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EXTENDED TO NOVEMBER 15, 2017

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)

▶ 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

OMB No 1545-0047

A	ror til	e 20 to calendar year, or tax year beginning and	enaing		
В	Check If applicab	C Name of organization FRIENDS OF THE TOMPKINS COUNTY		D Employer identification	ation number
	Addre	PUBLIC LIBRARY			
	Name			15-60	23223
	Initial	,	Room/suite	E Telephone number	
	Final return termii	509 ESTY STREET	·	607-2	72-2223
	ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	571,681.
Ļ	Amen return Appli	11MCA, N1 14030		H(a) Is this a group ret	
L_	tion pendi	F Name and address of principal officer: NINA SCHODIZ		for subordinates?	
		SAME AS C ABOVE		H(b) Are all subordinates incl	
		empt status: X 501(c)(3)	or 527	1	st. (see instructions)
_		te: WWW.FRIENDSOFTCPL.ORG	1	H(c) Group exemption	
	art I	forganization: X Corporation Trust Association Other ► Summary	L Year	of formation: 1940 M	State of legal domicile; NY
	т_•	Briefly describe the organization's mission or most significant activities: THE 1	MTCCTO	א הם שטם בסד	ENDS OF
ď	1	THE TOMPKINS COUNTY PUBLIC LIBRARY IS TO			
ctivities & Governance	2	Check this box If the organization discontinued its operations or dispose			
j.	3	Number of voting members of the governing body (Part VI, line 1a)	sea of more	3	19
é	4	Number of independent voting members of the governing body (Part VI, line 1b)	•	. 3	15
90	5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)		5	
ţį	6	Total number of volunteers (estimate if necessary)		. 6	150
: <u>`</u>	7.9	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
Ă	1	Net unrelated business taxable income from Form 990-T, line 34	•	7b	0.
_	 		-	Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		14,161.	20,127.
Revenue	9	Program service revenue (Part VIII, line 2g)		508,952.	544,740.
Ş	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		2,685.	3,822.
å	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,844.	2,992.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		528,642.	571,681.
	13	Grants and similar amounts paid (Part IX, column (A), (Ings. 1.3)		364,021.	459,104.
	14	Benefits paid to or for members (Part IX, column (A), ine 4)	7 -	0.	0.
•	4.5	Salaries other compensation employee henefits (Part IX collumn (A) lines 5:10)	ا د د ا	46,416.	47,084.
Expenses	16a	Professional fundraising food (Part IV, column (A), line 113)	12	0.	0.
Dec	b	Total fundraising expenses (Part IX, column (D), line 25)	10%	* /	•
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f.24e)		96,257.	108,357.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		506,694.	614,545.
	19	Revenue less expenses Subtract line 18 from line 12		21,948.	-42,864.
58			Be	ginning of Current Year	End of Year
SES.	20	Total assets (Part X, line 16)		743,264.	700,400.
Ass	21	Total liabilities (Part X, line 26)		0.	0.
Net Assets or	22_	Net assets or fund balances. Subtract line 21 from line 20		743,264.	700,400.
P	art II	Signature Block			
Unc	ler pena	ilties of perjury, I declare that I have exampled this return, including accompanying schedules	and stateme	ents, and to the best of my k	nowledge and belief, it is
true	, corre	ct, and complete. Declaration careparer (other than officer) is based on all information of wh	ich preparer	has any knowledge.	
		K rout leade		5/W	17
Sig	n	Signature of officer		Date /	
He	re	Don Totter - I real	1020	<u> </u>	
		Type or print name and title			
		Print/Type preparer's name Preparer signature		Date Check	PTIN
Pai	d	PATRICK JORDAN		5/10/17 If self-employed	
	parer	Firm's name INSERO & CO. CPAS, LLP		Firm's EIN ▶	47-5324570
Use	Onty	Firm's address ▶ 401 E. STATE STREET			
		ITHACA, NY 14850		Phone no. (6 0	7) 272-4444
Ma	y the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
6320	001 11-1	1-16 LHA For Paperwork Reduction Act Notice, see the separate instructio	ns.		Form 990 (2016)

632002 11-11-16

Form 990 (2016) PUBLIC LIBRARY
Part IV Checklist of Required Schedules

			r	
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?] .]
_	If "Yes," complete Schedule A	1	Х	X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	<u> </u>	 ^-
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			х
	public office? If "Yes," complete Schedule C, Part I	3_		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		x	i
_	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_ ا		x
6	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			x
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		├^-
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.	_		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	7		
0	·	8		x
9	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	<u> </u>		<u> </u>
9	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
				х
40	If "Yes," complete Schedule D, Part IV	9_		
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	40	х	
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	<u> </u>	_
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	ş	*	\$.
_	as applicable Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	 		3. 4
а	·	11a	х	
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	I I I a		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		
·	assets reported in Part X, line 16° If "Yes," complete Schedule D, Part VIII	11c	1	х
а	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	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		
•	the organization's separate or consolidated limital statements for the tax year include a foothole that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
192	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	111		
120	Schedule D, Parts XI and XII	12a	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	<u> </u>	14a		X
	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		i 1	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	- 1.2		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G. Part III	19]	X
		Form	990 ₍	2016)

Form	1 990 (2016) PUBLIC LIBRARY 1	5-6023223	P	age 4
Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	100	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	. 200		
_,	domestic 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 or for domestic individuals on			
~~		22	1	х
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III			- 72
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's cur	Terit		
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			х
04-	Schedule J	23		<u>^</u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the control of the property			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			3.5
	Schedule K. If "No", go to line 25a	24a	\vdash	_X_
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defea	se	1	
	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		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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		X
þ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, a			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	te		
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Ye	es,"	ì	
	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	Į, ,		
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	er	İ	
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	额	′	(' ' ')
	instructions for applicable filing thresholds, conditions, and exceptions).			<u> {</u>
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Pa	rt IV 28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	,		
	contributions? If "Yes," complete Schedule M	30	. (X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32	ĺ	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	1	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		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled ent			
_	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	İ	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organ			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	55	1	
	and that is treated as a partnership for federal income tax purposes? If "Yes." complete Schedule R. Part VI	37		Х

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

Form **990** (2016)

	FRIENDS OF THE TOMPKINS COUNTY			
Form	990 (2016) PUBLIC LIBRARY 15-6023	223	F	age 5
Pai	rt V 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			
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	1		}
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		1
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,			abla
	filed for the calendar year ending with or within the year covered by this return 2a 7			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		Х
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		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		
	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	1	X
ь	If "Yes," enter the name of the foreign country		7	<u> </u>
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	,		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	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	 	<u> </u>
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	<u> </u>		
Va	any contributions that were not tax deductible as chantable contributions?	6a	[x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b	ŀ	
7	Organizations that may receive deductible contributions under section 170(c).	<u>~</u>	4	17.
, a	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	Ť	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	 	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	75	_	
С	to file Form 8282?	7c		х
ď	If "Yes," indicate the number of Forms 8282 filed during the year	2 💸	×	3.5
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
9 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	- ''' \	<u>*</u>	కళ్లీ
	sponsoring organization have excess business holdings at any time during the year?	8	<u> </u>	<u> </u>
9	Sponsoring organizations maintaining donor advised funds.	₹** ;	.≯°	1%
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	 -	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter	30	7.	7
	Initiation fees and capital contributions included on Part VIII, line 12	1 %	Κ.	>
a		ĺ	l	`
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]	1 1	7 %	
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders		,	Í (
a	Gross income from other sources (Do not net amounts due or paid to other sources against	1		:
b				. '
40-	amounts due or received from them.) Section 4047(aV1) non-exempt charitable trusts. Is the organization filing Form 990 in liquid Form 10412	10-		
	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	1	, s	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	10-	Ϊ́	<u>-</u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		

