

Short Form Return of Organization Exempt From Income Tax

29492 1 5 3 0 6 8 2 3

2017

Open to Public

Inspection

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

Department of the Treasury Internal Revenue Service

▶ Go to www.irs.gov/Form990EZ for instructions and the latest information.

			Dec	ember,	31 , 20	17				
B	B Check if applicable. C Name of organization D Address change Pewaukee Public Library Foundation Inc.		D Empl	oyer ide	ntification number	er				
_	Address c	_		391933537						
	Name cha	=	E Telephone number							
_	Initial retur			262	2-691-1463					
=	Finai retun Amended	n/terminated	City or town, state or province, country, and ZIP or foreign postal code	(N)	F Grou	p Exen	nption			
=	Application		Pewaukee WI 53072	()ン	Num	ber 🕨	,			
G	Account	ing Method.	✓ Cash	Н	Check I	▶ ☑ if	the organization	n is not		
1.4	Vebsite	: ▶					ch Schedule B			
J T	ax-exen	npt status (che	eck only one) - ☑ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or		(Form 99	90, 990	-EZ, or 990-PF).			
		organization								
		_	7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or n	nore, or if total	l assets					
(Pa	rt II, coli	umn (B) belov	w) are \$500,000 or more, file Form 990 instead of Form 990-EZ			▶ \$		29001		
P	art I	Revenu	e, Expenses, and Changes in Net Assets or Fund Balance	es (see the	instruc	tions	for Part I)			
			the organization used Schedule O to respond to any question i					. 🗸		
_	1		ons, gifts, grants, and similar amounts received			1		16753		
	2		ervice revenue including government fees and contracts			2		0		
	3	_	ip dues and assessments			3		1275		
	4	Investmen	•			4		0		
	5a		ount from sale of assets other than inventory 5a		0					
	b		or other basis and sales expenses		0					
	C		ss) from sale of assets other than inventory (Subtract line 5b from li	ne 5a)		5c		0		
	6		ng and fundraising events							
	a	_	ncome from gaming (attach Schedule G if greater than							
ē	_		· · · · · · · · · · · · · · · · · · ·	0						
Revenue	ь			contribution	18					
ě	~		raising events reported on line 1) (attach Schedule G if the		1					
ш	ŀ		ch gross income and contributions exceeds \$15,000) 6b		10835					
	c		et expenses from gaming and fundraising events 6c		5141					
	d		e or (loss) from gaming and fundraising events (add lines 6a and	6b and sul						
	_	line 6c)				6d		5694		
	7a	•	s of inventory, less returns and allowances	}	138	-				
	b		of goods sold		100					
3	C		fit or (loss) from sales of inventory (Subtract line 7b from line 7a)			7c		138		
3	8	•	nue (describe in Schedule O)			8		0		
Ď	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8			9		23860		
_	10		d similar amounts paid (list in Schedule O)	<u> </u>		10		10603		
	11			VED	1	11		0		
s	12	Calarias o	aid to or for members	VLU .		12		 0		
Se	13			18		13		17781		
ē	14		y, rent, utilities, and maintenance \ldots \ldots $\overset{\circ}{\bowtie}$ $\overset{\circ}{\bowtie}$ $\overset{\circ}{\sim}$	2018 19	<u> </u>	14		-17701		
Expense			ublications, postage, and shipping		<u> </u>	15		2592		
-	15				·	_		445		
	16	Ciner exp	enses (describe in Schedule O)	V, O 1.	ⅎ∵	16				
	17		enses. Add lines 10 through 16		. •	17		31421		
ţ	18		(deficit) for the year (Subtract line 17 from line 9)		· ·	18		(7561)		
SSE	19		s or fund balances at beginning of year (from line 27, column (A)) ar figure reported on prior year's return)	_	e with			AECO7		
Net Assets	000	_			• •	19		45687		
Š	20		nges in net assets or fund balances (explain in Schedule O)			20		0		
_	21	Net assets	or fund balances at end of year. Combine lines 18 through 20		. 🕨	21		38126		

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990-EZ** (2017)

