1	Exempt Organization Busi	ness	Income Tax	Retur	1 L	ОМВ	No 1545-06	587				
Form	990-T Exempt Organization Busi					0						
•	For calendar year 2017 or other tax year beginning S	ept 1 .	2017, and ending A	ua 31 . 20	18	2	017					
Departm	nent of the Treasury Go to www.irs.gov/Form990T for ins											
	Revenue Service Do not enter SSN numbers on this form as it may					en to Pu 1(c)(3) C	blic Inspec rganization	tion for is Only				
	Check box if address changed Name of organization (Check box if name changed and see instructions.) D Employer identification number											
	American Library Association (Employees trust, see instructions)											
✓ 50	Number street and room or suite no. If a P.O. hax see instructions											
☐ 40	408(e) 220(e) Type 50 East Huron Street											
□ 40	408A 530(a) City or town, state or province, country, and ZIP or foreign postal code (See instruction											
_ 🔲 52] 529(a) Chicago, IL 60611-2795 541800											
C Book at en	yalue of all assets d of year F Group exemption number (See instruction											
	81,801,580 G Check organization type ► ✓ 501(c) cc			ust	401(a) tr	ust	☐ Other	trust				
	escribe the organization's primary unrelated business activity.						···-					
	iring the tax year, was the corporation a subsidiary in an affiliated g			controlled g	roup? .	. ▶ ∟	JYes L∕	∐ No				
	"Yes," enter the name and identifying number of the parent co	rporation										
	e books are in care of L. Denise Moritz			ne numbe		312	-280-5834	<u> </u>				
	Unrelated Trade or Business Income		(A) Income	(B) EX	penses	┼	(C) Net	r				
1a	Gross receipts or sales	10] :				
b	Less returns and allowances c Balance ▶	1c 2	 			+-						
2 3	Cost of goods sold (Schedule A, line 7)	3	 	+		1		<u>'</u>				
3 4a	Capital gain net income (attach Schedule D)	4a	 	 		+		<u> </u>				
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b	 	 		1		<u> </u>				
c	Capital loss deduction for trusts	4c	 	 		+		 				
5	Income (loss) from partnerships and S corporations (attach statement		-	 _		1						
6	Rent income (Schedule C)	′ 6		 -		╁		<u> </u>				
7	Unrelated debt-financed income (Schedule E)	7		 -	_			 				
8	Interest, annuities, royalties, and rents from controlled organizations (Schedule	<u> </u>	 	 -		 		 				
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule C	′ 	 	 		 		<u> </u>				
10	Exploited exempt activity income (Schedule I)	10		 	-	+						
11	Advertising income (Schedule J)	11	5,029,940	2 21	4,251	+-	2,715,689	 				
12	Other income (See instructions, attach schedule)	12	132,153	2,31	7,231	 	132 <u>,153</u>					
13	Total. Combine lines 3 through 12	13	5,162,093	2.31	4,251	+	2.847.842					
	II Deductions Not Taken Elsewhere (See instructions to											
	deductions must be directly connected with the unrela			, ,	•							
14	Compensation of officers, directors, and trustees (Schedule	K) .			. 14							
15	Salaries and wages				. 15							
16	Repairs and maintenance				. 16							
17	Bad debts				. 17		2,021					
18	Interest (attach schedule)				. 18							
19	Taxes and licenses				. 19	<u> </u>						
20	Charitable contributions (See instructions for limitation rules)		1 1		. 20							
21	Depreciation (attach Form 4562)			319,866	_							
22	Less depreciation claimed on Schedule A and elsewhere on		RECEIVED	(319,866)	22b	├	0	ļ				
23	Depletion	ાં!∵ત્≓	, ive o'e i v'e i		. 23	 						
24	Contributions to deferred compensation plans			၂ဗ္ဂါ	. 24	<u> </u>		<u> </u>				
25	Employee benefit programs	1221	. jul 1 9 2019) ·	. 25	ļ						
26	Excess exempt expenses (Schedule I)		· · · · · ·	≅ -	. 26	 						
27	Excess readership costs (Schedule J)	1	OGDEN, U	T '	. 27	 	2,82 <u>7,8</u> 88	-				
28	Other deductions (attach schedule)	٠ ـــــــا			. 28	₩		 				
29	<u> </u>				. 29	-	2,829,909					
30	Unrelated business taxable income before net operating loss of					 	17,933					
31 32	Net operating loss deduction (limited to the amount on line 3	-				 	17,933					
32 33	Unrelated business taxable income before specific deduction Specific deduction (Generally \$1,000, but see line 33 instruct					├	0	 				
33 34	Unrelated business taxable income. Subtract line 33 from					+						
٠.	enter the smaller of zero or line 32		· · · · · · · ·		37) 34	1	0	ļ				

