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Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047

▶ 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.

Open to Public Inspection

A F	or the	2013 calendar year, or tax year beginning JUL 1, 2013 and endin	g <u>J</u> UN 30,	2014	
Bo	pplicable	C Name of organization	D Employer	identific	ation number
	Address change Name change	FRIENDS OF THE TROY PUBLIC LIBRARY  Doing Business As		38-60	091389
	Initial return Termin- ated Amende	Number and street (or P.O. box if mail is not delivered to street address)  PO BOX 4445		130868	
	Jreturn Application pending	TROY, MI 48099	G Gross receipts H(a) Is this a g	group ret	
1 T	ax-exei	5145 BUCKINGHAM, TROY, MI 48098  mpt status: X 501(c)(3)	H(b) Are all subo	ordinates inc	
ΚF	orm of c	e: ► N/A  organization; X Corporation Trust Association Other ► L	H(c) Group ex		number  State of legal domicile: MI
Pa	ırt I	Summary			
Activities & Governance	]	inefly describe the organization's mission or most significant activities: TO PROV PATRONS ON THE TROY PUBLIC LIBRARY.			
Ĕ	2 (	theck this box 🕨 📖 if the organization discontinued its operations or disposed of	more than 25% of it	s net as	sets.
Š.	3 1	lumber of voting members of the governing body (Part VI, line 1a)		. 3	9
Ğ	4 1	lumber of independent voting members of the governing body (Part VI, line 1b)		4	9
ος O		otal number of individuals employed in calendar year 2013 (Part V, line 2a)		5	0
itie	1	otal number of volunteers (estimate if necessary)	•	6	0
휹		otal unrelated business revenue from Part VIII, column (C), line 12		7a	0.
ĕ	ľ	let unrelated business taxable income from Form 990-T, line 34	• •••	7b	0.
		tot difficulted business taxable meeting with Fermi ede 1, into e 7	Prior Year		Current Year
	ے ا	Contributions and grants (Part VIII line 1h)	Frior real	0.	240,870.
Ë		contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)		0.	
ě	1				0.
Ř		ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c and 14e).		_0.	171.
<u> </u>	11 (	7, 100 100 (1 art viii, 30 art		0.	77,127.
4015Revenue		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) من المعاددة المعادد		0.	318,168.
≔		Frants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14 E	lenefits paid to or for members (Part IX, column (A), line 4) 2DEN, UT		0.	<u> </u>
WINE Experses 1	15 8	salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	<u> </u>
18	16a F	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
_ <del>0</del>	ьт	otal fundraising expenses (Part IX, column (D), line 25)			
	17 (	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		0.	74,703.
2	I	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		0.	74,703.
		Revenue less expenses. Subtract line 18 from line 12		0.	243,465.
SS	,,,,		Beginning of Curre		End of Year
SE SE	20 T	otal assets (Part X, line 16)	242,		471,384.
ASS Bas	21 T	otal liabilities (Part X, line 26)		0.	0.
Net Assets of Nund Balances	21 1	let assets or fund balances. Subtract line 21 from line 20	242,		471,384.
	22 N art II	Signature Block	444,	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	4/1,304.
		ties of perjury, I declare that I have examined this return, including accompanying schedules and	tatamanta and to the h		Leanulades and ballet it is
	•			-	knowledge and belief, it is
true,	, correct	, and complete. Declaration of preparer (other than officer) is based on all information of which pr	eparer has any knowled	1757	
	1	Surfative of affiner	Data	1121	15
Sig	n	Signature of officer	Date	,	
Her	e	SUE MARTIN, PRESIDENT			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	Date	Check	PTIN
Paid	ı <u>k</u>	CRAIG S. SKULSKY	11/13/14	self-employe	D00084688
Prep	arer [	Firm's name TOBIAS, VANDEPUTTE & SKULSKX, F.C.	Firm's	EIN 🛌	38-2049989
Use	Only	Firm's address 5455 CORPORATE DR #300			
		TROY, MI 48098-2620	Phone	no. ( 2.	48)641-8400
May	the IR	S discuss this return with the preparer shown above? (see instructions)	1,		. X Yes No
				**********	

D	990 (2013) FRIENDS OF THE TROY PUBLIC LIBRARY	<u> 38-6091389</u>	Page 2
rar	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		<u> </u>
1	Briefly describe the organization's mission:		
	TO PROVIDE PROGRAMS AND SERVICES TO PATRONS ON THE TROY	PUBLIC	
	LIBRARY.		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the pnor Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
_	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by expenses	:
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		
	revenue, if any, for each program service reported.	no, and total expenses,	und
4a	(Code) (Expenses \$		
44		CLUDING ALL	
	SUPPLIES, PRESENTATIONS AND READING PROGRAMS.	CHODING WITH	
	SUPPLIES, PRESENTATIONS AND READING PROGRAMS.		
		<del></del>	
4h	(Code ) (European \$ 16.869 - including ground of \$ ) (Daylor		
4b	(Code ) (Expenses \$ 16,869 including grants of \$ ) (Revenue POCE AM TO RENEETT ALL LIBRARY VOLUME PATRONS TAKEN		)
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Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? Is the organization required to complete Schedule B, Schedule of Contributors X 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for X Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect dunng the tax year? If "Yes," complete Schedule C, Part II X 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III X 5 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to X provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete 8 X Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for 9 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 Х 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 X If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, X 11a 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 X 11b c 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 Х 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 Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X X 11e 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 X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X 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 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Х 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a 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 ...... X 14b 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 X 15 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 X 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I ... ... .... .... 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 18 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 19 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a

If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Form 990 (2013)

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	İ		
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,		ļ	
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	L	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	1	1	
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
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		Х
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year 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		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			<u> </u>
_	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	1		l
	Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
20	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,	1	}	}
	complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		
27	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member		ļ	
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
00	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	27	<del> </del>	
28	instructions for applicable filing thresholds, conditions, and exceptions):		l	
_	A STATE OF THE STA	202		v
a	At the state of th	28a	<del> </del> -	X
b	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	28b	<u> </u>	
С		00-		v
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c	v	X
29		29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		l	
	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		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			٠,,
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			٠,
	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, Part II, III, or IV, and		}	
	Part V, line 1	34		<u> X</u>
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
þ	If "Yes" to line 35a, 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		—
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	<u> </u>	<u> </u>
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	<del>                                     </del>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>
		E ~~~	. uuri	(2012)

332004 10-29-13

Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 8			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	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			
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)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	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 account)?	_4a		<u>X</u>
	If "Yes," enter the name of the foreign country: ►		i	
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<u>X</u>
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		<u>X</u>
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	_		v
	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		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7b		
	to file Form 8282?	70		х
	If "Yes," indicate the number of Forms 8282 filed during the year	7c		Δ.
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X
	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 organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter:		ĺ	
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders	i		
	Gross income from other sources (Do not net amounts due or paid to other sources against	1		
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?	40-		
	Note. See the instructions for additional information the organization must report on Schedule O.	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the			
	average than in linear and to upon a multiple discussion and the state of the state			
	organization is licensed to issue qualified health plans			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<u> </u>
			990	2013

