**Return of Organization Exempt From Income Tax** 

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

OMB No 1545-0047 2016

Department of the Treasiry Internal Revenue Service

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

Open to Public Inspection

Internal Reve			n about Form 990 and its instructio	ns is at www.ir	s.gov/form990.	1/1/6	Inspection
A For th	e 2016 calenda	r year, or tax year beginning					
B Check if a		e of organization				D Employer	dentification number
Address of		MICHIGA	N LIBRARY ASSOCIATIO	N			
	Doing	g business as				38-14	104517
Name cha	Numb	ber and street (or P O box if mail is not de	livered to street address)	-	Room/suite	E Telephone	number
Initial retu		10 BELLE CHASE WAY				<u>517-3</u>	<u> </u>
Final retu terminate		or town, state or province, country, and ZIF	or foreign postal code				
Amended	LAI	NSING	MI 48911			G Gross recei	pts\$ 604,298
$\equiv$	r Name	e and address of principal officer			Lives to the a con-		pordinates? Yes X No
Application	I -	AIL MADZIAR			H(a) Is this a grou	up return tor sui	)
	34	110 BELLE CHASE	WAY SUITE 100	_	H(b) Are all subo	ordinates inclu	ded? Yes No
		NSING	MI 48911	<u> </u>	) If "No,"	attach a list (i	see instructions)
I Tax-exe	mpt status X	501(c)(3) 501(c) ( )	◀ (insert no ) 4947(a)(1) or	527	<b>Z</b>		
J Website	.: ► WWW . 1	MILIBRARIES.ORG		1	H(c) Group exer	nption number	<b>&gt;</b>
K Form of	organization	Corporation Trust X Association	on Other ►	L	Year of formation 1	891	M State of legal domicile MI
Part I	Summa	ry		7			
1		the organization's mission or m	ost significant activities				
	SEE SCHE	_	•				
<u> </u>							
ř							
8 2	Check this box	If the organization discon	tinued its operations or disposed	of more than 2	5% of its net ass	ete	
Ø 3		g members of the governing bo		or more than 2	370 OF N3 FICE 433	3	13
φ Δ			governing body (Part VI, line 1b)			4	13
		individuals employed in calend				5	7
		volunteers (estimate if necessa				6	130
						<u> </u>	0
/ a	Not were letted by	business revenue from Part VIII usiness taxable income from Fo	, column (C), line 12			7a	-1,362
	ivet unrelated bu	isiness taxable income from Fo	TO SOUTH OF THE PARTY OF THE PA	+	Prior Yea	7b	Current Year
ا ۾ ا		nd grants (Part VIII, line 1h)				770	331,954
٦ م	_		269 000 1 5 2017	တ္တ		3,022	266,830
Revenue 01 0	Investment inco	e revenue (Part VIII, line 2g) me (Part VIII, column (A), lines Part VIII, column (A), lines 5, 6c	15 and DEC 15 2017	IRS-OSC		1,963	2,130
윤   1	Other revenue (	Part VIII, column (A), lines 5, 60	1 8c 90-10c and 11c)	<u></u>		3,132	3,384
,	Other revenue (i	i ait viii, coluiliii (A), iiiles 5, ce	ual Part VIII Column (A) line 12	_ ,		3,887	604,298
12		lar amounts paid (Part IX, colun		4		7,007	004,230
, ,		or for members (Part IX, colum				+	<u>_</u>
.		·		<b>.</b>	320	9,369	317,424
∍ 00   40-			ts (Part IX, column (A), lines 5–10	"	J2.	, 309	<u> </u>
_ E   .ou		ndraising fees (Part IX, column (	_	064			<u></u>
<u> </u>	_	g expenses (Part IX, column (D)		064	241	3,710	207 645
1/	-	(Part IX, column (A), lines 11a-	· · ·				307,645
R I	<del>-</del>	Add lines 13-17 (must equal P	• • • • • • • • • • • • • • • • • • • •			3,079	625,069
19	Revenue less ex	xpenses Subtract line 18 from I	ine 12			9,192	-20,771
25 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	Tatal assats (Da	and V. (con. 46)			Beginning of Cur	5,061	End of Year 841,008
Bala	Total assets (Pa	•					
//±2  -:	Total liabilities (F	· · · · · · · · · · · · · · · · · · ·				7,617	314,335
	••••	nd balances Subtract line 21 fr	om line 20		54	/,444	526,673
Part II		ıre Block					
			return, including accompanying sched				owledge and belief, it is
true, corr	ect, and complete	Declaration of preparer (other than	n officer) is based on all information o	r wnich preparer	nas any knowledg	<u>е</u>	
		and plan	ia				
Sign	Signature	_				Date	
Here	GAI	IL MADZIAR		EXECU	TIVE DIF	RECTOR	
	Type or pri	rint name and title					
	Print/Type prepare	r's name	Preparer's signature	- 4	Date	Check	TI PTIN
Paid	WILLIAM I.		will the		12/07	/17 self-em	
Preparer	Firm's name	STEVENS, KIR	INOVIC & TUCKER,	PC'	F	irm's EIN ▶	82-1734598
Use Only			E RD STE 100				
	Firm's address	• EAST LANSING				hone no	517-351-6836
May the IF		return with the preparer shown a	·				Yes No
		Act Notice, see the separate instr	<u> </u>				Form <b>990</b> (2016
DAA							. 5 555 (2010

			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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			_
	candidates for public office? If "Yes," complete Schedule C, Part I	3		_X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,		ĺ	
	Part III	5_		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or		ł	
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
4.4	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
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 as applicable		1	
а	5		<b>.</b>	
ь	Complete Schedule D, Part VI	11a	Х	
U	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	445		x
С	of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	11b	-	
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	44.		x
d		11c		
-	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	$\mathbf{x}$	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate		1	
	foreign investments valued at \$100,000 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 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		l	
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	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

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	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			
	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			l
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			l
	organization's current and former officers, directors, trustees, key employees, and highest compensated			l
	employees? If "Yes," complete Schedule J	23_		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			l
	to defease any tax-exempt bonds?	24c	<b></b> _	<u> </u>
ď	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	<u> </u>	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?		İ	
00	If "Yes," complete 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			
27	disqualified persons? If "Yes," 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 contributor or employee thereof, a grant selection committee member, or to a 35% controlled	27		x
28	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		
20	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	[`	х
b	A family member of a current or former officer, director, trustee, or key employee? <i>If</i> "Yes," <i>complete</i>	204		
~	Schedule L, Part IV	28b		x
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		
	was an officer, 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	<del>                                     </del>	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	\ <u></u>		<u> </u>
	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,		1	
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			ļ
	complete Schedule N, Part II	32		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, Parts 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		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	1	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	_		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			1
	Part VI	37	-	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	197 Note. All Form 990 filers are required to complete Schedule O	38	X	

