investment of tax-exempt bond proceeds ▶	0			<u> </u>
	5	Royalties	0			
	1	(i) Real (ii) Personal	 			
	6a	Gross rents	1		1	1
	b	Less: rental expenses	1 1		1	
	С	Rental income or (loss)	1			
	d	Net rental income or (loss)	اه ا		ĺ	
	7a	Gross amount from sales of (i) Securities (ii) Other				
	<u> </u>	assets other than inventory	1		l	
	b	Less: cost or other basis]		į	
		and sales expenses .]		Į	
	С	Gain or (loss)		_		İ
	d	Net gain or (loss)	0			ļ
Other Revenue	8a	Gross income from fundraising events (not including \$				}
er Re		of contributions reported on line 1c). See Part IV, line 18 a				
Ě	ь	Less: direct expenses b	1		l	· [
O	С	Net income or (loss) from fundraising events . >	1 0		İ	1
	9a	Gross income from gaming activities.				1
		See Part IV, line 19 a	1		İ	
	b	Less: direct expenses b	1		ļ	
	С	Net income or (loss) from gaming activities	اه ٦		1	
	10a	Gross sales of inventory, less				
		returns and allowances a	1		1	
	ь	Less: cost of goods sold b]		1	ļ
	С	Net income or (loss) from sales of inventory ▶]			
		Miscellaneous Revenue Business Code				
	11a		582			<u> </u>
	b					
	С					
	d	All other revenue				<u> </u>
	е	Total. Add lines 11a–11d ▶	582			
	12	Total revenue. See instructions ▶	415259		1	1

Part IX Statement of Functional Expenses

Section	n 501(c)(3) and 501(c)(4) organizations must com				
	Check if Schedule O contains a respons				
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	200	200		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	183352	113986	66785	2581
9	Other employee benefits	8553		8553	
10	Payroll taxes [15454		15454	
11	Fees for services (non-employees):				
а	Management	125		125	
b	Legal				
C	Accounting				··
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees		·		
g	Other. (If line 11g amount exceeds 10% of line 25, column		ĺ		
	(A) amount, list line 11g expenses on Schedule O.)	772		772	
12	Advertising and promotion	1901	679	1222	
13	Office expenses	12642	1500(12642	
14	Information technology	15986	15986		
15 16	Royalties	7905		7905	
17	Travel	1714		1714	
18	Payments of travel or entertainment expenses			1/14	
	for any federal, state, or local public officials		ł		
19	Conferences, conventions, and meetings	569		569	
20	Interest		·		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1645		1645	
23	Insurance	7965		7965	
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.)				
а	Books/DVDs/Magazines/etc	25783	25783		
b	Program Expense	14190	14190		······································
C	Landscaping & Building Maintenance	9672		9672	
d					
е	All other expenses bank fees/dues/etc	2040		2040	
25	Total functional expenses. Add lines 1 through 24e	310468	170824	137063	2581
26	Joint costs. Complete this line only if the 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)				

Р	art X					
		Check if Schedule O contains a response or	note to any line in this Par	rt X		
				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	12049	1	11301	
	2	Savings and temporary cash investments	323169	2	431565	
	3	Pledges and grants receivable, net	[3	
	4	Accounts receivable, net		4		
	5	Loans and other receivables from current and trustees, key employees, and highest co-Complete Part II of Schedule L	i	5		
Assets	6	Loans and other receivables from other disqualified pers 4958(f)(1)), persons described in section 4958(c)(3)(B), ar sponsoring organizations of section 501(c)(9) volur organizations (see instructions). Complete Part II of Sche	nd contributing employers and tary employees' beneficiary		6	
	7	Notes and loans receivable, net			7	
As	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1984			
	ь	Less: accumulated depreciation	10b 1786	578	10c	198
	11	Investments—publicly traded securities			11	· · · · · · · · · · · · · · · · · · ·
	12	Investments-other secunties. See Part IV, line	11		12	
	13	Investments-program-related. See Part IV, line		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11	[23514	15	22248
	16	Total assets. Add lines 1 through 15 (must equa	359310	16	465312	
	17	Accounts payable and accrued expenses		3667	17	4833
	18	Grants payable			18	
	19	Deferred revenue	[19	·
	20	Tax-exempt bond liabilities	<u></u>	···	20	
	21	Escrow or custodial account liability. Complete			21	
Liabilities	22	Loans and other payables to current and for trustees, key employees, highest compen- disqualified persons. Complete Part II of Schedu	sated employees, and	:	22	
Ë	23	Secured mortgages and notes payable to unrela	<u></u>		23	
	24	Unsecured notes and loans payable to unrelated	· •		24	······································
	25	Other liabilities (including federal income tax, parties, and other liabilities not included on lines	payables to related third s 17-24). Complete Part X			
	}	of Schedule D	L.		25	
_	26	Total liabilities. Add lines 17 through 25		3667	26	4833
ces		Organizations that follow SFAS 117 (ASC 958 complete lines 27 through 29, and lines 33 and	d 34.			
au	27	Unrestricted net assets		355643		460479
Ba	28	Temporarily restricted net assets	F		28	
Net Assets or Fund Balances	29	Permanently restricted net assets	L-		29	
ts (30	Capital stock or trust principal, or current funds			30	
š	31	Paid-in or capital surplus, or land, building, or ed		31		
Ą	32	Retained earnings, endowment, accumulated in		32		
Ş	33	Total net assets or fund balances		355643	33	460479
_	34	Total liabilities and net assets/fund balances .	<u></u>	359310	34	465312
				 		Form 990 (2013)