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			$\mathbf{x}$
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			
	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 0.			
b	Enter the number of voting members included in line 1a, above, who are independent			
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 supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	_3_		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
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?	7a		X
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		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
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		X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		_X_
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 conflicts?	12b	<u>X</u>	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c		<u>X</u>
13	Did the organization have a written whistleblower policy?	13		<u>X</u>
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?			
а	The organization's CEO, Executive Director, or top management official	15a		<u>X</u>
b	Other officers or key employees of the organization	15b		<u>X</u>
	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 with a			
	taxable entity during the year?	16a		<u>X</u>
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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►MI			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and 990-T (Section 501(c)(3)s only) are	ıvaılab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finan	cial	
	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 organiza	tion: 🕨	·	
	<u>KIM YANCHYSHYN - 248-879-9476</u>			
	805 DREW DRIVE, TROY, MI 48098			
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## 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.

X Check this box if neither the organiz  (A)  Name and Title	(B) Average hours per	(C) Position (do not check more than one box, unless person is both an					one	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer Officer	recto	Highest compensated capital and captured capture	tee)	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) SUE MARTIN	16.00									
PRESIDENT		X		X			<u> </u>	0.	0.	0
(2) EVE PARSONS	15.00	1								
VICE PRESIDENT		X	_	X		<u> </u>		0.	0.	0
(3) KIM YANCHYSHYN	17.00	1					}			
TREASURER		X	_	X				0.	0.	0.
(4) APRIL CHURCH	17.00					'				
SECRETARY		X		X				0.	0.	0
(5) DORAL ABRAHIM	15.00							_		
DIRECTOR	15.00	X	-			_		0.	0.	0.
(6) SHARON ALTMAN	16.00		ŀ							
DIRECTOR	16.00	X	<u> </u>					0.	0.	0.
(7) CATHY CARNACCHI	16.00	.,								_
DIRECTOR	17.00	X	-			<u> </u>		0.	0.	0.
(8) MIMI DOHERTY	17.00	X								•
DIRECTOR	15.00	^						0.	0.	0
(9) BILL VAN HORNE	13.00	X						0.	ا م	0
DIRECTOR		^				$\vdash$		U.	0.	0
		1								
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	*	<u> </u>								
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	(2013) FRIENDS OF TH	E TROY PU	JBLIC LIBRA	ARY	38-6091	.389 Page
art V						_
	Check if Schedule O contains a response	or note to any line	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business	Revenue exclud from tax unde sections
1 1	a Federated campaigns 1a b Membership dues 1b	3,108.		revenue	revenue	sections 512 - 514
llar Am	c Fundraising events 1c d Related organizations 1d					
E E	e Government grants (contributions)  f All other contributions, gifts, grants, and					
=	similar amounts not included above	237,762. 236,742.	240,870.			
		Business Code	240,070.		<del></del>	
	b					
	c					
ě é	d					
<u>-</u> ] ,	e					
1	f All other program service revenue					
	g Total. Add lines 2a-2f					
3 4	Investment income (including dividends, interest other similar amounts)  Income from investment of tax-exempt bond p	▶ _	171.	171.		
5	Royalties	(ii) Personal				
6	•					
1 1	Less rental expenses					
(	Rental income or (loss)					İ
(	d Net rental income or (loss)	▶				
7 8	a Gross amount from sales of (i) Securities	(ii) Other				
	assets other than inventory					
'	Less: cost or other basis and sales expenses					
١,	Gain or (loss)		:			
4	d Net gain or (loss)	<b>•</b>				
. ما	a Gross income from fundraising events (not including \$ of					
8	contributions reported on line 1c). See					
	Part IV, line 18 a					
1	b Less: direct expenses b		Į	ļ		
1	Net income or (loss) from fundraising events					
9 6	Gross income from gaming activities. See	1				
.	Part IV, line 19 a	<b></b>				
	b Less: direct expenses b	•				
	<ul> <li>Net income or (loss) from gaming activities</li> <li>Gross sales of inventory, less returns</li> </ul>	· ·				
10 8	and allowances					
l t	Less: cost of goods sold b					
1	Net income or (loss) from sales of inventory					ļ
		Business Code				
11 a	NET BOOK SHOP SALES	451211	60,639.	60,639.		
t		453220	16,488.	16,488.		
4		ļ <u>.</u>				
(	All other revenue	<u> </u>	55 455			
1	Total. Add lines 11a-11d	· · 🟲 📙	77,127.	75.000		ļ
12	Total revenue. See instructions.		318,168.	77,298.	0.	Form <b>990</b> (20

Secti	on 501(c)(3) and 501(c)(4) organizations must comp			mplete column (A).	X
	Check if Schedule O contains a respons	(A)	(B)	(C)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	( <b>D)</b> 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				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	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	Other salanes and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				<del></del>
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal				<del></del>
С	Accounting	159.		159.	
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,			1	
	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion				
13	Office expenses	7,903.		7,903.	
14	Information technology .				
15	Royalties				
16	Occupancy				
17	Travel		·		· · · · · · · · · · · · · · · · · · ·
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	100			
19	Conferences, conventions, and meetings	108.		108.	·
20	Interest				
21	Payments to affiliates	2 F17		2 517	
22	Depreciation, depletion, and amortization	3,517.		3,517.	
23	Insurance	1,659.		1,659.	
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	ADULT PROGRAM EXPENSES	17,121.	17,121.		
Ь	YOUTH PROGRAM EXPENSES	16,869.	16,869.		
С	DIRECT PURCHASES PROGRA	7,065.	7,065.		
d	FRIENDS SHOP EXPENSES	7,032.		7,032.	
е	All other expenses SEE SCH O	13,270.	6,243.	7,027.	
25	Total functional expenses. Add lines 1 through 24e	74,703.	47,298.	27,405.	0.
26	Joint costs. Complete this line only if the organization	İ			
	reported in column (B) joint costs from a combined	ļ			
	educational campaign and fundraising solicitation.			į	
	Check here If following SOP 98-2 (ASC 958-720)		-, <del>-</del> ''		