Earn 90	0-T (2017)			D 2
Part				Page 2
35	Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here ▶ ☐ See instructions and		e_	
а	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): (1) \$ (2) \$ (3) \$			
b	Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ (2) Additional 3% tax (not more than \$100,000)	1		
с 36	Income tax on the amount on line 34	35c 36		
37 38	Proxy tax. See instructions	37 38		
39 40	Tax on Non-Compliant Facility Income. See instructions	39 40		
Part				
41a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) . 41a	4		
b	Other credits (see instructions)	4		
C	General business credit. Attach Form 3800 (see instructions)	┥╻╽		
d	Credit for prior year minimum tax (attach Form 8801 or 8827)			
е	Total credits. Add lines 41a through 41d	41e		
42	Subtract line 41e from line 40	42		
43	Other taxes. Check if from	43		_
44	Total tax. Add lines 42 and 43	44		
45a	Payments: A 2016 overpayment credited to 2017	」		
þ	2017 estimated tax payments	<u> </u>		
C	Tax deposited with Form 8868	╛		
d	Foreign organizations: Tax paid or withheld at source (see instructions) . 45d]		
е	Backup withholding (see instructions)	7		
f	Credit for small employer health insurance premiums (Attach Form 8941) . 45f			
g	Other credits and payments.	7		
	☐ Form 4136 ☐ Other Total ► 45g			
46	Total payments. Add lines 45a through 45g	46	20,0	000
47	Estimated tax penalty (see instructions). Check if Form 2220 is attached ▶ □			
48	Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed	48		
49	Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid . 54 >	49	20,0	200
5 0	Enter the amount of line 49 you want: Credited to 2018 estimated tax ▶ 20,000 Refunded ▶		20,	
Part		- F		
51	At any time during the 2017 calendar year, did the organization have an interest in or a signature or or	ther a	uthority Y	es No
01	over a financial account (bank, securities, or other) in a foreign country? If YES, the organization material Fince Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the follower is the financial Accounts.	ay have	e to file	
52	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a folly YES, see instructions for other forms the organization may have to file.	reign tru	ust? .	7

	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here ▶													
52	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file.													
53	Enter the amount of tax-exempt interest received or accrued during the tax year > \$													
Sign Here	true, c	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and betwee, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Lacuse May the IRS discuss this with the preparer shown												
Paid Prep	arer	Print/Type preparer's name		Preparer's signature		Date	Check If self-employed	PTIN						
-	se Only Firm's name Firm's EIN													
	Firm's address ▶ Phone no													
							Form	990-T	(2017)					

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Form	990-T	12017
COILL	99U-1	12017

3 G

Schedule A-Cost of Goods Sold.	Enter method of	inventory val	uation >							
1 Inventory at beginning of year	1	6		it end of year	6					
2 Purchases	2	 7	-	goods sold. Subtract						
3 Cost of labor	3	 		line 5. Enter here and						
4a Additional section 263A costs	-			ne 2	7					
(attach schedule)	4a	8	•	es of section 263A (wit						
·	4a 4b	 		roduced or acquired for	., 100bcor ro					
b Other costs (attach schedule)5 Total. Add lines 1 through 4b	5	+		nization?						
5 Total. Add lines 1 through 4b Schedule C—Rent Income (From I		nd Personal								
(see instructions)	tear i roperty an	ia i ciscilai	. Topolty .		po. 3/					
Description of property										
										
(1)		· · · · · · · · · · · · · · · · · · ·								
(2)										
(3)										
2. Bent re	ceived or accrued									
				3(a) Deductions directly	connected with the income					
 (a) From personal property (if the percentage of refor personal property is more than 10% but not more than 50%) 	percentage of ren	and personal prop nt for personal pro nt is based on pro	perty exceeds		3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)					
(1)										
(2)										
(3)										
(4)										
Total	Total			(b) Total deductions.						
(c) Total income. Add totals of columns 2(a)	and 2(b). Enter			Enter here and on page 1,						
here and on page 1, Part I, line 6, column (A)	<u> </u>			Part I, line 6, column (B)	<u> </u>					
Schedule E-Unrelated Debt-Fina	nced Income (se	e instructions)		C Deductions dispetty and	prosted with or allocable to					
1. Description of debt-financed	property	2. Gross including allocable to o		3. Deductions directly connected with or allocable to debt-financed property (a) Straight line depreciation (b) Other deductions						
		prop	erty	(a) Straight line depreciation (attach schedule)	(attach schedule)					
(1)	. <u></u>									
(2)										
(3)										
(4)	<u> </u>									
acquisition debt on or allocable to debt-financed deb	erage adjusted basis f or allocable to f-inanced property attach schedule)	4 div	lumn rided umn 5	7. Gross income reportable (column 2 × column 6)	8. Allocable deductions (column 6 × total of columns 3(a) and 3(b))					
(1)			%							
(2)			%							
(3)			%							
(4)			%							
				Enter here and on page 1, Part I, line 7, column (A).	Enter here and on page 1, Part I, line 7, column (B)					
Totals	led in column 8 .	· · · ·	>	· <u>.</u> >	Form 990-T (2017)					