Form **990** (2016)

X

Note. See the instructions for additional information the organization must report on Schedule Ob Enter the amount of reserves the organization is required to maintain by the states in which the

b If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year?

organization is licensed to issue qualified health plans

c Enter the amount of reserves on hand

PUBLIC LIBRARY 15-6023223 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 Section 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 19 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule 0. 15 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X **b** Each committee with authority to act on behalf of the governing body? X 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10a Did the organization have local chapters, branches, or affiliates? 10a 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 b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe Х in Schedule O how this was done 12c Х Did the organization have a written whistleblower policy? 13 13 X 14 Did the organization have a written document retention and destruction policy? 14 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? Х The organization's CEO, Executive Director, or top management official 15a Х Other officers or key employees of the organization 15b 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 Х taxable entity during the year? 16a 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? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NY Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Upon request Own website ____ Another's website Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records_ THE ORGANIZATION - (607)255-9970

Form 990 (2016)

ITHACA,

ESTY STREET,

509

PUBLIC LIBRARY

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

X

Page 7

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

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

List persons in the following order: individual trustees or directors, institutional trustees; officers; key employees, highest compensated employees; and former such persons

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

(A) Name and Title	(B) Average hours per	(do	not c	(C Posi heck i	c) ition more		one n an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W·2/1099-MISC)	other compensation from the organization and related organizations
(1) NINA SCHOLTZ	2.00			7.		l				
PRESIDENT	2 00	X		X	_	-	<u> </u>	0.	0.	0.
(2) JO ANN EKDAHL	2.00	U.		7.7				,	0	0
TREASURER (3) NATHAN FAWCETT	2.00	X	ļ	Х		-	├	0.	0.	0.
(3) NATHAN FAWCETT DIRECTOR	2.00	x						0.	0.	0
(4) SAM MANNING	2.00	1	-	-		 	├─	0.	U •	0.
DIRECTOR	2.00	x						0.	0.	0.
(5) BETTA HEDLUND	2.00	^				-	-	0.		<u> </u>
DIRECTOR	2.00	x						0.	0.	0.
(6) SARAH HATCHER	2.00		\vdash							
DIRECTOR		x						0.	0.	0.
(7) SHARON WOLOSZYN	2.00	-					\vdash			
DIRECTOR		x	i				•	0.	0.	0.
(8) MARY PATTERSON	2.00	-				├ ──	_			
DIRECTOR		х						0.	0.	0.
(9) ALICE DAMP	2.00									
DIRECTOR		$ \mathbf{x} $						0.	0.	0.
(10) AL DEMERS	2.00						_			
DIRECTOR		x						0.	0.	0.
(11) EVELYN KALISH	2.00									
DIRECTOR		Х						0.	0.	0.
(12) CLARE GREENE	2.00									
2ND VICE PRESIDENT		X		X				14,000.	0.	0.
(13) FRANCES FAWCETT	2.00									
SECRETARY		X		Х				0.	0.	0.
(14) SARAH JOHNSON	2.00			Ì						
DIRECTOR		Х						667.	0.	0.
(15) CHRIS KOURKOUTIS	2.00	1]		Ì Ì				
DIRECTOR		X						0.	0.	0.
(16) KATHY WEINBERG	2.00]						
DIRECTOR		Х						750.	0.	
(17) ANNE CARSON	2.00			_ }						_
1ST VICE PRESIDENT	L	X		Х		لسا		0.	0.	0.

632007 11-11-16

Form 990 (2016)

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,	and	d Hi	ghes	st C	ompensated Employee	s (continued)			
(A)	(B)				C)			(D)	(E)		(F)
Name and title	Average	(do		Pos		1 than	one	Reportable	Reportable	е	Estim	ated
	hours per	box	, unle	ss per	rson i	ıs boti	h an	compensation	compensati	on	amou	nt of
	week	\vdash	cerar	nd a d	recto	or/trus	itee)	from	from relate	d	oth	er
	(list any	director				İ		the	organızatıoı		comper	sation
	hours for related	or di	, g			ated		organization	(W-2/1099-MI	SC)	from	the
	organizations	trustee or	truste		۰	pens		(W-2/1099-MISC)			organiz	
	below	를	onal	1	ploye	8 8					and re	
	line)	Individual t	nstitutional trustee	Officer	y em	Highest compensated employee	Ē				organız	ations
(18) PATRICIA MADIGAN	2.00	=	드	ō	<u>\$</u>	ᆂᇶ	프					
DIRECTOR	2.00	х				١.	j	710		0		^
(19) JIM LOWE	2.00	^	⊢	-			├	710.		0.		0.
DIRECTOR	2.00	x								^		_
DIRECTOR		<u> </u>				├	-	0.		0.		0.
		l										
		<u> </u>			H	<u> </u>	 _				<u>.</u> .	
		l			}	l						
		<u> </u>	_	Щ	_	<u> </u>	L_		- 			
							ĺ					
		<u> </u>	_			Щ	<u> </u>					
	ļ											
						Щ						
	ļ											
1b Sub-total							•	16,127.		0.		0.
c Total from continuation sheets to Part VII	, Section A						•	0.		0.		0.
d Total (add lines 1b and 1c)							•	16,127.		0.		0.
2 Total number of individuals (including but no	ot limited to the	ose	liste	d ab	ove)) who	o re		000 of reportable	, 		
compensation from the organization					,	,						0
				•							Ye	
3 Did the organization list any former officer,	director, or tru	stee	. ke	v em	olar	vee.	or h	nahest compensated em	nlovee on	- 1	2.3	7.5
line 1a? If "Yes," complete Schedule J for so			,	,	٠, ۳٠٠٠	, ,	. .	g.reat componedted on	ipidyee en		3	X
4 For any individual listed on line 1a, is the su		2 CO	mne	neat	מחו	and	oth	er companyation from th	a organization		<u>.</u>	1,,
and related organizations greater than \$150									ie organization		4	X
5 Did any person listed on line 1a receive or a	ccuie compen	cui	npie m fr	nm s	anv i	uule	date.	or sucri iriuividuai ed organization or individ	ual for congoon		2 5	
rendered to the organization? If "Yes," com							iaic	d Organization of individ	uai ioi services	- 1		X
Section B. Independent Contractors	olete Schedule	JIC	Dr. SU	Cn D	ersc	on .		· · · · · · · · · · · · · · · · · · ·	!		5	
Complete this table for your five highest cor	mponeated indi		odon	+ 00	ntro	otor.	o th	ot soonund mars than C	100 000 -4			
the organization. Report compensation for t										pensa	ion from	
(A)	ne calendar ye	al e	num	y wi	1110	WIL	11111		ear		(0)	
Name and business	address	NC	NE	ı				(B) Description of se	ervices	C	(C) ompensat	ion
<u> </u>		110	/111				+				omponsat	
							+					
							-+	······································			 	
							+					
												