FAIL	Check if Schedule O contains a response or note to any line in this	Part V			
_	Onesic in concedure o contains a response of note to any line in this	raitv		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a 14			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	_1b			
c D	Did the organization comply with backup withholding rules for reportable payments to vendor	s and			
re	reportable gaming (gambling) winnings to prize winners?		1c	X	
<b>2</b> a E	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				
S	Statements, filed for the calendar year ending with or within the year covered by this return	2a 7			
b If	If at least one is reported on line 2a, did the organization file all required federal employment	tax returns?	2b	X	
N	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see ins	structions)			
3a D	Did the organization have unrelated business gross income of \$1,000 or more during the yea	ir?	3a		X
b If	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in So	chedule O	_3b		
4a A	At any time during the calendar year, did the organization have an interest in, or a signature of	or other authority			
0	over, a financial account in a foreign country (such as a bank account, securities account, or	other financial			
a	account)?		4a		x
b If	If "Yes," enter the name of the foreign country ▶				
S	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Fil	nancial Accounts			
(F	(FBAR)		[		
5a V	Was the organization a party to a prohibited tax shelter transaction at any time during the tax	year?	5a	L	X
<b>b</b> D	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter	r transaction?	5b		X
c If	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a D	Does the organization have annual gross receipts that are normally greater than \$100,000, a	nd did the			
0	organization solicit any contributions that were not tax deductible as charitable contributions?	•	6a		X
b If	If "Yes," did the organization include with every solicitation an express statement that such co	ontributions or			
	gifts were not tax deductible?		6b		
7 0	Organizations that may receive deductible contributions under section 170(c).				
a D	Did the organization receive a payment in excess of \$75 made partly as a contribution and pa	artly for goods	[ ]		
aı	and services provided to the payor?	, ,	7a		x
b If	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 wh	nich it was			T
	required to file Form 8282?		7c		x
d If	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e D	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal b		7e		x
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal bene		7f		X
	If the organization received a contribution of qualified intellectual property, did the organizatio		7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the		7h		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund m				
	sponsoring organization have excess business holdings at any time during the year?	··	8		1
	Sponsoring organizations maintaining donor advised funds.				<u> </u>
	Did the sponsoring organization make any taxable distributions under section 4966?		9a	ĺ	İ
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related pers	son?	9b		
	Section 501(c)(7) organizations. Enter				
	Initiation fees and capital contributions included on Part VIII, line 12	10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
	Section 501(c)(12) organizations. Enter				
	Gross income from members or shareholders	11a			
	Gross income from other sources (Do not net amounts due or paid to other sources	7.0			
	against amounts due or received from them )	116			
-	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu		12a		ĺ
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			-
	Section 501(c)(29) qualified nonprofit health insurance issuers.	120			
	Is the organization licensed to issue qualified health plans in more than one state?		13a		1
	Note. See the instructions for additional information the organization must report on Schedule	e ()	134		
	Enter the amount of reserves the organization is required to maintain by the states in which				
	the organization is licensed to issue qualified health plans	13b			
	Enter the amount of reserves on hand	130			
	Did the organization receive any payments for indoor tanning services during the tax year?	[ 100 ]	14a	·····	X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in the second s	Schedule O	14a	<b>-</b>	<del>  ^</del>
<u></u>		Conduit C		m 99	<u>ــــــ</u>

Form 990 (2016) MICHIGAN LIBRARY ASSOCIATION 38-1404517 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 13 Enter the number of voting members of the governing body at the end of the tax year 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 O 13 1b 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 2 X any other officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X 6 6 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 X 7a one or more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, X 7b stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 X 8a a The governing body? X Each committee with authority to act on behalf of the governing body? 8b b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X 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 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? X 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 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X describe in Schedule O how this was done 12c X 13 13 Did the organization have a written whistleblower policy? 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? X a The organization's CEO, Executive Director, or top management official 15a X 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 X 16a with a taxable entity during the year? 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 MI List the states with which a copy of this Form 990 is required to be filed ▶ 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 Own website X Another's website X Upon request 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 20 3410 BELLE CHASE WAY, SUITE 100 ROMY FITSCHEN

517-394-2774

MI 48911

LANSING

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

Check if Schedule O contains a response or note to any line in this Part VII

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for	(do not check more than one box, unless person is both an officer and a director/trustee)		an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the			
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(44-211035-WIGC)	organization and related organizations
(1) KATHLEEN ZAENGER							-			
	1.00			ļ						
PRESIDENT	0.00			X	l			0	0	0
(2) STEVEN BOWERS										
ļ	1.00	l				П				
PRESIDENT ELECT	0.00			X				0	0	0
(3) LESLIE WARREN										
	1.00									Į.
PAST PRESIDENT	0.00			X				0	0	0
(4) RICHARD SCHNEIDE	R									
	1.00									
TREASURER/SECRETARY	0.00			X				0	0	0
(5) RAY ARNETT										
	1.00					l l				
MEMBER	0.00	X						0	0	0
(6) MICHELLE BOISVEN	WE-FOX		Г							
	1.00					\				
MEMBER	0.00	X						0	0	0
(7) MARC BOUCHER									-	
	1.00			1	ļ	ì l				Ì
MEMBER	0.00	X				li		0	0	0
(8) PAMELA CHRISTENS	EN									
	1.00			]	1					
MEMBER_	0.00	X						0	0	0
(9) CATHY LANCASTER					Π					
	1.00		ļ							1
MEMBER	0.00	X						0	0	0
(10) JAMES PLETZ			П							
	1.00									
MEMBER	0.00	X	L					0	0	0
(11)MICHAEL PRIEHS										
	1.00									[
MEMBER	0.00	X	1	1	1			l 0	l 0	ol o

