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Form 990-EZ

Department of the Treasury
Internal Revenue Service

Short Form

Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public.

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

OMB No 1545-1150

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 01-01-2015, and ending 12-31-2015

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
EveryLibrary

Number and street (or P O box, if mail is not delivered to street address)Room/suite
PO Box 406 45 E Burlington Street

City or town, state or province, country, and ZIP or foreign postal code
Riverside, IL 60546

D Employer identification number
46-1534149

E Telephone number
(503) 754-6619

F Group Exemption Number ☐

G Accounting Method ☒ Cash ☐ Accrual Other (specify) ☐

H Check ☐ if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: ☐ www.everlibrary.org

J Tax-exempt status (check only one) ☐ 501(c)(3) ☒ 501(c)(4) ☐ (insert no) ☐ 4947(a)(1) or ☐ 527

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) below are \$500,000 or more, file Form 990 instead of Form 990-EZ. \$ 65,886

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)									
Check if the organization used Schedule O to respond to any question in this Part I ☒									
Revenue	1	Contributions, gifts, grants, and similar amounts received						1	60,103
	2	Program service revenue including government fees and contracts						2	0
	3	Membership dues and assessments						3	0
	4	Investment income						4	0
	5a	Gross amount from sale of assets other than inventory				5a	0		
	b	Less cost or other basis and sales expenses				5b	0		
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)						5c	0
	6	Gaming and fundraising events							
	a	Gross income from gaming (attach Schedule G if greater than \$15,000) .				6a	0		
	b	Gross income from fundraising events (not including \$ 0 of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)						6b	5,783
	c	Less direct expenses from gaming and fundraising events				6c	5,985		
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)						6d	-202
	7a	Gross sales of inventory, less returns and allowances				7a	0		
	b	Less cost of goods sold				7b	0		
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)						7c	0	
8	Other revenue (describe in Schedule O)						8	0	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8						9	59,901	
Expenses	10	Grants and similar amounts paid (list in Schedule O)						10	14,150
	11	Benefits paid to or for members						11	0
	12	Salaries, other compensation, and employee benefits						12	0
	13	Professional fees and other payments to independent contractors						13	39
	14	Occupancy, rent, utilities, and maintenance						14	0
	15	Printing, publications, postage, and shipping						15	453
	16	Other expenses (describe in Schedule O)						16	24,759
	17	Total expenses. Add lines 10 through 16						17	39,401
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)						18	20,500
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)						19	8,657
	20	Other changes in net assets or fund balances (explain in Schedule O)						20	127
	21	Net assets or fund balances at end of year. Combine lines 18 through 20						21	29,284

Part II

Balance Sheets

(see the instructions for Part II)

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

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	8,657	22	29,284
23 Land and buildings	0	23	0
24 Other assets (describe in Schedule O)	0	24	0
25 Total assets	8,657	25	29,284
26 Total liabilities (describe in Schedule O)	0	26	0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	8,657	27	29,284

Part III

Statement of Program Service Accomplishments

(see the instructions for Part III)

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

What is the organization's primary exempt purpose?
Educational and civic

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

28

See Additional Data Table

(Grants \$)

If this amount includes foreign grants, check here

28a

29

(Grants \$)

If this amount includes foreign grants, check here

29a

30

(Grants \$)

If this amount includes foreign grants, check here

30a

31

Other program services (describe in Schedule O)

(Grants \$)

If this amount includes foreign grants, check here

31a

32

Total program service expenses (add lines 28a through 31a)

32

29,766

Part IV

List of Officers, Directors, Trustees, and Key Employees

(list each one even if not compensated — see the instructions for Part IV)

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

(a) Name and title	(b) Average hours per week devoted to position	(c)Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
John Chrastka Executive Director, Chairman, President	40	0	0	0
Erica Findley Board of Directors, Treasurer	8	0	0	0
Patrick Sweeney Board of Directors, Secretary	8	0	0	0
Peter Bromberg Board of Directors	8	0	0	0
Mel Gooch Board of Directors	8	0	0	0
Brian Hart Board of Directors	8	0	0	0