												
2 Total number of independent contractors (in		t lim	uted	to ti	_		ed a	above) who received mo	re than		,	
\$100,000 of compensation from the organiz	ation 🕨				0							
											Form 990	(0010)

Form 990 (2016) PUBLIC
Part VIII Statement of Revenue

PUBLIC LIBRARY

			Check if Schedule O cont	ains a response	or note to any lir	e in this Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
s, Grants Amounts	c	•	Federated campaigns Membership dues Fundraising events	1a 1b 1c	10,753.				
ins, Gifts, Similar Ar	e	•	Related organizations Government grants (contribution) All other contributions, gifts, gran	F1					
Contributions, and Other Simi	ı C		similar amounts not included abor Noncash contributions included in lines	ve 1f	9,374.				
S Z	h	<u> </u>	Total. Add lines 1a-1f		<u> </u>	20,127.			
					Business Code		,		
	2 a	3	BOOK SALES		900099	543,676.	543,676.		
8	t	.	BOOK BAGS		900099	1,064.	1,064.		
Ser	c	3							
E S	c								
ğ Ğ		=							
Program Service Revenue	f		All other program service reve	nue					
			Total, Add lines 2a-2f			544,740.	-	,	, , ,
$\neg \uparrow$	3		Investment income (including	dividends, intere	est, and			·	
- 1	Ū		other similar amounts)		>	3,822.			3,822.
	4		Income from investment of tax	v.evemnt bond n	roceeds -	7,			†
			Royalties	k-exempt bond p	100000				
	5		Royalties	(i) Real	(II) Personal	144			.,
	_			(i) Real	(II) Personal				8
	6 a		Gross rents				, \$? ·	*	
1	t		Less rental expenses			1 ,			1 4 , ,
			Rental income or (loss)	L	L	/ ;	* * */		
			Net rental income or (loss)		<u> </u>	22	, ,		
	7 8		Gross amount from sales of	(i) Securities	(II) Other		(A) 2 (A)	, ,	1
			assets other than inventory		ļ		N. * 3 4	٠ >	, , ,
	t	b	Less cost or other basis				* '`	>4 .	
			and sales expenses				4	<i>u</i>	
	•	С	Gain or (loss)		<u> </u>			<u> </u>	35 6
		d	Net gain or (loss)						
Other Revenue	8 8	а	Gross income from fundraisin including \$	g events (not			;	,	3.0
8			contributions reported on line	1c) See			·		,
œ			Part IV, line 18	а	2,992.		\$		
뢷	ŀ		Less direct expenses	b	0.		;		
ŏ			Net income or (loss) from fund	draising events	>	2,992.			2,992.
			Gross income from gaming ac		,		,		
	- •	_	Part IV, line 19	а		,	,		
		h	Less direct expenses	b		1			`
			Net income or (loss) from garr						
			Gross sales of inventory, less	_					1
	10 6	a	and allowances		.]				
		L-		a b		1	[
			Less cost of goods sold	_	'L	 	-		
⊦		C	Net income or (loss) from sale		Business C. 1			 -	+
}	4:		Miscellaneous Revenu	ie	Business Code				
1	11 6								+
	ı	b			} · · · · · · · · · · · · · · · ·	 			
	•	С							
			All other revenue			I .			1
ļ	•	d	All other revenue		L	<u> </u>			
			Total. Add lines 11a-11d			571,681.	544,740.	0	6,814.

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FRIENDS OF THE TOMPKINS COUNTY Form 990 (2016) PUBLIC LIBRARY Part IX Statement of Functional Expenses

	Check if Schedule O contains a response of include amounts reported on lines 6b, b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to domestic organizations		expenses	general expenses	схрепаса
-	and domestic governments. See Part IV, line 21	454,604.	454,604.		
	Grants and other assistance to domestic				
_	individuals See Part IV, line 22	4,500.	4,500.		
	Grants and other assistance to foreign		····		
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
	Benefits paid to or for members				
	Compensation of current officers, directors,				
	trustees, and key employees	16,127.	16,127.		
	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
	Other salaries and wages	25,933.	25,933.		
3	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
	Other employee benefits	1,360.	1,360.		
0	Payroll taxes	3,664.	3,664.		
1	Fees for services (non-employees):				
а	Management .				
b	Legal				
c	Accounting	5,647.		5,647.	
ď	Lobbying				
е	Professional fundraising services. See Part IV, line 17			, , <u> </u>	
f	Investment management fees				
_	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)				
2	Advertising and promotion	9,793.	9,793.	2 210	
3	Office expenses	21,162.	17,844.	3,318.	
4	Information technology	198.		198.	
5	Royalties .	00 553	22 552		
6	Occupancy .	22,553.	22,553.		
	Travel .				
	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	21.4		314.	
_	Conferences, conventions, and meetings	314.		314.	
-	Interest				
	Payments to affiliates	21,748.	19,573.	2,175.	
	Depreciation, depletion, and amortization	7,515.	5,678.	1,837.	
_	Insurance	1,515.	3,070.	1,03/•	
	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.)				
	REPAIRS AND MAINTENANCE	8,947.	8,947.		
_	MISCELLANEOUS	5,302.	3,425.	1,877.	
-	REFRESHMENTS	4,172.	4,172.		
-	BAGS AND APRONS	1,006.		1,006.	····
	All other expenses			12,7-2-7	
5	Total functional expenses Add lines 1 through 24e	614,545.	598,173.	16,372.	(
<u>ร</u> 6	Joint costs Complete this line only if the organization	,	•		
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2016)

Balance Sheet Part X Check if Schedule O contains a response or note to any line in this Part X (B) End of year (A) Beginning of year 93,772. 57,049. 1 Cash - non-interest-bearing 405,325. 414,572. Savings and temporary cash investments 2 2 3 3 Pledges and grants receivable, net Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L 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 employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 Assets Notes and loans receivable, net 7 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 620,163. basis Complete Part VI of Schedule D 10a 391,384. 244,167. 228,779. 10b 10c b Less accumulated depreciation 11 11 Investments - publicly traded securities Investments - other securities See Part IV, line 11 12 12 Investments - program-related See Part IV, line 11 13 13 14 14 Intangible assets 15 15 Other assets See Part IV, line 11 743,264. 700,400. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 Accounts payable and accrued expenses 17 17 18 Grants payable 18 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, 22 Liabilities key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L. 22 Secured mortgages and notes payable to unrelated third parties 23 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 0. 0. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 722,797. 679,748. 27 27 Unrestricted net assets 6,107. 6,292. 28 28 Temporarily restricted net assets 14,360. 14,360. 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here 🕨 🔙 and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 700,400. 743,264. 33 33 Total net assets or fund balances 700,400. 743,264. Total liabilities and net assets/fund balances 34

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

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b 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

X

Form 990 (2016)

За

Act and OMB Circular A-133?