(A) Name and title	(B) Average hours per week (list any	(d bo	o not o x, unlo	Pos check ess pe	c) ition more rson i	than or s both	ne an	(D)  Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W 21033-moc)	organization and related organizations
(12) JULIANE MORIA	1									
MEMBER	1.00	x						o	0	
(13) RANDY RILEY						$\Box$				
TV APRICES	1.00					1			0	
EX-OFFICIO (14) KRISTIN SHELI	0.00 EY	X	-			$\vdash$		0	0	
	1.00									1
MEMBER	0.00	X	<u> </u>		_	$\sqcup$		0	0	
(15) GAIL MADZIAR	40.00									
EXECUTIVE DIRECTOR	0.00	Ĺ.	L	x		1		117,297	0	5,957
									_	
			-		-					
		ļ	<u> </u>							
	•				3					
	-	-	<u> </u>		-					
		<u> </u>	L.	<u> </u>				117 207		F 05'
1b Sub-total c Total from continuation she	ets to Part VII	Sect	ion	Δ			<b>&gt;</b>	117,297		5,95
d Total (add lines 1b and 1c)							<u> </u>	117,297		5,95
2 Total number of individuals (in reportable compensation from				thos	se lis	ted a	bov	e) who received more than	\$100,000 of	
-										Yes No
3 Did the organization list any fe employee on line 1a? If "Yes,								loyee, or highest compensa	ated	3 X
4 For any individual listed on lin organization and related organization										
individual	ilizations greater	liiai	11 47 13	30,00	JO 7	11 16	S, C	omplete Schedule v for su	GII	4 X
5 Did any person listed on line for services rendered to the o									r individual	5 X
Section B. Independent Contracto				,,,,,,,		770 410				
Complete this table for your fi     compensation from the organ	ve highest comp	ens	ated	inde	pend for t	dent o	cont	ractors that received more	than \$100,000 of	rear
	(A) d business address	, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	0110	211011	70. 1		1	Descrir	(B) otion of services	(C) Compensation
Trains and	, D20111000 GGG1000		_							
							<u> </u>			
							1			
									<del></del>	
							<u> </u>			
					•					
2 Total number of understanding	controllers (m1	المرررا	a b.	. n.c.*	li=e-	tod 4 -	46.	and linted charge) who	<del></del>	
2 Total number of independent received more than \$100,000								WIIO		
DAA										Form 990 (20

d Related organizations	1a   1b   1c   1d   1e   1f	330,444	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
State of Related organizations	1b 1c 1d 1e	330,444				
b Membership dues c Fundraising events d Related organizations	1c 1d 1e	330,444		<b>E</b>		,
c Fundraising events d Related organizations	1d 1e		,			,
d Related organizations	1e		3	, ,		
·=/		· · · · · · · · · · · · · · · · · · ·	,	<i>",</i>	, ,	
ဖွဲ့ 🖺 e Government grants (contributions)	15		[14]	, ,	32	
f All other contributions, gifts, grants,	16			3 22 7	<i>"</i>	iiii i
and similar amounts not included above		1,510	March Bully Co	11,11	18 1 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
g Noncash contributions included in lines 1a-1f	: \$					
ប៉ុក្កី h Total. Add lines 1a-1f		<u> </u>	331,954			
en l		Busn Code	and the second	· 11. 11. 11.	31 11 1121	,,,,,,,,,,
2a CONFERENCES AND WORKS		ļ	195,343			
b INSTITUTE AND ACADEM	Y	ļ	65,872			
c JOBLINE			5,615	5,615		
ନ୍ଧ   d		ļ			<u> </u>	<u> </u>
e e						
f All other program service reveni	ше		266,830			
g Total. Add lines 2a–2f  3 Investment income (including di	vidende inte		266,630			
and other similar amounts)	vidends, inte	iiest,	2,130			2,130
4 Income from investment of tax-e	evemnt hond	proceeds >			<del></del>	2,130
5 Royalties	oxempt bond	proceeds >				<del></del>
(ı) Real		) Personal				
6a Gross rents	<del>-  </del>	<u>· -                                     </u>				
<b>b</b> Less rental exps						
C Rental inc or (loss)						
d Net rental income or (loss)		<b>•</b>				
7a Gross amount from (i) Securities	7a Gross amount from				<del> </del>	
other than inventory						
<b>b</b> Less cost or other						
basis & sales exps						
c Gain or (loss)						
d Net gain or (loss)						
8a Gross income from fundraising event	s					
(not including \$						
of contributions reported on line 1c)						
(not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses	a					
b Less direct expenses	b	<del></del>				
c Net income or (loss) from fundra	aising events	<u> </u>				
9a Gross income from gaming activities						
See Part IV, line 19	a					
b Less direct expenses	b					
c Net income or (loss) from gamir	ng activities		<del>-,</del>	<del> </del>	<del> </del>	<del></del>
10a Gross sales of inventory, less	_]					
returns and allowances	a					
b Less' cost of goods sold	b		ł			
c Net income or (loss) from sales  Miscellaneous Revenue	or inventory	Busn Code				
11a MISCELLANEOUS		Duali Code	3,384	3,384		
b h			3,384	3,384	<del></del>	<del></del>
, c				<del>                                     </del>		<del> </del>
d All other revenue		<del></del>	<del>                                     </del>			
e Total. Add lines 11a-11d		<b></b>	3,384			
12 Total revenue. See instructions	<u> </u>		604,298		0	2,130

Form 990 (2016) MI
Part IX Statem

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (B) Program service (C) Management and (D) (A) Total expenses Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 2000 1.63 . 1824 M. 11 (35) 4 Benefits paid to or for members Compensation of current officers, directors, 130,842 88,972 40,561 1,309 trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 136,41777,983 1,326 57,108 7 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 233 26,853 14,445 12,175 Other employee benefits 9,837 13,279 196 23,312 Payroll taxes Fees for services (non-employees) Management 5,616 5,213 403 Legal b 6,488 3,137 3,351 Accounting C 48,854 48,854 Lobbying Professional fundraising services See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 12 Advertising and promotion 14,770 11,154 25,924 Office expenses 13 10,357 9,903 20,260 14 Information technology 15 Royalties 15,838 15,839 31,677 16 Occupancy 1,963 1,265 698 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 7,813 146,470 138,657 Conferences, conventions, and meetings 19 20 21 Payments to affiliates 7,221 14,444 7,223 Depreciation, depletion, and amortization 22 1,246 ,203 2,449 23 Insurance 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)  $3,\overline{051}$ 3,051 AWARDS & GRANTS 324 449 125 **MISCELLANEOUS** C d e All other expenses 198,465 3,064 423,540 625,069 25 Total functional expenses. Add lines 1 through 24e 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 ▶ following SOP 98-2 (ASC 958-720)