Cat No 106421

-Pa	rt II > Balance Sheets (see the instructions t					
	. Check if the organization used Schedule	O to respond to a	ny question in this		· · ·	<u> </u>
				(A) Beginning of year		(B) End of year
22	Cash, savings, and investments		· · · · · · [45,687		38,126
23	Land and buildings				23	
24	Other assets (describe in Schedule O)				24	
25	Total assets			45,687		38,126
26	, , , , , , , , , , , , , , , , , , , ,	(0)			26	
27 Dec	Net assets or fund balances (line 27 of column Statement of Program Service Accom			45,687	27	38,126
Fall	Statement of Program Service Accompany Check if the organization used Schedule	•		•		Expenses
Mha	····	See Schedule O	ny question in this	raitiii [Y]	(Req	uired for section
						c)(3) and 501(c)(4)
as n	cribe the organization's program service accomplisheasured by expenses. In a clear and concise mons benefited, and other relevant information for ea	anner, describe the			orga	nizations; optional for
28	Tapes and CD's for Pewaukee Public Library's collec	tion. Collection is av	vailable to the Pewau	kee community		

	(Grants \$ 1,777) If this amount	includes foreign gra	ants, check here .	▶ □	28a	1,777
29	Summer Reading Program for Children and Youth. T					1
	youth in the Pewaukee area.		Programming dyamabil	to di oraldi cii da		
	***************************************				ŀ	
	(Grants \$ 6,865) If this amount	includes foreign gra	ants, check here .	▶ 🗆	29a	6.865
30	Bookpage Subscription for Pewaukee Public Library.					
				MJ		
	(Grants \$ 389) If this amount	includes foreign gra	ants, check here .	▶ 🗆	30a	389
31	Other program services (describe in Schedule O)					
	(Grants \$ 1,571) If this amount				31a	1,571
_	Total program service expenses (add lines 28a t				32	10,602
Par					nstruc	tions for Part IV)
	Check if the organization used Schedule	O to respond to a		Part IV		<u>· · · · · </u>
	(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC (if not paid, enter -0-)	contributions to employ	0	Estimated amount of ther compensation
Presi	dent Melissa Murray				-	
		5			<u> </u>	0
Treas	surer Jean Miller				ı	
		4	0		<u> </u>	0
Direc	tor Joy Weber				1	
		2	0		<u> </u>	0
Direc	tor David Grace	_	_			_
		2	0		이	0
Direc	tor Sara Gull	_		ļ		_
		2	ļo	 	-	0
Direc	tor Danielle Bosanec	_		1	ا	•
Disoc	tor Ruth Harken	2	<u> </u>		 	0
Diler	ior Rutt Harkett	2			0	0
Direc	tor Darcy Sefcik		<u> </u>		*	
21124	tor Duray Jaron	2	٥		اه	0
					1	
			}		1	
					\top	
				1	1	
				Ī	7	
					T	
			1	I	1	

Page 3

Part	Other Information (Note the Schedule A and personal benefit contract statement requirements	in th	e	
•	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this	Part	٧	
			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		1
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed			-
•	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		1
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business			
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		✓
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		1
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		√
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a			
b	Did the organization file Form 1120-POL for this year?	37b		1
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? .	38a		✓
	If "Yes," complete Schedule L, Part II and enter the total amount involved	1		}
39	Section 501(c)(7) organizations. Enter:	}		
a	Initiation fees and capital contributions included on line 9	-		
b 40a	Gross receipts, included on line 9, for public use of club facilities	₹		
	section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0	}		
þ	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958	}		
	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	404		
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed	40b		/
U	on organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958	Ì		
đ	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line	1		}
	40c reimbursed by the organization	ł		ļ
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		1
41	List the states with which a copy of this return is filed ► Wisconsin			
42a	1110 01.981.1241011.0 00010 01.0 01.0 01.0	262-69		
	Located at ► 474 W. Wisconsin Ave. Pewaukee WI ZIP + 4 ►	53072		
D	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		1
	If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and			}
	Financial Accounts (FBAR).	}		1
c	At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country:	42c		1
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here		_ 1	▶ 🗆
	and enter the amount of tax-exempt interest received or accrued during the tax year		Yes	
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be		162	NO
	completed instead of Form 990-EZ	44a		1
ь	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be	1		
-	completed instead of Form 990-EZ	446		1
С	Did the organization receive any payments for indoor tanning services during the year?	44c		1
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an			
	explanation in Schedule O	44d		<u>L</u>
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		1
ь	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of	1		
	Form 990-EZ (see instructions)	45b	<u> </u>	∠ ✓