SCHEDULE A .

(Form 990 or 990-EZ)

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ▶ Attach to Form 990 or Form 990-EZ.

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www irs gov/form990 FRIENDS OF THE TOMPKINS COUNTY

Inspection Employer identification number

			IC LIBRARY					1	.5-6023223
Part		Reason for Public (Charity Status (All organizations must co	omplete th	ıs part) S	ee instructions		
The or	gani	zation is not a private found	lation because it is. (For lines 1 through 12, c	heck only	one box.)			
1		A church, convention of ch					1)(A)(i).		
2 [A school described in sect							
з [A hospital or a cooperative					ia).		
4		A medical research organiz					-	iii). Enter	the hospital's name,
_	city, and state:								
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in								
_		section 170(b)(1)(A)(iv). (0		,	•	-, -,			
6	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).								
7 F	司	An organization that norma						e general i	public described in
		section 170(b)(1)(A)(vi). (C	•					. g	
8	\neg	A community trust describe		(1)(A)(vi). (Complete Par	t II)				
9	司	An agricultural research org				ed in conii	unction with a l	and-grant	college
_		or university or a non-land-g	-			-		_	-
		university		,					
10	X	An organization that norma	Illy receives (1) more	than 33 1/3% of its sup	port from o	contributio	ns, membersh	p fees, an	id gross receipts from
		activities related to its exen							
		income and unrelated busin							=
		See section 509(a)(2). (Con	mplete Part III.)			•			,
11		An organization organized a	and operated exclusi	vely to test for public sa	fety See	section 50	09(a)(4).		
12		An organization organized a	and operated exclusi	ively for the benefit of, to	perform t	he functio	ns of, or to car	y out the	purposes of one or
		more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section	509(a)(2)	See section 5	09(a)(3). (Check the box in
		lines 12a through 12d that	describes the type o	f supporting organization	n and com	plete lines	12e, 12f, and	12g.	
а		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	oorted org	anization(s), ty	oically by	giving
		the supported organization	on(s) the power to req	gularly appoint or elect a	majority o	of the direc	tors or trustee	s of the su	pporting
		organization. You must o	complete Part IV, Se	ections A and B.					
b		Type II. A supporting org	anization supervised	or controlled in connect	tion with it:	s supporte	ed organization	(s), by hav	/ing
		control or management of	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manag	e the supp	oorted
		organization(s). You mus	t complete Part IV,	Sections A and C.					
С		Type III functionally inte	grated. A supporting	g organization operated	ın connect	tion with, a	and functionally	ıntegrate	ed with,
		its supported organization	n(s) (see instructions)	You must complete f	Part IV, Se	ctions A,	D, and E.		
đ		Type III non-functionally	integrated. A supp	orting organization oper	ated in co	nnection w	vith its support	ed organiz	zation(s)
		that is not functionally int	egrated. The organiz	ation generally must sat	ısfy a dıstr	ibution red	quirement and	an attentiv	/eness
		requirement (see instructi	ions) You must con	nplete Part IV, Sections	A and D,	and Part	V.		
e	<u> </u>	Check this box if the orga	anization received a v	written determination fro	m the IRS	that it is a	Type I, Type II	, Type III	
		functionally integrated, or	r Type III non-function	nally integrated supportii	ng organiz	ation.			
		r the number of supported o	· ·					-	
_g		ide the following information Name of supported	about the supporte	d organization(s) (iii) Type of organization	(iv) is the orga	inization listed	L (u) Amount of		Lan Amount of other
	,,	organization	(11) 2114	(described on lines 1-10	in your governi	no document?	(v) Amount of support (see ins	-	(vi) Amount of other support (see instructions)
			 	above (see instructions))	Yes	No			- Cappert (God Monachono)
					!				
		·			 -				
							l		
						ļ			
					 -				
						 	 		
——— Total		· · · · · · · · · · · · · · · · · · ·					 		
						L	1		

FRIENDS OF THE TOMPKINS COUNTY

Schedule A·(Form 990 or 990-EZ) 2016 PUBLIC LIBRARY 15-6023

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

15-6023223 Page 2

	(Complete only if you checked fails to qualify under the test	ed the box on line	5, 7, or 8 of Part I	or if the organization	on failed to qualify	under Part III If the	organization
Se	ction A. Public Support		and domplots i al	· ··· /		·	
		T (10010	7,0040				
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
•	Gifts, grants, contributions, and membership fees received. (Do not						
	•		1		ļ		
_	include any "unusual grants.")			- 			
2	Tax revenues levied for the organ-						Ì
	ization's benefit and either paid to or expended on its behalf			ŀ			İ
2	• •		 	 		 -	
3	The value of services or facilities						
	furnished by a governmental unit to						
_	the organization without charge				 		
4	Total. Add lines 1 through 3			 	 		
5	The portion of total contributions						
	by each person (other than a				}	ļ.	
	governmental unit or publicly						•
	supported organization) included		<i>'</i>		'	ļ	
	on line 1 that exceeds 2% of the	,	`,				
	amount shown on line 11,]		1	ł		
_	column (f)				,	<u></u>	
<u>6</u>	Public support. Subtract line 5 from line 4 tion B. Total Support	<u></u>	<u> </u>	<u> </u>			
		Γ	,		T		
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 4		ļ				
8	Gross income from interest,						
	dividends, payments received on				ľ		
	securities loans, rents, royalties						
	and income from similar sources				<u> </u>		
9	Net income from unrelated business					1	-
	activities, whether or not the						
	business is regularly carried on						•
10	Other income. Do not include gain				İ		
	or loss from the sale of capital						
	assets (Explain in Part VI.)			ļ			
	Total support. Add lines 7 through 10			<u> </u>	<u> </u>	v	
	Gross receipts from related activities,					12	
13	First five years. If the Form 990 is for		first, second, thir	d, fourth, or fifth ta	ıx year as a sectior	n 501(c)(3)	
200	organization, check this box and stor	here			·		▶□
	tion C. Computation of Publi	·					
	Public support percentage for 2016 (li			olumn (f))		14	%
	Public support percentage from 2015					15	%
16a	33 1/3% support test - 2016. If the c	organization did no	t check the box o	n line 13, and line 1	14 ıs 33 1/3% or m	ore, check this box	and
	stop here. The organization qualifies						▶□
b	33 1/3% support test - 2015. If the o	rganization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check this	s box
	and stop here. The organization quali						▶□
17a	10% -facts-and-circumstances test	- 2016. If the org	anızatıon dıd not d	check a box on line	13, 16a, or 16b, a	and line 14 is 10% o	or more,
	and if the organization meets the "fact	ts-and-circumstand	es" test, check th	is box and stop h	ere. Explain in Pai	rt VI how the organ	zation
	meets the "facts-and-circumstances" t	est. The organizat	ion qualifies as a p	oublicly supported	organization	_	
b	10% -facts-and-circumstances test	- 2015. If the orga	anization did not d	check a box on line	13, 16a, 16b, or 1	7a, and line 15 is 1	0% or
	more, and if the organization meets th	e "facts-and-cırcur	nstances" test, ch	eck this box and	stop here. Explain	in Part VI how the	
	organization meets the "facts-and-circ	umstances" test. 7	he organization q	ualifies as a public	ly supported organ	nization	▶□
18	Private foundation. If the organization	n did not check a b	oox on line 13, 16	a, 16b, 17a, or 17b	, check this box ar	nd see instructions	
						dule A (Form 990	or 990-EZ) 2016