		Check if Schedule O contains a response or note t	o any line in this Part X			П
				(A)		(B)
				Beginning of year		End of year
	1	Cash—non-interest bearing		752,584	1	748,576
	2	Savings and temporary cash investments		87,821	+	62,137
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		6,064	4	2,982
	5	Loans and other receivables from current and former offi	cers, directors,	,		
		trustees, key employees, and highest compensated emp	loyees			
		Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified pers	ons (as defined under section	on - 1866 - 1881 - 1881 - 1881 - 1881 - 1881 - 1881 - 1881 - 1881 - 1881 - 1881 - 1881 - 1881 - 1881 - 1881 -	17	11.
		4958(f)(1)), persons described in section 4958(c)(3)(B), a	and contributing employers a	and	100%	
		sponsoring organizations of section 501(c)(9) voluntary e	mployees' beneficiary		200	
र्घ		organizations (see instructions) Complete Part II of Scho	edule L		6	
Assets	7	Notes and loans receivable, net			7	
⋖	8	Inventories for sale or use		,	8	
	9	Prepaid expenses and deferred charges		21,028	9	23,531
	10a	Land, buildings, and equipment cost or				
		other basis Complete Part VI of Schedule D	10a 132,8			
	b	Less accumulated depreciation	10b 129,0			3,782
	11	Investments—publicly traded securities		1,588	11	
	12	Investments—other securities See Part IV, line 11		12		
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
_	16	Total assets. Add lines 1 through 15 (must equal line 34	)	885,061	16	841,008
	17	Accounts payable and accrued expenses		37,278		19,894
	18	Grants payable			18	
	19	Deferred revenue		300,339		294,441
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of			21	
ies	22	Loans and other payables to current and former officers,	•			
Liabilities		trustees, key employees, highest compensated employe	es, and			
Lia	22	disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third			23	
	24 25	Unsecured notes and loans payable to unrelated third pa Other liabilities (including federal income tax, payables to			24	
	23	parties, and other liabilities not included on lines 17-24)				
		of Schedule D	Complete Part A		25	
	26	Total liabilities. Add lines 17 through 25		337,617	25 26	314,335
_		Organizations that follow SFAS 117 (ASC 958), check	here > X and	337,017	20	311,333
es		complete lines 27 through 29, and lines 33 and 34.	and	;		
anc S	27	Unrestricted net assets		457,450	27	440,114
39	28	Temporarily restricted net assets		64,994		61,559
Ē	29	Permanently restricted net assets		25,000		25,000
Ē		Organizations that do not follow SFAS 117 (ASC 958)	, check here ▶ 🔲 and			
9		complete lines 30 through 34.	,			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds			30	
4ss	31	Paid-in or capital surplus, or land, building, or equipment	fund		31	
let /	32	Retained earnings, endowment, accumulated income, or			32	
Z	33	Total net assets or fund balances		547,444	33	526,673
	34	Total liabilities and net assets/fund balances		885,061		841,008

<u>orm</u>	990 (2016) MICHIGAN LIBRARY ASSOCIATION 38-1404517				Pag	ge 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		60	)4,:	298
2	Total expenses (must equal Part IX, column (A), line 25)	2		62	25,0	069
3	Revenue less expenses Subtract line 2 from line 1	3				771
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		54	17,	444
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10		52	26.	673
Pa	rt XII Financial Statements and Reporting			_		
	Check if Schedule O contains a response or note to any line in this Part XII					$ \overline{\mathbf{X}} $
					Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		ſ			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in					
	Schedule O					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		Ī	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		F			
	reviewed on a separate basis, consolidated basis, or both		ſ			
	Separate basis Consolidated basis Both consolidated and separate basis		ŀ			
b	Were the organization's financial statements audited by an independent accountant?			2b	x	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		ľ			*********
	separate basis, consolidated basis, or both					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		1	ĺ		
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in		Ī			
	Schedule O					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			Ì		
	the Single Audit Act and OMB Circular A-133?			3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		r			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3ь		
				Forr	n 990	(2016)

# SCHEDULE A (Form 990 or 990-EZ)

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

Public Charity Status and Public Support

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

gov/form990. Inspecti Employer identification number

		MICHIGAN LIE	RARY ASSOCIATIO	N		38-140	4517					
Part	1 Reas	son for Public Charity	Status (All organizations	must co	mplete	this part ) See instruction	ns.					
The org			se it is (For lines 1 through 12, o									
1	¬		ociation of churches described				$\alpha$					
2	٦.		A)(ii). (Attach Schedule E (Forn			^ ^ O	1					
3	7		ce organization described in sec			iii).	•					
4	=		d in conjunction with a hospital i			•	ospital's name.					
	city, and sta		•				,					
5	An organiza	tion operated for the benefit	of a college or university owned	or operat	ed by a g	overnmental unit described in	•					
-	_	(b)(1)(A)(iv). (Complete Part			, - 3							
6	A federal, st	ate, or local government or g	jovernmental unit described in s	ection 17	<sup>7</sup> 0(b)(1)(A	)(v).						
7		tion that normally receives a section 170(b)(1)(A)(vi). (C	substantial part of its support fromplete Part II )	om a gove	ernmental	unit or from the general publi	C					
8	7		170(b)(1)(A)(vi). (Complete Part	tll)								
9	An agricultu	ral research organization des	scribed in section 170(b)(1)(A)(i	ix) operat	ed ın conj	unction with a land-grant colle	ge					
_	An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land grant college of agriculture (see instructions). Enter the name, city, and state of the college or university.											
10 🔀	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete Part III.)											
11	7 .		exclusively to test for public safe									
12	₹ -	-	exclusively for the benefit of, to	-			nses					
			zations described in section 50									
			hat describes the type of suppor									
а	Type I.	A supporting organization op	erated, supervised, or controlled	d by its su	pported o	rganization(s), typically by giv	ing					
			wer to regularly appoint or elect		of the di	rectors or trustees of the						
			omplete Part IV, Sections A a									
b			pervised or controlled in connec									
			rting organization vested in the s	same per	sons that	control or manage the support	led					
_		ation(s) You must complete	•									
С			supporting organization operated structions) You must complete				/itn,					
d			d. A supporting organization ope				on(s)					
_			e organization generally must sa									
	requiren	nent (see instructions) You i	must complete Part IV, Section	ns Å and	D, and P	art V.						
е	Check to	his box if the organization red	ceived a written determination fro	om the IR	S that it is	s a Type I, Type II, Type III						
_			n-functionally integrated suppor	ting orgar	nization							
f		mber of supported organizat										
9		following information about the	1 ''									
	me of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10	1 ' '	organization	(v) Amount of monetary support (see	(vi) Amount of					
`	ar garrization		above (see instructions))	listed in your governing document?		instructions)	other support (see instructions)					
				Yes	No							
(A)												
(B)												
(C)												
				1								
(D)												
(E)												
				<u> </u>	<u> </u>							
Total		1.		1	<u> </u>							
ror Pap	erwork Reducti	ion Act Notice, see the Instruc	tions for horm 990 or 990-EZ.			Schedule	A (Form 990 or 990-EZ) 2016					