art X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X .	<u> </u>	<del>-</del>	
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	334.	1	334
2	Savings and temporary cash investments	212,774.	2	212,244
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary		1	
,	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
7	Notes and loans receivable, net	<del></del>	7	
8	Investarian for cala avusa	6,861.	8	7,232
9	Prepaid expenses and deferred charges	0,001.	9	1,452
1 *		<del></del>	9	
iva	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 35,862.			
١.		22,366.		14 022
		44,300.		14,833
11	Investments - publicly traded securities		11	226 741
12	Investments - other securities. See Part IV, line 11		12	236,741
13	Investments - program-related. See Part IV, line 11	·· · · · · · · · · · · · · · · · · · ·	13	
14	Intangible assets	· · · · · · · · · · · · · · · · · · ·	14	
15	Other assets. See Part IV, line 11	0.40.005	15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	242,335.	16	471,384
17	Accounts payable and accrued expenses		17	
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22	Loans and other payables to current and former officers, directors, trustees,			
22	key employees, highest compensated employees, and disqualified persons.			
	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	-
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables 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
1	Organizations that follow SFAS 117 (ASC 958), check here ▶			
:	complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets		27	
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
27 28 29 30 31 32	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ 🗶			
	and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds	0.	30	
31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	
32	Retained earnings, endowment, accumulated income, or other funds	242,335.	32	471,384
33	Total net assets or fund halances	242,335.	33	471,384
34	Total liabilities and net assets/fund balances	242,335.	34	471,384
	The second secon	<u> </u>	<u> </u>	Form <b>990</b> (201

	990 (2013) FRIENDS OF THE TROY PUBLIC LIBRARY 38-609	1389	Pag	e 12
Pa	rt XI Reconciliation of Net Assets			
_	Check if Schedule O contains a response or note to any line in this Part XI	<u>.</u>		
1	Total revenue (must equal Part VIII, column (A), line 12)		3,16	
2	Total expenses (must equal Part IX, column (A), line 25)		1,70	
3	Revenue less expenses. Subtract line 2 from line 1		3,40	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4	242	2,3	<u>35.</u>
5	Net unrealized gains (losses) on investments			
6	Donated services and use of facilities			
7	Investment expenses			
8	Prior period adjustments	<14	1,4:	<u> 16.</u> :
9	Other changes in net assets or fund balances (explain in Schedule O)			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	471	1,38	<u>34.</u>
Pa	rt XII Financial Statements and Reporting		-	
	Check if Schedule O contains a response or note to any line in this Part XII			
	<u> </u>		Yes	No
1	Accounting method used to prepare the Form 990:		- [	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		1	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a			
	separate basis, consolidated basis, or both:		ł	
	Separate basis Consolidated basis Both consolidated and separate basis	1 1	1	
b	Were the organization's financial statements audited by an independent accountant?	2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis,			
	consolidated basis, or both:	1 1		
	Separate basis Consolidated basis Both consolidated and separate basis		l	
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.			
За	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		X
ь	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	3b		
		Form	990 (2	2013)

#### 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.

2013

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name of t	the organizat	ion						E	mployer	r identificati	on nu	mber
			OF THE TROY						3	8-6091	389	)
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this par	t.) See ins	tructions.				
The organ		•	because it is: (For lines 1	•	•	•	•					
-1			s, or association of church			ction 170	(b)(1)(A)(i)	).				
2 🖳			<b>70(b)(1)(A)(ii).</b> (Attach Sc									
₃ ∐			ital service organization o									
4 📖			operated in conjunction	with a hos	pıtal desci	nbed in se	ction 170	(b)(1)(A)(ii	i). Enter	the hospital	's nan	ne,
	city, and sta					<u>.</u>						
5 📖												
		(b)(1)(A)(iv). (Compl	•									
6			ent or governmental uni									
7 📖			eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general	public desc	ribed	ın
		(b)(1)(A)(vi). (Comple	•		<b>.</b>							
8 🚽			section 170(b)(1)(A)(vi).						_	_		_
9 [X]			eives: (1) more than 33 1							_		
			nctions - subject to certa	-		-				•		
		509(a)(2). (Complete	axable income (less sect	tion 511 ta	x) from bu	sinesses i	acquired b	y the orga	nization	aπer June 3	0, 197	75.
40		, ,, , ,	perated exclusively to te	et for publi	o oofotu S	en anatia	- F00/-V	41				
10			perated exclusively to te					•				
السلا اا			ations described in section									or
			organization and comple				-). Occ <b>se</b> (	Jeoe House	a)(3). Oi	IECK IIIE DOX	liial	
	a Type	· · · · · · · · · · · · · · · · · · ·		ype III - Fu	•				e III - No	n-functional	v inter	orateo
e 🗀			at the organization is not		-	_						
			han one or more publicly									
f			tten determination from t						(-,(-,		(-/(-/-	
	=	rganization, check th										
g	Since Augus	t 17, 2006, has the o	organization accepted ar	ny gift or co	ontribution	from any	of the follo	owing pers	sons?	•	•	
	(i) A perso	n who directly or ind	lirectly controls, either al	one or tog	ether with	persons o	described	in (II) and (	iii) below	<b>,</b>	Yes	No
	the gov	erning body of the s	upported organization?							11g(i)		
	(ii) A family	member of a person	n described in (i) above?	•						11g(ii)		
	(iii) A 35%	controlled entity of a	person described in (i) o	or (II) above	∍?				-	11g(iii)		
h	Provide the f	following information	about the supported or	ganization	(s).							
		T	<del></del>	·				·····		T		
(i) Name	of supported	(ii) EIN	(iii) Type of organization		organization			(vi) Is organization		(vii) Amount	of mo	netary
orga	anızatıon		(described on lines 1-9 above or IRC section	In col. (1) III	sted in your document?	organizai	ion in col.	(i) organiz	ed in the	sup	port	
			(see instructions))					U.S				
	<del> </del>		<u> </u>	Yes	No	Yes	No	Yes	No			
		1		ľ								
_				<del> </del>	-	<del></del>	<del> </del>	-	<del>                                     </del>			
	<del></del>	-							-			
			<del>                                     </del>	<del> </del>		<u> </u>		<del></del>	<del></del>			
			}				1					
				1				-			<del></del>	
								1				
	<del></del>	<del> </del>			<del>                                     </del>		<del>                                     </del>		<del>                                     </del>	<del></del>		
Total		<u> </u>	1							ŀ		
	Paperwork Re	duction Act Notice	, see the Instructions f	or				Schedul	e A /For	m 990 or 99	n.F7	2012
	or 990-EZ.								- 11 (1 01	555 61 55	·	, EU 10

Schedule A (Form 990 or 990-EZ) 2013 FRIENDS OF THE TROY PUBLIC LIBRARY 38-6091389 Page 2