Form 99	0-EZ (20	017)								Р	age 4
										Yes	No
46		ne organization engage, directly or in ndidates for public office? If "Yes," o							46		1
Part	VI.	Section 501(c)(3) organizations All section 501(c)(3) organization 50 and 51.	only							or line	
		Check if the organization used Sch	nedule O to respond	to any question i	n this	Part VI	<u> </u>	<u> </u>	· ·	<u> </u>	
47		he organization engage in lobbying If "Yes," complete Schedule C, Part		section 501(h) elec		n effect o	during the	tax		Yes	No
48	-	organization a school as described in				edule F		•	47 48		1
49a		ne organization make any transfers to		•				.	49a		V
b	If "Ye	es," was the related organization a se	ction 527 organization	on?				. [49b		
50		plete this table for the organization's									
	empi	oyees) who each received more than		T	ganiza	(d) Health		e, ente	er	one	
	(a)	Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MIS	her	ntributions	to employee and deferred			d amou pensat	
None											
								_			
				<u> </u>	_						
	· • • • • • • • • • • • • • • • • • • •						9				
				 	_+-						
				ļ							
f 51	Com	number of other employees paid over plete this table for the organization, ,000 of compensation from the orga	s five highest comp	ensated independe	ent co	ntractors	who each	rece	ived	more	than
	(a)	Name and business address of each independ	lent contractor	(b) Type of s	service		(c)	Comp	ensatio	on	
None				1							
				 			 -				
				 							
											
	Total	number of other redecedent posts	notare cook recoving	1 0vor \$100 000				0			
52	Dıd	number of other independent contra the organization complete Schedu pleted Schedule A	-		ganıza	ations m		<u> </u>	Yes		No
	enalties	of perjury, I declare that I have examined this id complete. Declaration of preparer (other that									
				, 1							
Sign		Signature of officer	M.	5 Vine		Date					
Here		Melissa Murray, President Type or print name and title	[[ussrf]	Julia			4-17-	-10			
Paid		Print/Type preparer's name	Preparer's signature		Date		Check Self-emplo	l (f	PTIN		
Prep Use		Firm's name				Firm's EIN ▶					
		Firm's address ▶				Pho	ne no				
May th	ne IRS	discuss this return with the prepare	r snown above? See	instructions				> 📋	Yes	اليا	No_

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

(B)

(C)

(D)

(E)

Total

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2017

Open to Public Inspection

Employer identification number Name of the organization 391933537 Pewaukee Public Library Foundation, Inc. Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 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). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 331/a% 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 33½% 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV. Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having b control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (iv) is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 ited in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No Pewaukee Public Library