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

360	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4			/			
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	/(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4		<u> </u>	<u>/</u>			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10		1/				-
12	Gross receipts from related activities, etc		1			12	
13	First five years. If the Form 990 is for the		ft, second, third, fo	urth, or fifth tax ye	ar as a section 50	1(c)(3)	
	organization, check this box and stop here						<b>•</b>
	tion C. Computation of Public Su	<del></del>			· _		
14	Public support percentage for 2016 (line 6			ın (f))		14	%_
15	Public support percentage from 2015 Sche	,				15	%
16a	33 1/3% support test—2016. If the organi				33 1/3% or more,	check this	
L	box and stop here. The organization quali						▶ _
b	33 1/3% support test—2015. If the organi				15 is 33 1/3% or m	ore, check	. □
17a	this box and stop here. The organization of 10%-facts-and-circumstances test—201	. , .			Ca as 10h as dha	. 44	
174	10% or more, and if the organization meet						
	Part VI how the organization meets the "fa	1					
	organization	Cis-and-Circumsta	ances test The Or	yanızatıon qualine:	s as a publicly sup	ported	▶ ["
b	10%-facts-and-circumstances test—201	5/If the organizat	tion did not check s	hov on line 13 1	6a 16h or 17a ar	nd line	
_	15 is 10% or more, and if the organization	•					
	Explain in Part VI how the organization me	1			•		
	supported organization	iio iuoto ant		ot the organizati	on quannes as a p	abiloty	▶ □
18	Private foundation. If the organization did	I not check a box	on line 13 16a 16	ib. 17a. or 17h. ch	eck this how and s	ee	
	instructions			_,,,	tille box alla 3	<del></del>	▶ □
							00 000 57) 204

## 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 qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support	, ,					
Calen	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	384,036	410,252	343,934	329,540	330,944	1,798,706
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	320,402	286,469	255,620	289,000	261,215	1,412,706
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge					i	
6	Total. Add lines 1 through 5	704,438	696,721	599,554	618,540	592,159	3,211,412
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
	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						,
С	Add lines 7a and 7b				·····		
8	Public support. (Subtract line 7c from line 6)						3,211,412
	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6	704,438	696,721	599,554	618,540	592,159	3,211,412
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,983	2,064	1,817	1,963	2,130	9,957
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	!		!			
С	Add lines 10a and 10b	1,983	2,064	1,817	1,963	2,130	9,957
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)	706,421	698,785	601,371	620,503	594,289	3,221,369
14	First five years. If the Form 990 is for the	-	t, second, third, fo	urth, or fifth tax yea	ar as a section 50	1(c)(3)	
	organization, check this box and stop her						<u> </u>
	tion C. Computation of Public S						
15	Public support percentage for 2016 (line 8	• • • • • • • • • • • • • • • • • • • •	•	nn (f))		15	99.69%
16	Public support percentage from 2015 Sch						99.69%
	tion D. Computation of Investme			) (5)		47	
17	Investment income percentage for 2016 (			s, column (t))		17	
18	Investment income percentage from 2015			a 14 and line 15 :-	more than 22 4/2		
19a	33 1/3% support tests—2016. If the organization is not more than 33 1/3%, check this b						<b>▶</b> X
<b>L</b>	33 1/3% support tests—2015. If the orga						<b>,</b> _
b	line 18 is not more than 33 1/3%, check the						▶ [
20	Private foundation. If the organization di						<b>•</b>

Page 4

## MICHIGAN LIBRARY ASSOCIATION **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 1 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 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)
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- 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
- 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
- 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
- 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
- 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
- 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)
- 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?
- 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.
- 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)
- 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)
- 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.
- 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.
- 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
  - 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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	10b		

	ille A (Folini 350 0) 550-EZ) 2010			30 4
Pai	t IV Supporting Organizations (continued)	<del></del>	Vas	No.
44	Here the appropriate appeared a getter contribution from any of the following persons?	$\vdash$	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		1	,
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
h	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	<i>"</i>		
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	[ " ]	4.	
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	Z	741	1. "
	controlled the organization's activities. If the organization had more than one supported organization,		50 10 200 10 200 10	3973
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported		Maria da	1991
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carned out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization	2		l
Sect	ion C. Type II Supporting Organizations			
		$\Box$	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	4		•
Soci	the supported organization(s) ion D. All Type III Supporting Organizations			
3601	ion b. All Type in Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		l
Sect	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions	)		
а				
b	· · · · · · · · · · · · · · · · · · ·	. 4 1		
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instruc	tions)		
_	Astronomy Tools Assessed (a) and (b) halous		Yes	No
	Activities Test <i>Answer (a) and (b) below.</i> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	_	163	110
а	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	these supported organization(s) to which the organization was responsive. It is a full in real windering the supported organizations and explain how these activities directly furthered their exempt purposes,	1		
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a		Ì
b	The state of the s			
_	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	Ì		
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
a	D. I. I			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
t	The state of the s		1	
-	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b	<u> </u>	

Part V: Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	<u>aniza</u>	tions				
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on No	v 20,	1970 (explain in Part VI) S	ee			
instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E						
Section A - Adjusted Net Income		(A) Pnor Year	(B) Current Year			
			(optional)			
1 Net short-term capital gain	1_					
2 Recoveries of prior-year distributions	2					
3 Other gross income (see instructions)	3					
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)	7					
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8					
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1 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)	<u> </u>					
2 Acquisition indebtedness applicable to non-exempt-use assets	2					
3 Subtract line 2 from line 1d	3					
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,						
see instructions)	4					
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6 Multiply line 5 by 035	6					
7 Recoveries of prior-year distributions	7					
8 Minimum Asset Amount (add line 7 to line 6)	8					
Section C - Distributable Amount			Current Year			
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1					
2 Enter 85% of line 1	2					
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3					
4 Enter greater of line 2 or line 3	4					
5 Income tax imposed in prior year	5					
6 Distributable Amount. Subtract line 5 from line 4, unless subject to						
emergency temporary reduction (see instructions)	6					
7 Check here if the current year is the organization's first as a non-functionally integrated		Il supporting organization	(see			
instructions)	••	• •	,			

Schedule A (Form 990 or 990-EZ) 2016

any Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI See instructions
Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in

Excess distributions carryover to 2017. Add lines 3j

Part VI See instructions

Breakdown of line 7

b Excess from 2013
 c Excess from 2014
 d Excess from 2015
 e Excess from 2016

and 4c

8

Part VI

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)

#### SCHEDULE C (Form 990 or 990-EZ)

# Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► 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.irs.gov/form990.