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Part V

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

		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		No
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		No
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		No
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		No
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ☐ 37a 0		
b	Did the organization file Form 1120-POL for this year?		No
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		No
b	If "Yes," complete Schedule L, Part II and enter the total amount involved ☐ 38b		
39	Section 501(c)(7) organizations Enter ☐		
a	Initiation fees and capital contributions included on line 9	39a	
b	Gross receipts, included on line 9, for public use of club facilities	39b	
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ☐ , section 4912 ☐ , section 4955 ☐		
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	No
c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ☐ 0		
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization ☐ 0		
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	No
41	List the states with which a copy of this return is filed ☐ _____		
42a	The organization's books are in care of ☐ Enca Findley Telephone no ☐ (503) 754-6619 Located at ☐ 3602 SE 28TH PL APT 11 Portland, OR ZIP + 4 ☐ 97202		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ☐ _____ See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	Yes	No
c	At any time during the calendar year, did the organization maintain an office outside the U S ? If "Yes," enter the name of the foreign country ☐ _____	42c	No
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here ☐ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ☐ 43		
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		No
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	No
c	Did the organization receive any payments for indoor tanning services during the year?	44c	No
d	If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d	
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	No
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b	No

		Yes	No
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		
		46	No

Part VI

Section 501(c)(3) organizations only

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

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

		Yes	No
47	Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	47	
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a	
b	If "Yes," was the related organization a section 527 organization?	49b	

50

Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

f

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

51

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

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

d

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

52

Did the organization complete Schedule A? **NOTE.** All Section 501(c)(3) organizations must attach a completed Schedule A

Yes

No

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

Sign Here				2016-05-07		
	Signature of officer			Date		
Paid Preparer Use Only	Erca Findley Treasurer					
	Type or print name and title					
	Prnt/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN	
	Firm's name			Firm's EIN		
	Firm's address			Phone no		
May the IRS discuss this return with the preparer shown above? See instructions						
Yes						No

Additional Data

Software ID: 15000352
Software Version: v1.00
EIN: 46-1534149
Name: EveryLibrary

Form 990EZ, Part III - Statement of Program Service Accomplishments

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.		Expenses (Required for 501(c)(3) and 501(c)(4) organizations and 4947(a)(1) trusts; optional for others.)	
Provided direct support to 13 library ballot committees through a combination of financial resources, 28 campaign consultancy and technical assistance (Grants \$ 1,300) If this amount includes foreign grants, check here . . . ☒ ☐		28a	17,504
Worked with the Creative Action Network to produce artwork that can be used by library campaigns 29 nationwide for no cost (Grants \$ 0) If this amount includes foreign grants, check here . . . ☒ ☐		29a	6,185
30 We produced or contributed to online and in-person advocacy trainings across the country This was done through regional professional conferences and workshops with local library groups (Grants \$ 0) If this amount includes foreign grants, check here . . . ☒ ☐		30a	6,077

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

OMB No 1545-0047

2015

Open to Public
Inspection

Name of the organization EveryLibrary	Employer identification number 46-1534149
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990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990-EZ, Part I, Line 10	Part I, Line 10 Grants and similar amounts paid (list in Schedule O) Total \$14,150 Funding to Keep Our Libraries Open PAC 01/14/2015 \$250 Funding to Yes for River East Library 02/10/2015 \$750 Donation to New Yorkers for Better Libraries PAC 02/19/2015 \$200 Donation to People for Oregon Libraries 04/30/2015 \$150 Funding to Libraries Change Lives 05/01/2015 \$3,000 Donation to GLBT Historical Society 06/30/2015 \$50 CritLib Conference sponsorship made out to Gleeson Library, University of San Francisco 07/10/1205 \$250 Funding to Darby Community Library PAC 07/14/2015 \$1,000 National Conference Sponsorship for the Black Caucus of ALA 07/28/2015 \$500 Funding to Yes Campaign for Proposition 414 09/04/2015 \$1,000 Funding to Vote Yes for Meridian Library ¹ 09/04/2015 \$1,000 Funding to Citizens for the Library 09/21/2015 \$1,000 Funding to Vote Yes for Moniteau County Library 10/13/2015 \$1,000 Funding to Vote Yes for Libraries 10/15/2015 \$2,000 Funding to Vote Yes for Meridian Library ¹ 11/04/2015 \$500 Funding to Show Me Libraries 12/01/2015 \$1,000 Funding to Citizens for a 21st Century Library 12/29/2015 \$500
Form 990-EZ, Part I, Line 16	Description,Amount^Business Cards,156 Conference Registrations,1270 Creative Action Network for Vote Libraries Artwork,6185 Credits for stock photography for website,11 Facebook Ads,2355 Fee for 2014 State Tax Return,15 Fees to Google Apps,566 Fees to Mailchimp,250 Fees to Nation Builder,306 Office Supplies,396 PO Box,87 Promotional Events,1432 Promotional Materials,227 Travel Expenses,10882 Webinar,54 Website,567^Total,24759^
Form 990-EZ, Part I, Line 20	Description,Amount^Returned funds from Yes for New Orleans Libraries PAC,27 Returned funds from Northvale Residents for a Municipal Library,100^Total,127^