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
	Gifts, grants, contributions, and							
	membership fees received. (Do not			1				
	include any "unusual grants.")				<u></u>			
2	Tax revenues levied for the organ-	_						
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities		· · · · · · · · · · · · · · · · · · ·					
	furnished by a governmental unit to							
	the organization without charge			<u></u>				
4	Total. Add lines 1 through 3					I		
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							
	tion B. Total Support							
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
7	Amounts from line 4					<u></u>		
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					1		
	or loss from the sale of capital							
	assets (Explain in Part IV.)	·		ļ				
11	Total support. Add lines 7 through 10			<u> </u>				
	Gross receipts from related activities,					12		
13	First five years. If the Form 990 is for		s first, second, thi	rd, fourth, or fifth t	ax year as a section	n 501(c)(3)		
_	organization, check this box and stop	here .		<u> </u>		· <b>–</b>		
	ction C. Computation of Publ	·				1		
	Public support percentage for 2013 (I	,	•	column (f))		14	%	
-	Public support percentage from 2012		•			15	%	
16a	33 1/3% support test - 2013. If the c				14 is 33 1/3% or r	nore, check this bo	ox and	
	stop here. The organization qualifies		-	•			▶∟ .	
b	33 1/3% support test - 2012. If the conditions are the second start have the second start of supplier than supplier to the second start of the sec				a line 15 is 33 1/3%	or more, check the	nis box	
	and stop here. The organization quali	•		•			▶∟	
17a	10% -facts-and-circumstances test							
	and if the organization meets the "fact					л IV now the orgai	nization	
	meets the "facts-and-circumstances"  10% -facts-and-circumstances test						100/ 0"	
0	more, and if the organization meets the							
	organization meets the "facts-and-circ							
12	Private foundation. If the organization							
10	Filvate louissason. It the organizatio	did not check a	CON OIT INTO 10, 10	, 100, 17a, 01 17		edule A (Form 990		
					SCIII	222 W (1 O1 III 936	. J. 650-EL) 2013	

(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 b	elow, please comp	lete Part II)				
Se	ction A. Public Support	<del>,</del>					
Cale	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and	İ					
	membership fees received. (Do not	]	ļ				
	include any "unusual grants.")	350.	3,923.	5,629.	4,787.	240,870.	255,559.
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	101,332.	69,358.	60,395.	70,221.	77,127.	378,433.
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness 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	101,682.	73,281.	66,024.	75,008.	317,997.	633,992.
	Amounts included on lines 1, 2, and		,		<u> </u>	02.75570	
	3 received from disqualified persons						0.
t	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						0.
	Add lines 7a and 7b						0.
	Public support (Subtract line 7c from line 6)						633,992.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 6	101,682.	73,281.	66,024.	75,008.	317,997.	633,992.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties		012			-	
	and income from similar sources	4,107.	913.	941.	219.	171.	6,351.
b	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is	4,107.	913.	941.	219.	171.	6,351.
12	regularly carried on 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)	105,789.	74,194.	66,965.	75,227.	318,168.	640,343.
14	First five years. If the Form 990 is for	r the organization's	first, second, third	d, fourth, or fifth ta			
	check this box and stop here						<b>▶</b> □
	ction C. Computation of Publ			· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	
15	Public support percentage for 2013 (	• • • • • • • • • • • • • • • • • • • •	•	olumn (f))		15	99.01 %
16					·	16	<u>98.31 %</u>
	ction D. Computation of Inve	···			<del></del> .		<del></del>
17	Investment income percentage for 20			e 13, column (f))		17	<u>.99 %</u>
18	Investment income percentage from	•				18	<u>1.69 %</u>
19a	33 1/3% support tests - 2013. If the						
	more than 33 1/3%, check this box a				· · · · · ·	• • • • • • • • • • • • • • • • • • • •	<b>▶</b> LX
b	33 1/3% support tests - 2012. If the					•	
	line 18 is not more than 33 1/3%, che						▶∐
	Private foundation. If the organization	on did not check a l	oox on line 14, 19a	a, or 19b, check th			
3320	23 09-25-13				Sch	edule A (Form 99	0 or 990-EZ) 2013

Schedule A	(Form 990 or 990-EZ) 2013 FRIENDS	OF THE TRO	OY PUBLIC L	IBRARY	38-6091389 Page 4
Part IV	Supplemental Information. Provide	de the explanations r	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 ins	tructions).		
		·			
				<del></del>	· · · · · · · · · · · · · · · · · · ·
		<u>-</u>		<del></del>	
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			<u> </u>		

#### **SCHEDULE C**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

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

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

➤ See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

f the organization answered "Yes," to Form 990, Part	V, line 3, or Form 990-EZ, Part	V, line 46 (Political Campaign	1 Activities), then
--	---------------------------------	--------------------------------	---------------------

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

9 Section 50 ((c)(4), (5), or (0) organizar	nons. Complete Fait III.			
Name of organization			Emp	loyer identification number
FRIENDS	OF THE TROY PUR	BLIC LIBRARY	7	38-6091389
Part I-A Complete if the org	anization is exempt un	der section 501(c	or is a section 527 o	organization.
2 Political expenditures	FRIENDS OF THE TROY PUBLIC LIBRARY  art I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.  Provide a description of the organization's direct and indirect political campaign activities in Part IV.  Political expenditures  Volunteer hours  Int I-B Complete if the organization is exempt under section 501(c)(3).  Enter the amount of any excise tax incurred by the organization under section 4955  Enter the amount of any excise tax incurred by organization managers under section 4955  If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  Was a correction made?  Yes No			
Part I-B   Complete if the org	anization is exempt un	der section 501(c	)(3)	
1 Enter the amount of any excise tax	incurred by the organization un	der section 4955	▶\$	S
2 Enter the amount of any excise tax	incurred by organization manag	gers under section 495	5 .	S
3 If the organization incurred a section	n 4955 tax, did it file Form 4720	o for this year?		Yes No
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV.				
Part I-C Complete if the org	anization is exempt un	der section 501(c	), except section 501	(c)(3).
1 Enter the amount directly expended	by the filing organization for se	ection 527 exempt fund	ction activities > \$	
2 Enter the amount of the filing organ	ization's funds contributed to o	ther organizations for s	section 527	
exempt function activities			▶\$	<b>;</b>
3 Total exempt function expenditures	. Add lines 1 and 2. Enter here	and on Form 1120-POI	L,	
line 17b			▶\$	;
				Yes No
5 Enter the names, addresses and en	nployer identification number (E	IN) of all section 527 p	olitical organizations to which	the filing organization
contributions received that were pre-	omptly and directly delivered to	a separate political or	ganization, such as a separa	ate segregated fund or a
political action committee (PAC). If	additional space is needed, pro	vide information in Par	t IV.	
(a) Name	(b) Address	(c) EIN	filing organization's	contributions received and promptly and directly delivered to a separate political organization.
	-			