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.

• Section 501(c)(4), (5), or (6) organizations: Complete Part III

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

Nam	e of organ	ization	Employer ident	Employer identification number				
		MICHIGAN LIBRARY	ASSOCIATION		38-14045	17		
Pa	t I-A	Complete if the organization is e	xempt under section 501(c	) or is a section	527 organizatio	on.		
1	Provide	a description of the organization's direct and	indirect political campaign activities	in Part IV (see insti	ructions for			
	definition	n of "political campaign activities")						
2	Political	campaign activity expenditures (see instruction	ons)		▶ \$	48,854		
3	Voluntee	r hours for political campaign activities (see				<del></del> -		
Pa	rt I-B	Complete if the organization is e	xempt under section 501(c	)(3).				
1	Enter the	e amount of any excise tax incurred by the or	ganization under section 4955		▶ \$			
2	Enter the	e amount of any excise tax incurred by organ	ization managers under section 495	5	▶ \$			
3		janization incurred a section 4955 tax, did it f	ile Form 4720 for this year?			Yes No		
		orrection made?				Yes No		
		describe in Part IV						
- 4	rt I-C	Complete if the organization is e			on 501(c)(3).			
1		e amount directly expended by the filing organ	nization for section 527 exempt fund	tion				
	activities				▶ \$			
2		e amount of the filing organization's funds co	ntributed to other organizations for s	ection				
_		mpt function activities			▶ \$			
3		empt function expenditures. Add lines 1 and 2	2 Enter here and on Form 1120-PO	L,				
	line 17b	Service of a State of Add DOL Coult			▶ \$			
4		iling organization file Form 1120-POL for this	-			Yes No		
5		e names, addresses and employer identificat						
		tion made payments. For each organization l						
		unt of political contributions received that wer arate segregated fund or a political action co						
	as a sep			1 T		(a) Amount of political		
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and		
					funds If none, enter -0-	promptly and directly		
						delivered to a separate		
						political organization If none, enter -0-		
(1)		<del></del>						
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(2)					<del>-</del>			
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(3)								
• •								
(4)								
		<u></u>						
(5)								
(6)								
	<u> </u>							
For F	aperwork	Reduction Act Notice, see the Instructions for	Form 990 or 990-EZ.		Schedule C (Fo	orm 990 or 990-EZ) 201		

Schedule C (Form 990 or 990-EZ) 2016 MICHI	GAN LIBRAR	RY ASSOCIATE	ION	38-1	404517	Page <b>2</b>
Part II-A Complete if the organiz section 501(h)).	ation is exemp	t under section 5	01(c)(3) and	filed Form	5768 (elect	ion under
A Check ▶ ☐ if the filing organization	n belongs to an	affiliated group (a	nd list in Part	IV each aff	llated group	member's
name, address, EIN,	expenses, and s	hare of excess lot	bvina expend	ditures).	a.oa group	
B Check ▶ ☐ if the filing organization						
Limits on Lob	bying Expendit	ures	Т.	(a) Filing	,	(b) Affiliated
(The term "expenditures" n	neans amounts p	aid or incurred.)		organization's	totals	group totals
1a Total lobbying expenditures to influence pu					0	
b Total lobbying expenditures to influence a l		ct lobbying)		4	8,854	
c Total lobbying expenditures (add lines 1a a	nd 1b)				8,854	
d Other exempt purpose expenditures					6,215	
e Total exempt purpose expenditures (add lin			<u>_</u>	62.	5,069	
f Lobbying nontaxable amount Enter the am	ount from the follow	ing table in both				
columns				11:	8,760	
If the amount on line 1e, column (a) or (b) is:	The lobbying non	ntaxable amount is:			77	, , , , , , , , , , , , , , , , , , ,
Not over \$500,000	20% of the amount	t on line 1e				
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15%	of the excess over \$500	0,000			
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10%	of the excess over \$1.0	00,000			
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5%	of the excess over \$1,50	0,000			
Over \$17,000,000	\$1,000,000					
g Grassroots nontaxable amount (enter 25%				2	9,690	
h Subtract line 1g from line 1a If zero or less	, enter -0-				0	
i Subtract line 1f from line 1c If zero or less,					0	
j If there is an amount other than zero on eitl	ner line 1h or line 1i,	did the organization fi	le Form 4720			
reporting section 4911 tax for this year?	<del></del>					Yes No
(Some organizations that made	a section 501(h)	ng Period Under some some some some some some some some	ve to comple		five columns	s below.
Lot	bying Expenditu	res During 4-Year	Averaging Pe	riod		
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(4	d) 2016	(e) Total
2a Lobbying nontaxable amount	117,236	123,364	125,	962	118,760	485,322
b Lobbying ceiling amount (150% of line 2a, column(e))						727,983
c Total lobbying expenditures	44 100	45 210	45	100	40.054	100 050

	Appliantale	O During T Tour A	veraging r criou		
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount	117,236	123,364	125,962	118,760	485,322
b Lobbying ceiling amount (150% of line 2a, column(e))					727,983
c Total lobbying expenditures	44,100	45,318	45,100	48,854	183,372
d Grassroots nontaxable amount	29,309	30,841	31,491	29,690	121,331
e Grassroots ceiling amount (150% of line 2d, column (e))					181,997
f Grassroots lobbying expenditures				0	

Schedule C (Form 990 or 990-EZ) 2016

Schedule C (Form 990 or 990-EZ) 2016 MICHIGAN LIBRARY ASSOCIATION 38	3-140	4517	1	Р	age 3
Part 11-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	T filed	Form	5768		
For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(á	a)	(b)	1	
description of the lobbying activity.	Yes	No	Amo	unt	
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 a Volunteers?					
<ul><li>b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?</li><li>c Media advertisements?</li></ul>				,	
d Mailings to members, legislators, or the public?					
Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities?				•	
j Total Add lines 1c through 1i					
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b If "Yes," enter the amount of any tax incurred under section 4912					
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?					
Part III-A Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6).	1(c)(5),	or sec	ction		
			-	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior ye	ar?		3		L
Part III-B Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No, answered "Yes."				3, is	
Dues, assessments and similar amounts from members		1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of					
political expenses for which the section 527(f) tax was paid).					
a Current year		2a			
b Carryover from last year		2b			
c Total		2c			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the					
excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying					
and political expenditure next year?		4			
5 Taxable amount of lobbying and political expenditures (see instructions)		5			
Part IV Supplemental Information					
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), P	art II-A, lu	nes 1 an	d		

2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

SCHEDULE C, PART I-A, LINE 1

MICHIGAN LIBRARY ASSOCIATION DID NOT ENGAGE IN DIRECT OR INDIRECT POLITICAL CAMPAIGN ACTIVITIES.