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to

Sec	qualify under the tests listed better A. Public Support	elow, please comp	лете Рад II)				
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Gifts, grants, contributions, and	1012012	10) 2010	(6) 2014	UJ 2013	(6) 2010	(I) IO(d)
•	membership fees received (Do not						
	include any "unusual grants ")	14,362.	20,195.	21,807.	14,161.	20,127.	90,652.
2	Gross receipts from admissions,		20,233.	2270070	12/1010	20,120,0	30,0320
2	merchandise sold or services per-			}	i		
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose	474,146.	499,218.	523,671.	511,796.	547,732.	2556563.
2	Gross receipts from activities that		233,2200	32370721	322,7300	317,732.	2330303.
3	are not an unrelated trade or bus-]]	Ì
	iness under section 513						
4	Tax revenues levied for the organ-						
-	ization's benefit and either paid to						ĺ
	or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5	488,508.	519,413.	545,478.	525,957.	567,859.	2647215.
	Amounts included on lines 1, 2, and		013,1100	313 / 1 / 00	02373371	30770331	201/2231
, ,	3 received from disqualified persons						0.
b	Amounts included on lines 2 and 3 received					· · · · · · · · · · · · · · · · · · ·	
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
	Add lines 7a and 7b						0.
	Public support. (Subtract line 7c from line 6)	,		~ ,		,	2647215.
Sec	ction B. Total Support	<u></u>	<u> </u>	<u> </u>	<u> </u>	<u></u>	
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 6	488,508.	519,413.	545,478.	525,957.	567,859.	2647215.
	Gross income from interest,						
	dividends, payments received on	i					
	securities loans, rents, royalties and income from similar sources	3,054.	1,898.	1,894.	2,685.	3,822.	13,353.
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975	_					
c	Add lines 10a and 10b	3,054.	1,898.	1,894.	2,685.	3,822.	13,353.
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12	Other income Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12)	491,562.	521,311.	547,372.	528,642.	571,681.	2660568.
14	First five years. If the Form 990 is for	the organization's	first, second, third	d, fourth, or fifth ta	x year as a section	501(c)(3) organiza	ation,
	check this box and stop here						
Sec	ction C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2016 (li	ne 8, column (f) div	vided by line 13, co	olumn (f))		15	99.50 %
16	Public support percentage from 2015	Schedule A, Part I	III, line 15			16	99.48 %
Sec	ction D. Computation of Inves	tment Income	Percentage				
17	Investment income percentage for 20	16 (line 10c, colum	nn (f) divided by lin	e 13, column (f))		17	.50 %
18	Investment income percentage from 2	2015 Schedule A, í	Part III, line 17			18	.52 %
19a	33 1/3% support tests - 2016. If the	organization did n	ot check the box o	on line 14, and line	15 is more than 3	3 1/3%, and line 17	7 is not
	more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization						
b	b 33 1/3% support tests - 2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and						
	line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization						
20	Private foundation. If the organization	n did not check a t	box on line 14, 19a	a, or 19b, check the	is box and see inst	tructions	▶□
	_ : 	·				A (F 00)	000 57) 0040

Schedule A (Form 990 or 990 EZ) 2016 PUBLIC LIBRARY

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
 Did the organization have any supported organization that does not have an IRS determination of status.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?

 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI
- Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
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Schedule A (Form 990 or 990-EZ) 2016

of its supported organizations? If "Yes." describe in Part VI, the role played by the organization in this regard.

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Schedule A (Form 990 or 990-EZ) 2016

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a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each

trustees of each of the supported organizations? Provide details in Part VI

FRIENDS OF THE TOMPKINS COUNTY

Schedule A (Form 990 or 990 EZ) 2016 PUBLIC LIBRARY 15-6023223 Page 6 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (B) Current Year Section A - Adjusted Net Income (A) Pnor Year (optional) Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 3 Other gross income (see instructions) 4 Add lines 1 through 3 4 5 Depreciation and depletion 5 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 7 Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year). a Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI) 2 Acquisition indebtedness applicable to non-exempt-use assets 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, Net value of non-exempt-use assets (subtract line 4 from line 3) 5 6 Multiply line 5 by .035 6 7 Recovenes of prior-year distributions Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1 Enter 85% of line 1 2 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Enter greater of line 2 or line 3 4 4 Income tax imposed in prior year 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Deck here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2016

instructions).

	rt V Type III Non-Functionally Integrated 509		pporting Orga	nizations	(continu		3-00232	ZJ Page /
Sect	ction D - Distributions							nt Year
1	Amounts paid to supported organizations to accomplish exe	•	1					
2	Amounts paid to perform activity that directly furthers exemp						<u> </u>	
	organizations, in excess of income from activity							
3	Administrative expenses paid to accomplish exempt purpose	es of suppo	orted organizations					
4	Amounts paid to acquire exempt use assets							
5	Qualified set aside amounts (prior IRS approval required)						1	
6	Other distributions (describe in Part VI) See instructions			····				
7	Total annual distributions. Add lines 1 through 6						1	
8	Distributions to attentive supported organizations to which the	ne organiza	ition is responsive				 	
_	(provide details in Part VI) See instructions	70 0794						
9	Distributable amount for 2016 from Section C, line 6						-	
10	Line 8 amount divided by Line 9 amount	····					1	
	Bho o amount divided by time 5 amount	1	(1)	T	(H)		(iı	
Sect	ion E - Distribution Allocations (see instructions)	Excess	Distributions	Underdi	(11) stribution -2016	S	Distrib Amount	utable
1	Distributable amount for 2016 from Section C, line 6	1 4 18	\$ \$ 1,200 and	- 12 mg/	J., L.	N 2		
2	Underdistributions, if any, for years prior to 2016 (reason-	133		l				- Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Cont
	able cause required explain in Part VI) See instructions						4.2 MAY 2.	
3	Excess distributions carryover, if any, to 2016	10 184 32	Sant & Star	2.35 (A.C.)	11/2/20 1		The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	(New 1971)
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	Applied to 2016 distributable amount	S. C. S. 188		1. (2.4%)	13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
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	Remainder Subtract lines 3g, 3h, and 3i from 3f	, , ,	, - , , , , ,	(A)	*2018	51	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	\$ 10 m
4	Distributions for 2016 from Section D,	<u>.</u> , ,		42.780	, 10 mg	2500	* A. T. T. T. T. T. T. T. T. T. T. T. T. T.	- C. C. B.
•	line 7 \$	125						
	Applied to underdistributions of prior years	38.383.5		70.70	246-13-7-7	4 33 1		
<u>u</u>	Applied to 2016 distributable amount			<u>(1848)</u>	(1 s) (2)	120	1	<u> </u>
	Remainder Subtract lines 4a and 4b from 4	10.0.00	8 2011 - 3 - 120	134.38		<u> </u>	+1.18.18.24.2	103.3
5	Remaining underdistributions for years prior to 2016, if	, 7,7%,	***************************************	27,47,467,5		×V.	C" 92" (92)	2 4 2 Se Me
J	any Subtract lines 3g and 4a from line 2. For result greater							
	than zero, explain in Part VI See instructions							
6	Remaining underdistributions for 2016 Subtract lines 3h	(1) 3 (A) (1) (A)	###-F-137937744.	-380.78 <u>-3</u> 3.78	18 18 18 18 18 18 18 18 18 18 18 18 18 1	* &	· · · · · · · · · · · · · · · · · · ·	
O	and 4b from line 1. For result greater than zero, explain in			**************************************		35%		
					(K. 1988).	34.		
	Part VI See instructions Excess distributions carryover to 2017. Add lines 3	, <u>, , , , , , , , , , , , , , , , , , </u>	<u> </u>		318783	10,	2 2 3 4 2	
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	and 4c	1. James K.		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	**************************************	, à,*	77. 20188	1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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Schedule A (Form 990 or 990-EZ) 2016