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2013

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Schedule C (Form 990 or 990 EZ) 2013  Part II-A   Complete if the org	ganizati	on is exe	THE TROY PU mpt under section	BLIC_LIBRAR n 501(c)(3) and fil	Y 38- ed Form 5768	6091389	Page 2
A Check I if the filing organiza expenses, and sha	ation belon	ngs to an aff	iliated group (and list in expenditures). nd "limited control" pro		group member's nar	ne, address, E	IN,
Limi	its on Lob	bying Expe			(a) Filing organization's totals	(b) Affiliated totals	
Total lobbying expenditures to infl     Total lobbying expenditures to infl     Total lobbying expenditures (add I     Other exempt purpose expenditure     Total exempt purpose expenditure     Lobbying nontaxable amount. Ent	uence a le ines 1a an es es (add line	gislative bo	dy (direct lobbying) d)				
If the amount on line 1e, column (a)			bying nontaxable amo	7.			
Not over \$500,000		20% of	the amount on line 1e.				
Over \$500,000 but not over \$1,00		\$100,00	00 plus 15% of the exc	ess over \$500,000.			
Over \$1,000,000 but not over \$1,5			00 plus 10% of the exc				
Over \$1,500,000 but not over \$17	,000,000_		00 plus 5% of the exces	ss over \$1,500,000.			
Over \$17,000,000		\$1,000,	000				
g Grassroots nontaxable amount (er h Subtract line 1g from line 1a. If zer i Subtract line 1f from line 1c. If zer j If there is an amount other than ze reporting section 4911 tax for this  (Some organia	o or less, on or less, end or less, end or less, end or either year?	enter -0- enter -0- er line 1h or 4-Year Ave	line 1i, did the organiza eraging Period Under section 501(h) election	Section 501(h)	lete all of the five	Yes [	□ No
co			e instructions for line		ge 4.)		
	LODI	bying Expe	nditures During 4-Yea	r Averaging Period		1	
Calendar year (or fiscal year beginning ın)	(a)	2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) Tot	al
2a Lobbying nontaxable amount			6,262.			6,	262.
b Lobbying ceiling amount (150% of line 2a, column(e))		<del></del>			<del></del>	9,	393.
c Total lobbying expenditures			3,000.			3,	000.
d Grassroots nontaxable amount			1,566.			1	566.
e Grassroots ceiling amount (150% of line 2d, column (e))							349.
			1			1	

Schedule C (Form 990 or 990-EZ) 2013

	Only 990 of 990-CZ/2013 TRIBADD OF THE TROT FUBLIC HIDRARI	<u> </u>
Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT	filed Form 5768
	(election under section 501(h)).	

f the	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a	)	(b	)
	o lobbying activity.	Yes	No	Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?				
ь	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				-
е	Publications, or published or broadcast statements?				- <del>-</del>
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				_
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
ar	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)	5), or se	ction	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		
	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."				e 3, is
	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic	al			
	expenses for which the section 527(f) tax was paid).				
	Current year		. 2a		
ь	Carryover from last year		. 2b		
U	Total	-	1 20		
С			<u>2c</u>		
С	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		20		_
С	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	ess	` -		
с 3	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	ess	` -		
с 3 4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p expenditure next year?	ess	3		
c 3 4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year?	ess	3		
6 3 4 5 Pari	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perpenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  Topplemental Information	ess olitical	4 5		
5 Pari	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year?	ess olitical	4 5	nd Part II-B	, line 1.
3 4 5 Part	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  It IV Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated group)	ess olitical	4 5	nd Part II-B	, line 1.
3 4 5 Part	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  It IV Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated group)	ess olitical	4 5	nd Part II-B	, line 1.
3 4 5 Part	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  It IV Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated group)	ess olitical	4 5	nd Part II-B	, line 1.
3 4 5 Part	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  It IV Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated group)	ess olitical	4 5	nd Part II-B	, line 1.
3 4 5 Part	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  It IV Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated group)	ess olitical	4 5	nd Part II-B	, line 1.

#### **SCHEDULE D**

Department of the Treasury Internal Revenue Service

(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.

Open to Public Inspection

OMB No 1545-0047

	FRIENDS OF THE TROY PUBLIC LIBRARY	38-6091389
Pa	<del></del>	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 (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised fur	nds
	are the organization's property, subject to the organization's exclusive legal control?	L Yes L No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	•
	for chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confer	
D	impermissible private benefit?	Yes No
Pa	<u> </u>	line /.
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)	
	Protection of natural habitat  Preservation of a certified h	istoric structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a contribution in t	onservation easement on the last
	day of the tax year.	Hald and a Fad and a Tank
	Total number of conservation easements	Held at the End of the Tax Year
a	Total acreage restricted by conservation easements	2a
b	Number of conservation easements on a certified historic structure included in (a)	2b   2c
c d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure	20
u	leated in the Netword Decistor	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organ	
•	year >	g the text
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during to	the year ➤
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year	ear <b>&gt;</b> \$
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(l	B)(ı)
	and section 170(h)(4)(B)(ii)?	Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense state	ment, and balance sheet, and
	include, if applicable, the text of the footnote to the organization's financial statements that describes the or	ganization's accounting for
	conservation easements.	
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasures, or 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 a	· ·
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describes these items.	
þ	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and the control of the	
	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public se	ervice, provide the following amounts
	relating to these items.	<b>.</b> .
	(i) Revenues included in Form 990, Part VIII, line 1	
•	(ii) Assets included in Form 990, Part X	provide
2	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	Piovide
_	Revenues included in Form 990, Part VIII, line 1	▶ €
a b	Assatz makidad in Form 000 Port V	. • •
D	Assets included in Form 990, Fart X	<b>–</b> •