Part IV Supplemental Information (continued)

## SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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.irs.qov/form990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

_M	ICHIGAN LIBRARY ASSOCIATION		38-1404517
Pa	Organizations Maintaining Donor Advised Fu		
	Complete if the organization answered "Yes" on F	orm 990, Part IV, line 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 writing that	the assets held in donor advised	
	funds are the organization's property, subject to the organization's excl		☐ Yes ☐ No
6	Did the organization inform all grantees, donors, and donor advisors in	-	
	only for charitable purposes and not for the benefit of the donor or dono	- <del>-</del>	
	conferring impermissible private benefit?	, , , , , , , , , , , , , , , , , , , ,	Yes No
Pa	ert II Conservation Easements.		
	Complete if the organization answered "Yes" on F	Form 990, Part IV, line 7	
1	Purpose(s) of conservation easements held by the organization (check	all that apply)	
	Preservation of land for public use (e.g., recreation or education)	Preservation of a historically impe	ortant land area
	Protection of natural habitat	Preservation of a certified historic	c structure
	Preservation of open space	_	
2	Complete lines 2a through 2d if the organization held a qualified conse	rvation contribution in the form of a conse	ervation
	easement on the last day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic structure incl	uded ın (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/	06, and not on a	
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, released, ex	tinguished, or terminated by the organizat	tion during the
	tax year ▶		•
4	Number of states where property subject to conservation easement is I	ocated >	
5	Does the organization have a written policy regarding the periodic moni		
	violations, and enforcement of the conservation easements it holds?		☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling o	f violations, and enforcing conservation e	asements during the year
	<b>•</b>	•	,
7	Amount of expenses incurred in monitoring, inspecting, handling of viol	ations, and enforcing conservation easen	nents during the year
	<b>▶</b> \$		•
8	Does each conservation easement reported on line 2(d) above satisfy t	he requirements of section 170(h)(4)(B)(i	)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation easeme	ents in its revenue and expense statemer	nt, and
	balance sheet, and include, if applicable, the text of the footnote to the	organization's financial statements that d	escribes the
	organization's accounting for conservation easements		· · · · · · · · · · · · · · · · · · ·
Pa	Organizations Maintaining Collections of Art,		Similar Assets.
	Complete if the organization answered "Yes" on F	" <u> </u>	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), n		
	works of art, historical treasures, or other similar assets held for public		erance of
_	public service, provide, in Part XIII, the text of the footnote to its financi		
þ	If the organization elected, as permitted under SFAS 116 (ASC 958), to		
	works of art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	erance of
	public service, provide the following amounts relating to these items		
	(i) Revenue included on Form 990, Part VIII, line 1		<b>▶</b> \$
	(ii) Assets included in Form 990, Part X		▶ \$
2	If the organization received or held works of art, historical treasures, or		ovide the
	following amounts required to be reported under SFAS 116 (ASC 958)	relating to these items	
	Revenue included on Form 990, Part VIII, line 1		<b>▶</b> \$
h	Assets included in Form 990, Part X		<b>b</b> \$

	rt III Organizations Maintaining		Art, Hi	storical Tr	easures,	or Other	Simila	ar Ass	ets (	continue		<u> </u>
	Using the organization's acquisition, accessio								•			
	collection items (check all that apply)											
а	Public exhibition	d 🗌	Loan or e	exchange prog	grams							
b	Scholarly research	е 🗌	Other									
C	Preservation for future generations											
4	Provide a description of the organization's col	lections and explaii	n how the	y further the o	organization's	s exempt p	urpose II	n Part				
	XIII											
5	During the year, did the organization solicit or										$\Box$	
	assets to be sold to raise funds rather than to		part of the	e organization	's collection?	•				Yes	Ш	No
~ Pa	ft IV Escrow and Custodial Arra	_	<b></b> .	000 D-	-4 IV / 15 /							
	Complete if the organization	answered "Yes	on Fo	rm 990, Pa	irt IV, line s	, or repo	orted ar	1 amo	unt or	n Form		
	990, Part X, line 21.		1 1									
та	Is the organization an agent, trustee, custodia	in or other intermed	liary for c	ontributions o	r other asset	s not				□ v <sub></sub>		NI.
	included on Form 990, Part X?									∐ Yes	Ш	No
D	If "Yes," explain the arrangement in Part XIII a	ina complete the to	ollowing ta	able			Г			Amount		—
_	Paginning halance						-	40		Amount		—
C	Beginning balance							1c		<del></del>		—
đ	Additions during the year						-	1d				
•	Distributions during the year						-	1e			_	
72	Ending balance  Did the organization include an amount on Fo	rm 000 Bart V line	21 for a	accrow or our	todial accour	t hability?	L	.,		Yes	$\overline{\Box}$	No
	If "Yes," explain the arrangement in Part XIII					=				1es	H	140
-	et V Endowment Funds.	Officer field if the e	Apianatio	ii iias beeli pi	TOVIDED OILL	art Am			***			
	Complete if the organization	answered "Yes	" on Fo	rm 990 Pa	rt IV line 1	10						
	Somplete if the organization	(a) Current year		Prior year	(c) Two yea	J	(d) Thre	e years b	ack	(a) Four ye	ears b	ack
1a	Beginning of year balance	,,,,	, ,		<u> </u>					., ,	_	
	Contributions											
	Net investment earnings, gains, and											
·	losses											
d	Grants or scholarships											
	Other expenditures for facilities and											
	programs		İ									
f	Administrative expenses		ĺ									
g	End of year balance						-					
2	Provide the estimated percentage of the curre	ent year end baland	e (line 1g	g, column (a))	held as	•						
а	Board designated or quasi-endowment	%		,								
b	Permanent endowment ▶ %											
С	Temporarily restricted endowment ▶	%										
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%										
3a	Are there endowment funds not in the posses	sion of the organiz	ation that	are held and	administered	d for the				_		
	organization by									Y	es_	No
	(i) unrelated organizations									3a(i)		
	(ii) related organizations									3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization	-								3b		
4	Describe in Part XIII the intended uses of the		owment f	unds								
Pa	et VI Land, Buildings, and Equi		_	_			_		_			
	Complete if the organization	answered "Yes	on Fo	<u>rm 990, Pa</u>	art IV, line	<u>11a See</u>	Form	<u>990, F</u>	Part X	<u>, line 10</u>		
	Description of property	(a) Cost or other		(b) Cost or		l ' '	Accumulated	i		(d) Book va	lue	
		(investment	)	(oth	er)	de	preciation		ļ			
1a	Land		-						1			
	Buildings								ļ			
	Leasehold improvements	_			20 272		100	^^-	<del>                                     </del>			700
	Equipment			1	32,870		129	<u>, บชช</u>	<u> </u>		<u>s, `</u>	<u> 782</u>
	Other	15		<u> </u>		<u> </u>			<u> </u>		<del>.</del>	700
Tota	I. Add lines 1a through 1e (Column (d) must e	quai ⊢orm 990, Pa	π X, colu	mn (B), line 1	UC)				L		ر د	782