FRIENDS OF THE TOMPKINS COUNTY

Part VI	(Form 990 or 990-EZ) 2016 PUBLIC LIBRARY 15-6UZ3ZZ3 Page 8
	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV; Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)
	(See Instructions)
	· · · · · · · · · · · · · · · · · · ·
	
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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. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.rs.gov/form990

OMB No 1545-0047

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign 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," on 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," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

, .	coat No. (5)				
Section Name of or	501(c)(4), (5), or (6) organiza		COLDINIZ		oloyer identification number
Name of Oil		OF THE TOMPKINS	COUNTY	Emi	-
Part I-A		LIBRARY janization is exempt und	er section 501/c)	or is a section 527 o	15-6023223
L alt I-A	Complete ii tile oig	Janization is exempt und	101 3001(0)	or is a section ser of	gariization.
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	al campaign activity expendit				\$
3 Volunt	eer hours for political campa	ign activities		• •	
Dort I'D	Complete if the ove		lar as ation 501/s\/	2)	
Part I-B	<u> </u>	janization is exempt und			
	· ·	incurred by the organization un			\$
	•	incurred by organization manag			\$
	•	n 4955 tax, did it file Form 4720	for this year?	•	Yes No
	correction made?			-	Yes No
	," describe in Part IV	janization is exempt und	or coetion 501/o	execut section 501/	3/81
Part J-C					
	•	d by the filing organization for se	·-		\$
		ization's funds contributed to of	ther organizations for se		
•	t function activities			•	\$
	·	Add lines 1 and 2. Enter here a	and on Form 1120-POL,		
line 17	ь	-		•	\$
	e filing organization file Form				Yes No
		nployer identification number (El			
	-	tion listed, enter the amount pai			•
		omptly and directly delivered to		•	te segregated fund or a
politica	al action committee (PAC) If	additional space is needed, prov	vide information in Part	IV 	<u> </u>
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds If none, enter -0-	contributions received and promptly and directly
				lunus ii none, enter -o-	delivered to a separate
					political organization
					If none, enter -0-
			·		
					<u> </u>
				<u> </u>	
	<u> </u>				
		l			1

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

Schedule C (Form 990 or 990-EZ) 2016

LHA

632041 11-10-16

FRIENDS OF THE TOMPKINS COUNTY

Schedule C (Form 990 or 990 EZ) 2016 E	PUBLIC	C LIBR	ARY		15-6	023223 Page
Part II-A Complete if the orga	anizatio	n is exer	npt under section	n 501(c)(3) and file	d Form 5768 (ele	ection under
section 501(h)).					·	
	-	_		n Part IV each affiliated	group member's nam	e, address, EIN,
expenses, and share		, ,	•			
B Check L If the filing organization	ion check	ed box A a	nd "limited control" pro	ovisions apply		·
Limits	s on Lobb	ying Expe	nditures		(a) Filing	(b) Affiliated group
(The term "expende	itures" m	eans amou	ints paid or incurred.))	organization's totals	totals
						
1a Total lobbying expenditures to influe	•		, ,,	ł		
b Total lobbying expenditures to influe	_		ly (direct lobbying)			ļ.—————
c Total lobbying expenditures (add lin		116)	-	-	0.	ļ — — — — —
d Other exempt purpose expenditures			-			
e Total exempt purpose expenditures	•		•		0.	<u> </u>
f Lobbying nontaxable amount Enter					0.	
If the amount on line 1e, column (a) or	(b) is:		bying nontaxable am			
Not over \$500,000			the amount on line 1e.			
Over \$500,000 but not over \$1,000,			00 plus 15% of the exc			1
Over \$1,000,000 but not over \$1,50			00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,0	00,000		00 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000		<u>\$1,000,</u>	000		,	
		<u>-</u>				
g Grassroots nontaxable amount (ente	er 25% of	line 1f)			0.	<u> </u>
h Subtract line 1g from line 1a. If zero	or less, e	nter -0-				
i Subtract line 1f from line 1c If zero	or less, er	nter -0-		Ĺ		Ĺ
j If there is an amount other than zero	on eithei	r line 1h or	line 1i, did the organiza	ation file Form 4720	_	
reporting section 4911 tax for this ye	ear?			·	·	Yes No
(Some organizations that	at made a	section 5	eraging Period Under 01(h) election do not ate instructions for li	have to complete all of	f the five columns be	elow.
	Lobb	ying Expe	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2	2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount			,		•	
(150% of line 2a, column(e))			 	 		<u> </u>
c Total lobbying expenditures	·					
d Grassroots nontaxable amount						
e Grassroots ceiling amount (150% of line 2d, column (e))						
f Grassroots Johnwing expenditures						

Schedule C (Form 990 or 990-EZ) 2016

Schedule C-(Form 990 or 990-EZ) 2016 PUBLIC LIBRARY 15-60232

[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)).