Schedule D (Form 990) 2013

		OF THE TR							<u> </u>	
Par	t III Organizations Maintaining C									
3	Using the organization's acquisition, accessi	on, and other record	ls, check	any of the	following that	ıt are a s	ignificar	nt use of its	collection i	tems
	(check all that apply):									
а	Public exhibition	d			hange progra					
b	Scholarly research	е		Other						
C	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	n how th	ey further t	he organizatı	on's exe	mpt pui	pose in Pa	rt XIII.	
5	During the year, did the organization solicit of					er simıla	r assets	_	_	
	to be sold to raise funds rather than to be ma					<u> </u>			Yes	No_
Pai	t IV Escrow and Custodial Arran		ete if the	organizatio	on answered	"Yes" to	Form 9	90, Part IV,	line 9, or	
	reported an amount on Form 990, Par									
1a	Is the organization an agent, trustee, custodi		-				include	d _	_	
		· · · · · · · · · · · ·						. L	Yes	∟ No
þ	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing t	able:				т		
							<u> </u>		Amount	<del></del>
c	Beginning balance						. <u>1c</u>	ļ		
d	Additions during the year			•			1d	<b>. </b> -		
е	Distributions during the year		••				. <u>1e</u>			
f							. <u>1</u> f			
	Did the organization include an amount on Fo								Yes	<u></u>
	If "Yes," explain the arrangement in Part XIII.							<del></del>		
Par	t V Endowment Funds. Complete in								T	<del></del>
		(a) Current year	(b) P	nor year	(c) Two year	rs back	(d) Thre	e years back	(e) Four y	ears back
1a	Beginning of year balance				ļ					
b	Contributions								ļ	
С	Net investment earnings, gains, and losses				ļ				<del></del>	
đ	Grants or scholarships				<del> </del>		<del>_</del>		ļ	
е	Other expenditures for facilities								1	
	and programs								<del> </del>	
f	Administrative expenses				<u></u>	<del></del>			<del>                                     </del>	
g	End of year balance [				<u></u>				<u> </u>	
2	Provide the estimated percentage of the curr		e (line 1	g, column (	a)) held as:					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Temporarily restricted endowment	%								
	The percentages in lines 2a, 2b, and 2c should	•					_			
3а	Are there endowment funds not in the posse	ssion of the organiza	ation tha	it are held a	and administe	ered for t	he orga	nization	<u></u>	
	by:									es No
	(i) unrelated organizations		•				• •		3a(i)	
	(ii) related organizations							•	3a(ii)	-
b	If "Yes" to 3a(ii), are the related organizations								. 3b	
<u>4</u>	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		owment 1	lunds.		<del></del>				<del></del>
Pai			. D4 0.4			. 5	r. 40			
	Complete if the organization answered									
	Description of property	(a) Cost or o		\ - <b>/</b>	t or other (other)	1	ccumul	1	(d) Book	/alue
	Land	Dans (IIIVESII	.iony	Dasis	(Ott 101)	ue	preciation	<i>7</i> 11	<del></del>	
	Land						<u> </u>		<del></del>	<del></del>
	Buildings	•		-	5 462		10	420		022
C	Leasehold improvements				25,462.		TQ,	429.		<u>,033.</u>
	Equipment	··		4	0,400.	<del></del>		500		900
	Other (Add known to through 10 (Column (d) must o	aud Form 000 Port	V 001::-			L		600.		<u>.800.</u>
<u>Tota</u>	. Add lines 1a through 1e (Column (d) must e	quai rom 990, Part	X, colun	nn (B), line	<u> 1υ(c) )</u>			🗨 📗	14	<u>,833.</u>

FTPL

Sche	dule D (Form 990) 2013 FRIENDS OF THE TROY PUBLIC		<u> 38-609138</u>	
Paı	t XI Reconciliation of Revenue per Audited Financial Statemen	nts With Revenue pe	r Return.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.			
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
C	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines to and the		. 4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		. 5	
Pai	t XII Reconciliation of Expenses per Audited Financial Stateme	ents With Expenses p	er Return.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.			
1	Total expenses and losses per audited financial statements		. 1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
ď	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d			
3	Subtract line 2e from line 1		3	
	Amounts included on Form 990, Part IX, line 25, but not on line 1:			· · · · · · · · · · · · · · · · · · ·
4		1 4-1		
4 a	Investment expenses not included on Form 990, Part VIII, line 7b	<del>4</del> a		
	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	4a 4b		
a b	Other (Describe in Part XIII.)	4b	4c	
a b	Other (Describe in Part XIII.)  Add lines <b>4a</b> and <b>4b</b>	4b	4c 5	
b c 5 Pai	Other (Describe in Part XIII.)  Add lines 4a and 4b	V, lines 1b and 2b; Part V, li	5	art XI,
a b c 5 Pai	Other (Describe in Part XIII.)  Add lines 4a and 4b	V, lines 1b and 2b; Part V, li	5	art XI,
a b c 5 Pai	Other (Describe in Part XIII.)  Add lines 4a and 4b	V, lines 1b and 2b; Part V, li	5	art XI,
a b c 5 Pai	Other (Describe in Part XIII.)  Add lines 4a and 4b	V, lines 1b and 2b; Part V, li	5	art XI,
a b c 5 Pai	Other (Describe in Part XIII.)  Add lines 4a and 4b	V, lines 1b and 2b; Part V, li	5	art XI,
b c 5 Pai	Other (Describe in Part XIII.)  Add lines 4a and 4b	V, lines 1b and 2b; Part V, li	5	art XI,
b c 5 Pai	Other (Describe in Part XIII.)  Add lines 4a and 4b	V, lines 1b and 2b; Part V, li	5	art XI,
b c 5 Pai	Other (Describe in Part XIII.)  Add lines 4a and 4b	V, lines 1b and 2b; Part V, li	5	art XI,
b c 5 Pai	Other (Describe in Part XIII.)  Add lines 4a and 4b	V, lines 1b and 2b; Part V, li	5	art XI,
b c 5 Pai	Other (Describe in Part XIII.)  Add lines 4a and 4b	V, lines 1b and 2b; Part V, li	5	art XI,
b c 5 Pai	Other (Describe in Part XIII.)  Add lines 4a and 4b	V, lines 1b and 2b; Part V, li	5	art XI,

#### SCHEDULE M (Form 990)

#### **Noncash Contributions**

OMB No 1545-0047

Open to Public Inspection

38-6091389

Department of the Treasury Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

Name of the organization

**Employer identification number** FRIENDS OF THE TROY PUBLIC LIBRARY

Par	t I Types of Property									
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contr amounts repor Form 990, Part V	ted on		(d) ethod of de sh contribu			s
1	Art - Works of art									
2	Art - Historical treasures									
3	Art - Fractional interests									
4	Books and publications			-						
5	Clothing and household goods									
6	Cars and other vehicles									
7	Boats and planes									
8	Intellectual property									
9	Securities - Publicly traded									
10	Securities - Closely held stock									
11	Securities - Partnership, LLC, or									
	trust interests									
12	Securities - Miscellaneous	Х	1	236,	742.	FAIR 1	MARKET	VA	LUE	
13	Qualified conservation contribution -									
	Historic structures									
14	Qualified conservation contribution - Other									
15	Real estate - Residential									
16	Real estate - Commercial				· · · · · · · · · · · · · · · · · · ·					
17	Real estate - Other									
18	Collectibles									
19	Food inventory									
20	Drugs and medical supplies									
21	Taxidermy									
22	Historical artifacts							-		
23	Scientific specimens									
24	Archeological artifacts									
25	Other									
26	Other ()									
27	Other	_								
28	Other (				<u></u>					
29	Number of Forms 8283 received by the organi	zation durin	g the tax year for o	contributions						
	for which the organization completed Form 82	83, Part IV,	Donee Acknowled	gement	29					
	-			-					Yes	No
30a	During the year, did the organization receive b	y contribution	on any property re	ported in Part I, Im	es 1 · 28, 1	hat it must	hold for			
	at least three years from the date of the initial									
	the entire holding period?							30a		Х
ь	If "Yes," describe the arrangement in Part II.				•		• •			
31	Does the organization have a gift acceptance	policy that r	equires the review	of any non-standa	ırd contrib	utions?		31		X
	Does the organization hire or use third parties			•						
	contributions?			,				32a		X
b	If "Yes," describe in Part II.				•	• • •	• • •			_ <del></del> _
33	If the organization did not report an amount in	column (c)	for a type of prope	rty for which colur	nn (a) is ch	necked.				
	describe in Part II.				, ,	- · · - <del>- ,</del>				
LHA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 99	ю.		s	chedule M	(Form	990) (	2013)