of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in

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.

Schedule O.

2c

3a

Form **990** (2013)

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 2013

Department of the Treasury Internal Revenue Service

Open to Public Inspection

taine C	i die organization	Employer identification number
Wallki	Il Public Library	14-6018441
Par	t I Organizations Maintaining Donor Advised Funds or Other Similar Fur	ds or Accounts.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year) .	
		·
3	Aggregate grants from (dunng year)	_
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets h	10
	funds are the organization's property, subject to the organization's exclusive legal control	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grantees	
	only for charitable purposes and not for the benefit of the donor or donor advisor, or f	or any other purpose
	conferring impermissible private benefit?	· · · · · · D Yes 🛚 No
Par	t II Conservation Easements.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (e.g., recreation or education)	f an historically important land area
		f a certified historic structure
	☐ Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution	on in the form of a conservation
_	easement on the last day of the tax year.	Held at the End of the Tax Year
_		
a		2a
b	Total acreage restricted by conservation easements	
C	Number of conservation easements on a certified historic structure included in (a)	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not	1 1
_	historic structure listed in the National Register	
3	Number of conservation easements modified, transferred, released, extinguished, or terr	ninated by the organization during the
	tax year >	
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, ins	·
_	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation	easements during the year
)	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation ease	ements during the year
_	> \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements	. ,
	(i) and section 170(h)(4)(B)(ii)?	· · · · · · · · · · · · · · · · · · ·
9	In Part XIII, describe how the organization reports conservation easements in its revenue	and expense statement, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's fir	ancial statements that describes the
	organization's accounting for conservation easements.	
Part		Other Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its	revenue statement and balance sheet
	works of art, historical treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of
	public service, provide, in Part XIII, the text of the footnote to its financial statements that	t describes these items.
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its	revenue statement and balance sheet
	works of art, historical treasures, or other similar assets held for public exhibition, ed	
	public service, provide the following amounts relating to these items:	
		▶ \$
	(i) Revenues included in Form 990, Part VIII, line 1	
2	If the organization received or held works of art, historical treasures, or other similar	r assets for financial dain provide the
_	following amounts required to be reported under SFAS 116 (ASC 958) relating to these if	
_	· · · · · · · · · · · · · · · · · · ·	
a	Revenues included in Form 990, Part VIII, line 1	· · · · > \$
D	Assets included in Form 990, Part X	

_	
	-

Part	III Organizations Maintaining Coll							
3	Using the organization's acquisition, accessoration items (check all that apply):	ssion, and oth	er record	ds, chec	k any of the	follow	ring that are a s	ignificant use of its
а	✓ Public exhibition		d [Loan	or exchange	progr	ams	
b	✓ Scholarly research		е [] Other	,			
C	☐ Preservation for future generations							
4	Provide a description of the organization's XIII.	s collections ar	nd explai	n how th	ney further th	ne org	anızatıon's exem	npt purpose in Part
5	During the year, did the organization solic assets to be sold to raise funds rather than	cit or receive d n to be maintair	onations ned as pa	of art, I art of the	historical trea e organization	asures n's co	s, or other similal lection?	r ☐ Yes ☑ No
Part								
	Complete if the organization ans 990, Part X, line 21.							
1a	Is the organization an agent, trustee, cust included on Form 990, Part X?							
b	If "Yes," explain the arrangement in Part XI	ill and complet	e the foll	owing ta	ıble:			
						<u> </u>	Aı	nount
C	Beginning balance					1c		
d	Additions during the year					1d		
е	Distributions during the year					<u>1e</u>		
f	Ending balance					1f		
	Did the organization include an amount on							
	If "Yes," explain the arrangement in Part XI	III. Check here	if the ex	olanation	has been p	rovide	d in Part XIII .	<u> </u>
Part	V Endowment Funds.							
	Complete if the organization ans							
		Current year	(b) Prior	year	(c) Two years	back	(d) Three years back	(e) Four years back
	Beginning of year balance				·			
	Contributions						··	
С	Net investment earnings, gains, and losses						· · · · · · · · · · · · · · · · · · ·	
	Grants or scholarships							<u> </u>
е	Other expenditures for facilities and programs							
f	Administrative expenses							
g	End of year balance						·	<u> </u>
2	Provide the estimated percentage of the cu			(line 1g	, column (a))	held a	ıs:	
а	Board designated or quasi-endowment ▶		%					
b	Permanent endowment ▶%	5						
C	Temporarily restricted endowment ▶	%						
	The percentages in lines 2a, 2b, and 2c sho							
3a	Are there endowment funds not in the pos	ssession of the	organiz	ation tha	it are held ar	nd adı	ninistered for th	e
	organization by:							Yes No
	(i) unrelated organizations							3a(i)
	(ii) related organizations							3a(ii)
b	If "Yes" to 3a(ii), are the related organization							3b
4	Describe in Part XIII the intended uses of the		n's endo	vment fu	ınds.			·
Part								
	Complete if the organization ans	wered "Yes"	to Form	990, P	art IV, line 1	11a. S	ee Form 990,	Part X, line 10.
	Description of property	(a) Cost or othe (investment		• •	r other basis ther)		ccumulated preciation	(d) Book value
1a	Land							
b	Buildings							
C	Leasehold improvements							
d	Equipment							
ө	Other							
Total	Add lines to through te (Column to) must a	equal Form 991	0 Part Y	column	(B) line 10/c	-11		