or each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity 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	Yes	I			
local legislation, including any attempt to influence public opinion on a legislative matter	ł 1			Amount	
		 			
or referendum, through the use of		1			
or referendam, through the doc or					
a Volunteers?		L			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c Media advertisements?			[
d Mailings to members, legislators, or the public?		<u> </u>			
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?		<u> </u>			
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)?					, 3,19
b If "Yes," enter the amount of any tax incurred under section 4912	x 3'	7.	,~ ·		
c 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?	I			· ,	
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(4)	tion 501(c)(5), or s	section	1	
501(c)(6).					
			Y	'es	No
Were substantially all (90% or more) dues received nondeductible by members?			1		
			1 2		
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from Part III-B. Complete if the organization is exempt under section 501(c)(4), section 501 (c)(4).	tion 501(c)(? ;	2 3 Section		3, is
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from 	tion 501(c)(? ; 5), or s	section		e 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from Part III-B. Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes." Dues, assessments and similar amounts from members	tion 501(c)(d "No," OR	? ; 5), or s	2 3 Section		e 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from Part III-B. Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	tion 501(c)(d "No," OR	? ; 5), or s	2 3 section art III-A		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from Part III-B. Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes." Dues, assessments and similar amounts from members	tion 501(c)(d "No," OR	? :	sectionart III-A		e 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from Part 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 answere answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pole expenses for which the section 527(f) tax was paid).	tion 501(c)(d "No," OR	? 5), or s (b) Pa	2 3 section art III-A		e 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from Part III-B. Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pole expenses for which the section 527(f) tax was paid). a Current year	tion 501(c)(d "No," OR	? ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	sectionart III-A		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from Part III-B. Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexies for which the section 527(f) tax was paid). Current year Carryover from last year	tion 501(c)(d "No," OR	? 55), or s (b) Pa	sectionart III-A		e 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from Part III-B. Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexies for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	tion 501(c)(d "No," OR	? 55), or s (b) Pa	gection 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from Part 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." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexies for which the section 527(f) tax was paid). Current year Carryover from last year Carryover from last year	tion 501(c)(cd "No," OR	? 55), or s (b) Pa	gention and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from Part 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 answere answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexies for which the section 527(f) tax was paid). Current year Carryover from last year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenses for the section 162 (e) dues	tion 501(c)(cd "No," OR	? :55), or set (b) Pa	2 3 section art III-A		e 3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from Part III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pole expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the eddoes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	tion 501(c)(cd "No," OR	? :55), or set (b) Pa	2 3 section art III-A		3, is

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements

Complete if the organization answered "Yes" on 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.urs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

FRIENDS OF THE TOMPKINS COUNTY

Employer identification number

	PUBLIC LIBRARY		15-6023223
Pai	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds or A	Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		-
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advised fu	inds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	_	
	for charitable purposes and not for the benefit of the donor o	5 6	
	impermissible private benefit?	, , , , , , , , , , , , , , , , , , , ,	Yes No
Par		ganization answered "Yes" on Form 990, Part I	
1	Purpose(s) of conservation easements held by the organization		
•	Preservation of land for public use (e.g., recreation or e		illy important land area
	Protection of natural habitat	Preservation of a certified	•
	Preservation of open space	Treservation of a certified	Tistoric structure
2	Complete lines 2a through 2d if the organization held a qualif	ged conservation contribution in the form of a c	conservation easement on the last
_	day of the tax year	ica conscivation continuation in the form of a c	Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
	Number of conservation easements on a certified historic str.		
C	Number of conservation easements included in (c) acquired a		2c
d		arter 6/17/06, and not on a historic structure	اما
_	listed in the National Register	agood outpositional as bases and building agreement	2d
3	Number of conservation easements modified, transferred, release	eased, extinguished, or terminated by the orga	inization during the tax
	year >	amont to boost of Bo	
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the pen		
_	violations, and enforcement of the conservation easements it	•	YesNo
6	Staff and volunteer hours devoted to monitoring, inspecting,	nandling of violations, and enforcing conservat	tion easements during the year
		han afternal to the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of	
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservation e	easements during the year
_	> \$		DV)
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(n)(4)(i	
_	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	•	
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes the or	rganization's accounting for
Dar	t III Organizations Maintaining Collections of	Art Historical Treasures or Other	Similar Assets
<u> Fai</u>		•	Silillai Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public exh		of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ		
b	If the organization elected, as permitted under SFAS 116 (AS	•	
	treasures, or other similar assets held for public exhibition, ed	lucation, or research in furtherance of public se	ervice, provide the following amounts
	relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1		► \$ ► \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treat	asures, or other similar assets for financial gain	
	the following amounts required to be reported under SFAS 11	16 (ASC 958) relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		▶ \$
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.	Schedule D (Form 990) 2016

FRIENDS OF THE TOMPKINS COUNTY

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Combinated			LIBRARY	·			1	5-60	23223	Page 2
check all that apply a Public exhibition d Loan or exchange programs b Scholarly research e Other	Pa									
a Public exhibation d Loan or exchange programs b Scholarly research e Other c Preservation for future generations d Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII D burng the year, did the organization's collections and explain how they further the organization's exempt purpose in Part XIII D burng the year, did the organization's collections of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No Part IV Excrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is lis the organization and agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 91. Is list the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account tability? Yes No D If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part XII, line 10, 16, 225. D Contributions (a) Current year (b) Piny year (c) Piny years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years back (a) Finy years	3	Using the organization's acquisition, accessi	ion, and other record	ls, check any of the	following that are	a signi	ficant us	e of its o	collection	ıtems
b Scholarly research c Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C Other C										
c	а	Public exhibition	C	d Loan or exc	hange programs					
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII 5 Duming the year, did the organization solicit or receive donations of art, historical treasures, or other smillar assets to be sold to raise further than to be maintained as part of the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a is the organization an agent, frustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1b If "Yes," explain the arrangement in Part XIII and complete the following table: □ Beginning balance □ Amount □ 12. □ Distributions during the year □ Ending balance □ Distributions during the year □ Ending balance □ Distributions during the year □ Ending balance □ Distributions during the year □ Ending balance □ Distributions during the year □ Ending balance □ Distributions during the year □ Endowment Funds. Complete if the organization has been provided on Part XIII □ Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. □ Beginning of year balance □ (a) Current year □ (b) Provy year □ (c) Two years back □ (d) Three years back □ (e) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □ (a) Four years back □	b	Scholarly research	e	e Dther						
5 During the year, did the organization solicit or receive donations of art, histonical treasures, or other similar assets to be solid to praise funds a training the programments. Complete if the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an aspert, fursitee, oustodian or other intermediary for contributions or other assets not included on Form 990, Part X? If Yes, "explain the arrangement in Part XIII and complete the following table: Beginning balance Amount 1d.	С	Preservation for future generations		•						
Describe Describe Loraise Lundo arther than to be maintained as part of the organization's collection? Yes No	4	Provide a description of the organization's co	ollections and explain	n how they further th	ne organization's e	xempt	purpos	e ın Part	XIII	
Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, oustodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No If "Yes," explain the arrangement in Part XIII and complete the following table: C	5	During the year, did the organization solicit of	or receive donations	of art, historical trea	sures, or other sım	ıılar as	sets			
reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance d Additions during the year f Ending balance 2 Both the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part X, line 10. 1a Beginning of year balance 1a Beginning of year balance 1a Beginning of year balance 1a Beginning of year balance 1a Beginning of year balance 1a Beginning of year balance 1a Beginning of real that the year of the organization answered "Yes" on Form 990, Part X, line 10. 1b Contributions 2 9,598, 3 3,374, 4,438, 163,710, 167,226. 1c Contributions 2 2,598, 3 3,374, 4,438, 100, 167,226. 1c Contributions 2 2,375, 1,595, 1,182, 1,433, 1,494. 1d Grants or scholarships 1d Administrative expenses 175,065, 1,697,32, 164,763, 159,643, 163,710. Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment 88.2.0 % 175,065, 1,697,32, 164,763, 159,643, 163,710. Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment 88.2.0 % Temporarily restricted endowment 8.2.20 96 The percentages on lines 2a, 2b, and 2c should equal 10096. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by 17 Yes" on line 3a(i), are the related organizations shed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment thurds. Describe in Part XIII the intended uses of the organization's endowment thurds. Describe										No_
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Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value	Par				_					
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1a Land 38,000. 38,000. b Buildings 508,965. 332,893. 176,072. c Leasehold improvements 30,180. 21,602. 8,578. e Other 43,018. 36,889. 6,129.		Description of property		(-,	1 ,	•			(d) Book	value
b Buildings 508,965. 332,893. 176,072. c Leasehold improvements 30,180. 21,602. 8,578. e Other 43,018. 36,889. 6,129.			basis (investr	 ′ 	`	depre	ciation			000
c Leasehold improvements 30,180. 21,602. 8,578. e Other 43,018. 36,889. 6,129.							0 00			
d Equipment 30,180. 21,602. 8,578. e Other 43,018. 36,889. 6,129.		• , ,		50	8,965.	_ 33	<u>∠,89</u>	5.	T.76	,072.
e Other 43,018. 36,889. 6,129.		•	<u> </u>		0 100		1 66			- F. C. C.
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Schedule D (Form 990) 2016