Schedule M	(Form 990) (2013)	FRIENDS_	OF THE	TROY	PUBLIC	LIBRAI	RY	<u> 38-60</u>	<u>91389                                   </u>	Page 2
Part II	Supplemental is reporting in Part this part for any ac	I Information. I, column (b), the Iditional informati	Provide the incomplete in the	nformatio ontributio	n required by ns, the numb	Part I, lines ( er of items re	30b, 32b, and ceived, or a co	33, and whethe ombination of bo	r the organiza oth. Also com	ition plete
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										, ,=== ,,

#### 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 Open to Public Inspection

Name of the organization

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

**Employer identification number** 38-6091389

FRIENDS OF THE TROY PUBLIC LIBRARY FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: DIRECT PURCHASES TO BENEFIT ALL LIBRARY PATRONS, INCLUDING PRESENTATIONS, PROGRAMS, LIBRARY EQUIPMENT AND IMPROVEMENTS. EXPENSES \$ 7,065. INCLUDING GRANTS OF \$ 0. REVENUE S 0. FORM 990, PART VI, SECTION B, LINE 11: EXPLANATION: FORM 990 IS REVIEWED BY THE BOARD OF DIRECTORS BEFORE IT WAS FILED. FORM 990, PART VI, SECTION C, LINE 19: EXPLANATION: THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST. FORM 990, PART IX, LINE 24E, ALL OTHER FUNCTIONAL EXPENSES: TEEN PROGRAM EXPENSES: PROGRAM SERVICE EXPENSES 6.243. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 6,243. **BOOK SHOP EXPENSES:** PROGRAM SERVICE EXPENSES 0. MANAGEMENT AND GENERAL EXPENSES 4,209. **FUNDRAISING EXPENSES** 0. TOTAL EXPENSES 4,209.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2013)

30

Department of the Treasury Internal Revenue Service Name(s) shown on return

## **Depreciation and Amortization**

(Including Information on Listed Property) ➤ See separate instructions. Attach to your tax return. 990

Business or activity to which this form relates

OMB No 1545-0172

Sequence No 179

Identifying number

FRIENDS OF THE TROY PUBLIC LIBRARY 38-6091389 FORM 990 PAGE 10 Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 500,000. 1 Maximum amount (see instructions) 2 Total cost of section 179 property placed in service (see instructions) 000,000. 3 Threshold cost of section 179 property before reduction in limitation 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (a) Description of property 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Tentative deduction. Enter the smaller of line 5 or line 8 ..... 9 Carryover of disallowed deduction from line 13 of your 2012 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2014. Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during 14 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) Part III | MACRS Depreciation (Do not include listed property.) (See instructions.) 17 MACRS deductions for assets placed in service in tax years beginning before 2013 17 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2013 Tax Year Using the General Depreciation System (b) Month and year placed (c) Basis for depreciation (business/investment use (d) Recovery (a) Classification of property (e) Convention (f) Method (a) Depreciation deduction only - see instructions) in service 10,400. 36 MTHS  $\mathtt{SL}$ 2,600. 19a 3-year property 5-year property 7-year property 10-year property 15-year property 20-year property 25-year property 25 yrs. S/L g 27.5 yrs. S/L MM Residential rental property h 27.5 yrs. MM S/L 39 yrs MM S/L Nonresidential real property i ММ S/L Section C - Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12-year 12 yrs. S/L 40-vear S/L Part IV | Summary (See instructions.) 21 Listed property. Enter amount from line 28 .... .... 22 Total, Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr. 917. 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 4562 (2013)

_	m 4562 (2013) art V Listed Proper amusement.)	FRIENDS ty (Include automobile									sed for e	38- ntertain	-6091 ment, rec	389 creation,	Page 2 or
	Note: For any through (c) of	vehicle for which you a Section A, all of Section	n B, an	<u>d Sec</u>	tion C if	applica	ble.								nns (a)
		<ul> <li>Depreciation and O</li> </ul>				ution:	See the	instruc	tions for li	mits for	passeng	ger auto	mobiles.)		
<u>24a</u>	Do you have evidence to			use cla	aimed?	<u> </u>	es L	_ No	24b If "Y	Т		nce wr	tten?	_ Yes L	No
	(a) Type of property (list vehicles first )	(b) (c) Date Busin placed in invest service use pero	ness/ ment		(d) Cost or her basis		(e) sis for depr siness/inve use only	stment	(f) Recovery period	Me	(g) ethod/ vention	Depr	(h) eciation luction	Ele section	(i) cted on 179 ost
25	Special depreciation all	owance for qualified lis	sted pro	perty	placed	ın servi	ce dunn	g the ta	ax year an	<u>——</u> id		<del>                                     </del>			<u> </u>
	used more than 50% in	a qualified business u	.se		<u> </u>		<u> </u>	<u> </u>			25				
<u>26</u>	Property used more that	n 50% in a qualified b	usiness	use:										,	
			%							ļ <u> </u>				ļ	
		<del> </del>	%							<u> </u>		<u> </u>		ļ <u>.</u>	
	Proporty used 50% or l	ass in a gualfied busin	%	··			<del></del>		l	<u> </u>		<u> </u>		L	
21	Property used 50% or I	ess in a quained busii	%	<del>)</del> .						S/L -		T		Γ	
		<del>                                     </del>	/º %							S/L -					
			%						<u> </u>	S/L ·		<del>                                     </del>		1	
28	Add amounts in column	(h), lines 25 through 2	27. Ente	r here	and on	line 21	, page 1				28				
<u>29</u>	Add amounts in column	ı (ı), line 26. Enter here	and on	line 7	7, page 1			· · · ·		· · · ·			29		
					3 - Infor									•	
	nplete this section for ve														S
to y	our employees, first ans	wer the questions in S	Section	C to s	see if you	ı meet a	an excep	otion to	o completi	ng this :	section f	or those	vehicles	3.	
	<del></del>							т		Γ		т.		· · · · · · · ·	
20	Total huggaes (investment	miles deven during the		-	a)		(b)		(c)	1	(d)		(e)	<b>(f)</b>	
	Total business/investment miles driven during the year (do not include commuting miles)		-	Vehicle		ve	Vehicle \		Vehicle Vehic		nicie	cle Vehicle		Vehicle	
	Total commuting miles							1		<del>  -</del>		-			
	Total other personal (no		<u> </u>					1		<del>                                     </del>		<del> </del>			
	driven	= -													
	Total miles driven during														
	Add lines 30 through 32	2	. L					<u> </u>							
	Was the vehicle available for personal use			/es	No	Yes	No	Yes	No_	Yes	No	Yes	No	Yes	No
	during off-duty hours?		.					ļ				<u> </u>	ļ		
	Was the vehicle used p														
	than 5% owner or relate						ļ	-	<del> </del>		<u> </u>	<u> </u>			
	Is another vehicle availa	ible for personal					Ì								
	use?	Section C - Question		Emal	Over M	/ha Dra	ida Val	1		. The size i	<u> </u>	<u> </u>			
Ans	wer these questions to												ro net m	oro than	E0/
	ners or related persons.	action in you moor	<b>a o o</b> .	, puo		pioting	0000011	D 101 V	critoics as	ica by e	mpioyee	S WIIU a	ie not m	ore triair	370
37	Do you maintain a writte	en policy statement th	at prohi	bits a	II persor	nal use	of vehicl	es, ınc	luding cor	nmuting	, by you	r		Yes	No
														100	
38	Do you maintain a writte	en policy statement th	at prohi	bits p	ersonal	use of v	vehicles,	excep	t commut	ing, by	your				
	employees? See the ins	structions for vehicles	used by	corp	orate of	ficers, c	directors	, or 1%	or more	owners				L	
	Do you treat all use of v	. , .	•								•				<u> </u>
	Do you provide more th					nforma	tion from	your o	employee	s about					
	the use of the vehicles,									•				<u> </u>	<del> </del>
	Do you meet the require Note: If your answer to										• ••	•		-	
i	art VI Amortization	or, 00, 03, 40, 01 41 K	<i>, ,</i> <del>, , ,</del>	<u> </u>	ound!	ere 360	uun p (C	, uie C	JOVETEU VE	ncies					
	(a)		(b			(c)		Т	(d)		(e)	Т	-	(f)	<del></del>
	Description of	f costs	Date amor begi		L	Amortizal amoun	ble t		Code section		Amortizz period or pe	itton	An fo	nortization r this year	
42	Amortization of costs th	at begins during your	2013 ta	x yea	ar:										
			<u> </u>												
			<u>l .</u>		<u></u>										
	Amortization of costs th	-		-		•						43			
	Total. Add amounts in o	column (f). See the ins	truction	s for	where to	report						44			
3162	52 12-19-13												F	orm <b>456</b> 2	2 (2013)