Part VII	Investments — Other Securities. Complete if the organization answ	vered "Yes" to For	n aar) Part IV line	11h See Form	990 Part Y line 12
	(a) Description of security or category (including name of security)	10100 100 101011) Book value	(c) Me	thod of valuation:
(1) Expensed	·				COSt OF ERIC	-or-year market value
(1) Financial	1.1 - 1 - 1 - 1 - 1 - 1		ļ			
	• •					
(A)	***************************************		<u> </u>			
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
	b) must equal Form 990, Part X, col. (B) line 12.)		L			
Part VIII	Investments—Program Related		001		44 0 . 5	000 D. I.V. II. 40
	Complete if the organization answ	vered "Yes" to For			, 	
	(a) Description of investment		(b	Book value		thod of valuation: l-of-year market value
(1)						
(2)						
(3)						
<u>(4)</u> <u>(5)</u>		· · · · · · · · · · · · · · · · · · ·				
(6)					 	
(7)						
(8)						
(9)						
	b) must equal Form 990, Part X, col. (8) line 13.)	 			; E' , A	A 2 . A
Part IX	Other Assets.	- 107- 11- 5-			44.1.0	000 D 1 V II 45
	Complete if the organization answ	Vered Yes" to Fon	n 990), Part IV, line	11a. See Form	990, Paπ X, line 15. (b) Book value
(4)	(a)	Description				(b) BOOK Value
(1)		· 				
(3)				· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
(4)						
(5)						
(6)						
(7)				·· ···· ·····		
(8)						ļ
(9)	this was a selface one Part V and	L (D) line 45)				
Part X	mn (b) must equal Form 990, Part X, co Other Liabilities.	ii. (B) iirie 15.)	· · ·	· · · · · · · · · · · · · · · · · · · 	<u>····</u>	<u> </u>
Part A	Complete if the organization answ	vered "Ves" to For	m QQ() Part IV line	110 or 11f See	Form 990 Part Y
	line 25.	vered res to ron	11 550	, i art iv, iii e	5 116 OI 111. Oed	or onn 330, rait A,
1.	(a) Description of liability	(b) Book value				
(1) Federal in	icome taxes					
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
	b) must equal Form 990, Part X, col. (B) line 25.)					
	r uncertain tax positions. In Part XIII, provid	de the text of the footn	ote to	the organization	n's financial stateme	ents that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

m 990) 2013	Page 5
Supplemental Information (continuea)	
······································	
	-

	Supplemental Information (continued)

SCHEDULE O (Form 990 or 990-EZ)

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.

2013

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization	Employer identification number
Wallkill Public Library	14-6018441
Part VI Section A line 7a - The trustees of the board of the Wallkill Public Library are elected by the pat	rons of the library who qualify
and are registered to vote.	
Part VI Section B line 11b - The completed 990 is in the trustees' board book and is available for any book	pard member at any time the library
is open	
Part VI Section B line 12c - As issues are raised at board meetings, trustees recuse themselves from d	ecision making when there is
a conflict of interest	
Part VI Section C line 19 - Throughout the year, policies, documents, and financial statements are available.	lable to the public upon request
In addition, the financial statements and minutes from monthly board meetings are posted on the libra	rv's website
	·
·	
,,,	
·	

Schedule O (Form say or say-rez) (2015)		Page 4
Name of the organization Wallkill Public Library	Employer identification number	
Walkill Public Library	14-6018441	

	~	
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
***************************************		
	·	
······		