396006343

n

0

10603

10603

Part .	Support Schedule for Organizat (Complete only if you checked the Part III. If the organization fails to	hay an line	: 5. 7. OF 8 OT I	Part For II the	o Ulgariizatioi	Trailed to que) alify under
	Part III. If the organization fails to	quality unde	i the tests had	ica belevi, p.	0.000		
Section	on A. Public Support	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
Calend 1	dar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(a) 2010					
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		<u> </u>		<u> </u>		
Secti	on B. Total Support	(a) 2012	(b) 2014	(c) 20,15	(d) 2016	(e) 2017	(f) Total
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	/	(-/		
7 8	Amounts from line 4						
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 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc First five years. If the Form 990 is for torganization, check this box and stop here.	he organization	on's first, seco	nd, third, four	th, or fifth tax	year as a sect	ion 501(c)(3) ▶ □
Sec	tion C. Computation of Public Suppo	rt Percenta	ge /	11 column (f)		14	%
14 15 16a	box and stop here. The organization qu	chedule A, Pa nization did no alifies as a pu	rt II, line 14 ot check the book iblicly supporte of check a box	ox on line 13, d organization on line 13 or	and line 14 is 1	33 ¹ / ₃ % or mor 	
r	this boy and stop here. The organization	n qualifies as	a publicly supp	orteu organiz	alion		
178	10%-facts-and-circumstances test— 10% or more, and if the organization in Part VI how the organization meets the	2017. If the or neets the "facts-and-c	rganization did its-and-circums ircumstances"	not check a test, test. The organic	oox on line 13 check this bo anization qualif	, 16a, or 16b, a x and stop he fies as a public	cly supported
ı	b 10%-facts-and-circumstances test— 15 is 10% or more, and if the organic Explain in Part VI how the organization supported organization	zation meets meets the "f	acts-and-circu	mstances" tes	et. The organiz	ation qualifies	as a publicly
18	Private foundation. If the organization instructions	ala not check	a box on line			<u> </u>	► [

Schedu	le A (Form 990 or 990-EZ) 2017						Page 3
Part	Support Schedule for Organiza	tions Descr	ibed in Secti	on 509(a)(2)			
	(Complete only if you checked th						ider Part II.
	If the organization fails to qualify	under the te	sts listed belo	ow, please co	mplete Part I	1.)	/
	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017;′	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")					<i>,</i>	
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.					′	
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						
6	Total. Add lines 1 through 5				1		
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .				,		
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			/			
8 8	Add lines 7a and 7b			/			
Secti	on B. Total Support			7			
	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6	1					
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
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.)						
14	First five years. If the Form 990 is for the organization, check this box and stop he				n, or fifth tax ye		_
Secti	on C. Computation of Public Support	rt Percentag	e				
15	Public support percentage for 2017 (line		-			15	%
16	Public support percentage from 2016 Sci			<u> </u>	<u></u>	16	%
	on D. Computation of Investment In			-,, -			
17 18 19a	Investment income percentage for 2017 (Investment income percentage from 2010 331/3% support tests—2017. If the organ	Schedule A,	Part III, line 17			18	% % %, and line
b	17 is not more than 33½%, check this box 33½% support tests—2016. If the organization 18 is not more than 33½%, check this	and stop here zation did not c	. The organizati theck a box on	on qualifies as line 14 or line	a publicly suppo 19a, and line 16	orted organizat is more than t	ion . ▶ [] 33½%, and

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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.)

Secti	on A. All Supporting Organizations			
			Yes	No
1	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.	1	√	
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).	2		1
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		1
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.	3b		
С	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.	3c		
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.	4a		1
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.	4b		
С	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.	4c		
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).	5a		y
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	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 .	6		1
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).	7		1
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 77 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		1
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 .	9a		1
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 .	9b		1
С	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.	9c		1
10a	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.	10a		,
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.)	10b		,

Part	Supporting Organizations (continued)			
		,	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	'		
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	;	1
b	A family member of a person described in (a) above?	11b		1
	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		1
Section	on B. Type I Supporting Organizations			
		, ——	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported 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		
Section	on C. Type II Supporting Organizations			
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 the supported organization(s).	1	Yes	No
Section	on D. All Type III 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		1
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	y	
Section	on 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 i	nstru	ction	s).
a b c	 ☑ The organization satisfied the Activities Test. Complete line 2 below. ☐ The organization is the parent of each of its supported organizations. Complete line 3 below. ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity ('see in	struct	ions).
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a	,	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		<i>J</i>
3 a	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3ь		

instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ani	zations					
1 Check here if the organization satisfied the Integral Part Test as a qualifying							
instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E							
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year				
Section A - Adjusted Net Income		((optional)				
1 Net short-term capital gain	1		<u> </u>				
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		<u></u>				
6 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		<u> </u>				
7 Other expenses (see instructions)	7		L				
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)	Ĺ						
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	' L	<u> </u>				
3 Subtract line 2 from line 1d.	3		<u> </u>				
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,							
see instructions).	4		<u> </u>				
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		<u> </u>				
6 Multiply line 5 by .035.	6	 	<u> </u>				
7 Recoveries of prior-year distributions	7		<u> </u>				
8 Minimum Asset Amount (add line 7 to line 6)	8		<u> </u>				
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	<u> </u>	<u> </u>				
7 Check here if the current year is the organization's first as a non-functional	lv in	tegrated Type III supporting	g organization (see				