#### Form .8868

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No. 1545-1709

<b>■</b> 16 v/c	u are filing for an Automatic 3-Month Extension, comple	to only Do	et Land chack this hav			<b>▶</b> X					
	u are filing for an Additional (Not Automatic) 3-Month Ex					🕨 🔼					
-											
	complete Part II unless you have already been granted			-							
	onic filing (e-file). You can electronically file Form 8868 if					•					
	d to file Form 990-T), or an additional (not automatic) 3-mo										
	to file any of the forms listed in Part I or Part II with the ex										
	al Benefit Contracts, which must be sent to the IRS in paper		(see instructions). For more details o	on the elec	ctronic filing o	of this form,					
	vw.irs.gov/efile and click on e-file for Charities & Nonprofits										
Part	I Automatic 3-Month Extension of Time	e. Only s	submit original (no copies ne	eded).							
A corp	oration required to file Form 990-T and requesting an auto	matic 6-mc	onth extension - check this box and	complete							
Part I	nly			·		▶ 🔲					
	er corporations (including 1120-C filers), partnerships, REN	fICs, and t	rusts must use Form 7004 to reques	t an exten	sion of time						
to file	ncome tax returns			Enter file	er's identifyir	ng number					
Туре	r Name of exempt organization or other filer, see instru	ame of exempt organization or other filer, see instructions.									
print		, ,									
-	FRIENDS OF THE TROY PUBLIC	38-6091389									
File by ti due date		Social se									
filing you	PO BOX 4445	 									
return S Instructi	99	oreign add	ress, see instructions	<u> </u>							
	TROY, MI 48099										
	11(01) 111 10033					<del></del>					
Entor 1	ne Return code for the return that this application is for (fil	o a conara	to application for each return)			01					
Enter (	te neturn code for the retain that this application is for fin	o a sopara	te application for each return)			<u>[U]I</u>					
		D-4	I A I'		<del></del>						
Applio	ation	Return	Application			Return					
<u>ls For</u>	00 5 000 57	Code	Is For	Code							
	90 or Form 990-EZ	01	Form 990-T (corporation)	07							
Form 9	90-BL	02	Form 1041-A	08							
Form 4	720 (ındıvidual)	03	Form 4720 (other than individual)	09							
Form 9	90-PF	04	Form 5227	10							
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069								
Form 9	90-T (trust other than above)	06	Form 8870			12					
	KIM YANCHYSHYN										
• The	books are in the care of ▶ 805 DREW DRIVE	- TR	OY, MI 48098								
Tel	phone No. ► 248-879-9476		Fax No.			·					
• If th	e organization does not have an office or place of busines	s in the Ur	nited States, check this box			▶ □					
	is is for a Group Return, enter the organization's four digit					roup, check this					
box 🕨											
	request an automatic 3-month (6 months for a corporation		· · · · · · · · · · · · · · · · · · ·								
•	FEBRUARY 15, 2015, to file the exemp				The extension	n					
	s for the organization's return for:	J				••					
	calendar year or										
	► X tax year beginning JUL 1, 2013	an	d ending <u>JUN 30, 2014</u>								
	tax your boginning				_ ·						
•	f the tax year entered in line 1 is for less than 12 months,	abook road	on: Initial return	Fınal retur	_						
2		SHOCK IEAS	on initial return	rınaı retur	n						
	Change in accounting period			<del></del>	1						
	f this application is for Forms 990-BL, 990-PF, 990-T, 4720	), or 6069,	enter the tentative tax, less any			•					
	nonrefundable credits. See instructions.		<del></del>	3a_	\$	0.					
	f this application is for Forms 990-PF, 990-T, 4720, or 606		-		1.	_					
	estimated tax payments made. Include any prior year over	3b_	\$	0.							
	Balance due. Subtract line 3b from line 3a. Include your p	ĺ	{								
	by using EFTPS (Electronic Federal Tax Payment System).	3c	\$	0.							
Cauti instru	n. If you are going to make an electronic funds withdrawa tions.	l (direct de	bit) with this Form 8868, see Form 8	3453-EO a	nd Form 8879	9-EO for payment					
LHA 323841 12-31-1	For Privacy Act and Paperwork Reduction Act Notice	, see instr	uctions.		Form 8	868 (Rev. 1-2014)					