FRIENDS OF	THE TOMPKIN	S COUNTY		
Schedule D (Form 990) 2016 PUBLIC LIBR	RARY		<u> 15-</u>	-6023223 Page
Part VII Investments - Other Securities.				
Complete if the organization answered "Yes"	on Form 990, Part IV,	line 11b. See Form 990, I	Part X, line 12	
(a) Description of security or category (including name of security)	(b) Book value		aluation: Cost or end-	of-year market value
(1) Financial derivatives				
(2) Closely held equity interests				
(3) Other				
(A)	 	· · · - · - · · · · · · · · · · · · · · · · 		
(B)	 			
(C)	 			
(D)				
(E)	 			
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				-
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"	on Form 990, Part IV,			
(a) Description of investment	(b) Book value	(c) Method of v	aluation Cost or end-	of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)	<u> </u>			
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				,
Part IX Other Assets.	<u> </u>			-
Complete if the organization answered "Yes"	on Form 990 Part IV	line 11d See Form 990	Part Y June 15	
) Description	ine 11d. See ronn 330,	rait X, line 15	(b) Book value
) Description			(b) Book value
(2)				
(3)				
	·			
(5)				
(6)				
(8)				
(9)	<u> </u>			
Total. (Column (b) must equal Form 990. Part X. col. (B) lin Part X Other Liabilities.	ne 15.)		>]	
Complete if the organization answered "Yes'	on Form 990, Part IV,	line 11e or 11f. See Form	990, Part X, line 25	
1. (a) Description of liability	Ī	(b) Book value	,	
(1) Federal income taxes				
(2)				
(3)		· · · · · · · · · · · · · · · · · · ·		
(4)				,
			1	

(5) (6) (7) (8) Total. (Column (b) must equal Form 990. Part X. col. (B) line 25.)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2016

Schedule D (Form 990) 2016

632054 08-29-16

Schedule I (Form 990) (2016) 2 [] Employer identification number 15-6023223 Open to Public. OMB No 1545-0047 Inspection (h) Purpose of grant or assistance UNRESTRICTED USE JNRESTRICTED USE X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance FRIENDS OF THE TOMPKINS COUNTY (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ٥. ٥. (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ▶ Attach to Form 990. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of cash grant 340,000, 98,500 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) For Paperwork Reduction Act Notice, see the Instructions for Form 990. 501(C)(3) Enter total number of other organizations listed in the line 1 table 16-1098211 N/A 15-0613223 General Information on Grants and Assistance (b) EIN PUBLIC LIBRARY criteria used to award the grants or assistance? 1 (a) Name and address of organization TOMPKINS COUNTY PUBLIC LIBRARY FINGER LAKES LIBRARY SYSTEM or government 101 EAST GREEN STREET 119 EAST GREEN STREET Name of the organization ITHACA, NY 14850 ITHACA, NY 14850 Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) Part Part II ¥ N

632101 11-01-16

FRIENDS OF THE TOMPKINS COUNTY PUBLIC LIBRARY

Schedule I (Form 990) (2016)

Part III

Page 2

15-6023223

Schedule I (Form 990) (2016) (f) Description of noncash assistance. (e) Method of valuation (book, FMV, appraisal, other) Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance 632102 11-01-16 Part IV

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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

► 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.

2016
Open to Public Inspection

OMB No 1545-0047

Name of the organization

FRIENDS OF THE TOMPKINS COUNTY PUBLIC LIBRARY

Employer identification number 15-6023223

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
LIBRARY RESOURCES FOR EVERYONE IN TOMPKINS COUNTY BY PROMOTING READING
BY PLACING MORE BOOKS IN MORE HANDS, RAISING FUNDS THROUGH BOOK SALES
AND OTHER ACTIVITIES, AWARDING GRANTS TO LIBRARIES AND COMMUNITY
ORGANIZATIONS, ADVOCATING FOR LIBRARY FUNDING, AND ENCOURAGING
VOLUNTEERISM.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
LIBRARIES AND COMMUNITY ORGANIZATIONS, ADVOCATING FOR LIBRARY FUNDING,
AND ENCOURAGING VOLUNTEERISM.
FORM 990, PART VI, SECTION A, LINE 2:
NATHAN FAWCETT AND FRANCES FAWCETT - FAMILY RELATIONSHIP. AL DEMERS AND
SAM MANNING - FAMILY RELATIONSHIP.
FORM 990, PART VI, SECTION A, LINE 6:
MEMBERSHIP IN THIS ORGANIZATION SHALL BE OPEN TO INDIVIDUALS IN SYMPATHY
WITH THE MISSION OF THE FRIENDS OF THE TOMPKINS COUNTY PUBLIC LIBRARY AND
EITHER UPON PAYMENT OF THE PRESCRIBED ANNUAL DUES OR HAVING VOLUNTEERED A
MINIMUM OF 30 HOURS TO THE BOOK SALE OR TO THE FRIENDS IN THE YEAR PRIOR TO
THE ANNUAL MEETING.
FORM 990, PART VI, SECTION A, LINE 7A:
EACH ADULT MEMBER OVER THE AGE OF 18 IS ENTITLED TO ONE VOTE AT THE ANNUAL
MEETING.