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continued)	
Secti	on D - Distributions		· · · · · · · · · · · · · · · · · · ·	Current Year
1	Amounts paid to supported organizations to accomplish e	exempt purposes		'
2	Amounts paid to perform activity that directly furthers exe	orted		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
5_	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7_	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic	h the organization is res	sponsive	
	(provide details in Part VI). See instructions.			 <u></u>
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount	· 		
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1_	Distributable amount for 2017 from Section C, line 6		· · · · · · · · · · · · · · · · · · ·	
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017			
а				
b	From 2013			
С	From 2014			
ď	From 2015			
е	From 2016			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			
i_	Carryover from 2012 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from			
	Section D, line 7:			
a	Applied to underdistributions of prior years			
b	Applied to 2017 distributable amount			
С	Remainder, Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2 For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3 _j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2013			
b	Excess from 2014			
С	Excess from 2015			
d	Excess from 2016			
	Excess from 2017			

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.)
Part IV Sect	ion D line #2
The Pewaul	see Public Library Director is considered a non-voting member of the Pewaukee Public Library Foundation (PPLF) Board of
Directors. A	as such, she is invited to all PPLF meetings and is provided with minutes and financial reports of the PPLF. She provides input
regarding th	e Library's needs and operations as requested by the PPLF Board
Part IV Sect	ion D line #3
The Pewaul	kee Public Library Director is considered a non-voting member of the Pewaukee Public Library Foundation (PPLF). As such, she
provides the	PPLF with information regarding the current needs of the Pewaukee Public Library which fall outside the limits of the annual
budget of th	e Library. The PPLF Board of Directors uses this information as they determine grants for the Pewaukee Public Library
The Library	Director provides information only and does not vote on policy or financial motions
Part IV Sect	iìon E #2a
The sole pu	rpose of the Pewaukee Public Library Foundation, Inc. is to provide funds for the programs, projects and technology
needs of the	e Pewaukee Public Library whose costs fall outside the Library's annual budget The Pewaukee Public Library's
stated purp	ose "is to provide our community with carefully selected books and other materials to aid in the pursuit of education,
information	research, recreation and the creative use of leisure time." This year, the Pewaukee Public Library Foundation provided
funds to ad	d items to the print and media collections, secure appropriate licenses to show movies to the public, provide special
programs fo	or youth and children, and purchase items to aid children's use of the Library's facilities All of these grants complied
with the Lib	rary's stated purposes and commitment to the Pewaukee community. All of these grants were for items whose cost
exceeded to	ne annual budget of the Pewaukee Public Library and which are identified on Form 990EZ Part III and on Schedule O.

SCHEDULE 0 (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.

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

▶ Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

OMB No 1545-0047

Pewaukee Public Library Foundation, Inc.	39-1933537
Part I #10 - Grants and similar amounts paid	
Tapes and DVD's 1777	
Summer reading program for children and youth 6865	
Bookpage subscription 389	
Movie licenses 177	
Children's step stool 1395	
Total \$10603	
Part I #16 Other Expenses	
State fees 64	
Meeting expenses 153	
Office Supplies 198	
Bank Error 30	
Total \$445	
Part III What is the organization's primary exempt purpose?	
The Pewaukee Public Library Foundation raises funds to support the Pewaukee Public Library with pr	ograms, materials, special projects and
technology upgrades whose costs exceed the annual budget of the Library. During 2017, significant a	dditions were made to the Library's
DVD collection. The Summer Reading Program was fully funded by provided funds and equipment was	is added to the Library to enhance
children's ability to use the Library's facilities.	
Part III #31 Other program services	
Children's Step Stool 1395	
Movie license 176	
Total \$1571	