Part VII	Investments—Other Securities. Complete if the organization answered "Yes" on	Form 990 Part IV line	e 11h. See Form 990. F	Part X line 12
	(a) Description of security or category	(b) Book value	(c) Method of	
	(including name of security)		Cost or end-of-yea	ar market value
(1) Financial	derivatives			
(2) Closely-he	eld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
, (G)				
(H)				
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 12.) ▶		7 77 77	,
Part VIII	Investments—Program Related.			_
	Complete if the organization answered "Yes" on	Form 990, Part IV, line	e 11c See Form 990, F	art X, line 13
	(a) Description of investment	(b) Book value	(c) Method of	valuation
		1	Cost or end-of-yea	ar market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				_
(9)				
	n (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, lin	e 11d. See Form 990, F	Part X, line 15.
	(a) Description			(b) Book value
(1)				,
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				***
(9)				
	ın (b) must equal Form 990, Part X, col. (B) line 15.)		<b></b>	-
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" on	Form 990, Part IV, lin	e 11e or 11f See Form	990. Part X.
	line 25.			,,
1.	(a) Description of liability	(b) Book value		
	Income taxes	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1	
(2)			1	
(3)				
(4)			1	
(5)		·	1	
	-		†	
(6)	<del>-</del>	-	1	
(7)		<del> </del>	1	
(8)			-	
(9)	on (h) must equal Form 000. Bort V and (D) (in 25.)		1	
	nn (b) must equal Form 990, Part X, col (B) line 25)	thata to the arrangement of	financial statements that say	orte the
-	r uncertain tax positions. In Part XIII, provide the text of the foo			r
organization's	liability for uncertain tax positions under FIN 48 (ASC 740) C	HECK HERE IT THE TEXT OF THE	ioothole has been provided l	II F &I L AIII

4a

4b

4c

5

625,069

Part XIII Supplemental Information.

b Other (Describe in Part XIII )

c Add lines 4a and 4b

Amounts included on Form 990, Part IX, line 25, but not on line 1
 Investment expenses not included on Form 990, Part VIII, line 7b

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Part XIII Supplemental Information (continued)

## SCHEDULE O (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

2016

Open to Public

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

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

rs.gov/form990. Inspection
Employer identification number

Name of the organization

MICHIGAN LIBRARY ASSOCIATION

38-1404517

FORM 990 - ORGANIZATION'S MISSION

TO ENCOURAGE AND IMPLEMENT EDUCATIONAL AND LITERARY GOALS TRHOUGH THE USE OF LITERARY INFORMATION RESOURCES. ENGAGE IN ACTITIES DESIGNED TO ENSURE THAT EVERY PERSON IN MICHIGAN HAS UNFETTERED ACCESS TO LIBRARIES AND RELATED EDUCATION ENHANCING RESOURCES.

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT ADVOCACY AND RELATED SERVICES

FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS
THE ORGANIZATION HAS MEMBERS.

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS ORGANIZATION HAS MEMBERS WHO MAY ELECT MEMBERS OF THE GOVERNING BODY.

FORM 990, PART VI, LINE 7B - DECISIONS SUBJECT TO APPROVAL OF MEMBERS DECISIONS OF THE GOVERNING BODY ARE SUBJECT TO APPROVAL BY MEMBERS.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 STAFF WILL REVIEW THE 990, THEN DELIVER A COPY TO THE BOARD OF DIRECTORS FOR REVIEW PRIOR TO THE BOARD MEETING WHERE THE DOCUMENT IS PRESENTED.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

THE POLICY IS REVIEWED WITH THE DIRECTORS AND KEY EMPLOYEES ANNUALLY. EACH

DIRECTOR SIGNS A COPY OF THE POLICY ANNUALLY. THE ORIGINAL SIGNED COPIES

ARE KEPT AT THE ASSOCIATION'S OFFICES.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
THE PRESIDENT WILL GATHER MATERIALS, INCLUDING SALARY COMPARISONS, AND
COMPLETE A WRITTEN EVALUATION OF THE EXECUTIVE DIRECTOR WITH A SALARY
RECOMMENDATION. THE EVALUATION WILL BE PRESENTED TO, REVIEWED AND DISCUSSED
BY THE EXECUTIVE COMMITTEE FOR RECOMMENDATION OF APPROVAL TO THE FULL
BOARD.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
THE GOVERNING DOCUMENTS AND CONFLICTS OF INTEREST POLICY ARE AVAILABLE BY
REQUEST BY CONTACTING THE MICHIGAN LIBRARAY ASSOCIATION OFFICES. FINANCIAL
INFORMATION IS DISTRIBUTED VIA AN ANNUAL REPORT AT THE ANNUAL MEMBERSHIP
MEETING.

FORM 990, PART XII, LINE 2C - CHANGE IN FINANCIAL REVIEW PROCESS

OVERSIGHT OF THE AUDIT AND FINANCIAL STATEMENTS HAS NOT CHANGED FROM THE

PRIOR YEAR