Schedule F-Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)										
Exempt Controlled Organizations										
Name of controlled organization	2. Employer identification num	IDE! I		ited income istructions)	4. Total of specified payments made	5. Part of column included in the corganization's gro	ontrolling	conne	ductions directly cted with income in column 5	
(1)						1				
(2)										
(3)										
(4)										
Nonexempt Controlled Organi	zations									
7. Taxable Income		Net unrelated income iss) (see instructions)			tal of specified ments made	10. Part of colum included in the corganization's gro	ontrolling	connec	eductions directly ted with income in column 10	
(1)										
(2)										
(3)										
(4)										
Totals		· <u>·</u>		<u></u>	1	Add columns 5 Enter here and o Part I, line 8, co	n page 1, lumn (A).	Enter h Part I,	olumns 6 and 11 ere and on page 1, line 8, column (B).	
Schedule G-Investment	Income of a S	Section	501(c			zation (see inst	ructions			
1. Description of income	2. Amo	Amount of income		3. Deductions directly connected (attach schedule)		4. Set-aside: (attach schedu		and se	tal deductions et-asides (col. 3 olus col. 4)	
(1)		•								
(2)										
(3)							-			
(4)										
Totals	▶	e 9, colur	column (A).					Enter here and on page 1, Part I, line 9, column (B).		
Schedule I-Exploited Ex	empt Activity	Incom	e, Oth	er Than	Advertising In	come (see inst	ructions	s)		
Description of exploited activ	unre busines from t	iross lated s income rade or iness	dı conne prod uni	expenses irectly ected with uction of related iss income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	is not unrelated attri		penses table to ımn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)										
(2)										
(3)										
(4) Totals	page 1	re and on , Part I, col (A)	page	ere and on 1, Part I, 0, col (B).					Enter here and on page 1, Part II, line 26	
Schedule J-Advertising		struction	ns)		·				· · · · · · · · · · · · · · · · · · ·	
				Consoli	dated Basis					
Part I Income From Periodicals Reported 2. Gross advertising income		3.	Direct ising costs	4. Advertising gain or (loss) (col. 2 minus col. 3) If a gain, compute cols. 5 through 7.	5. Circulation income	1	dership osts	7. Excess readership costs (column 6 minus column 5, but not more than column 4).		
(1) Booklist		2,418,550		928,608		1,372,999		2,839,980		
(2) CHOICE		591,289	1	261,822		1,139,377		1,620,028		
(3)					1					
(4)										
Totals (carry to Part II, line (5))	▶	3,009,839		1,190,430	1,819,409	2,512,376		4,460,0 <u>08</u>	1,819,409	

Total. Enter here and on page 1, Part II, line 14

Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns Part II 2 through 7 on a line-by-line basis.) 4. Advertising 7. Excess readership gain or (loss) (col 2 minus col 3) If 2. Gross costs (column 6 3. Direct 5. Circulation 6. Readership 1. Name of periodical minus column 5, but advertising advertising costs ıncome costs a gain, compute cols 5 through 7. not more than ıncome column 4) (1) See Schedule 2 896,280 794,862 1,008,479 2,020,101 1,123,821 2,888,209 (2) (3) (4) Totals from Part I 1,190,430 1,819,409 3,009,839 Enter here and on Enter here and on Enter here and on page 1, Part II, line 27 page 1, Part I, page 1, Part I, line 11, col. (A) line 11, col. (B). Totals, Part II (lines 1-5) 5,029,940 2,314,251 2,827,888 Schedule K-Compensation of Officers, Directors, and Trustees (see instructions) 3. Percent of 4. Compensation attributable to 1. Name 2. Title time devoted to unrelated business (1) % (2) % (3) % (4) %

Form 990-T (2017)

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Department of the Treasury

Depreciation and Amortization

(Including Information on Listed Property)

▶ Attach to your tax return.

OMB No 1545-0172

Attachment Sequence No 179 ▶ Go to www.irs.gov/Form4562 for instructions and the latest information. Internal Revenue Service (99) Name(s) shown on return Business or activity to which this form relates Identifying number American Library Association Periodical advertising 36-2166947 **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. 1 2 Total cost of section 179 property placed in service (see instructions) . . . 2 Threshold cost of section 179 property before reduction in limitation (see instructions) . . . 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- 4 5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing 6 (a) Description of property (b) Cost (business use only) (c) Elected cost 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 10 Carryover of disallowed deduction from line 13 of your 2016 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11. 13 Carryover of disallowed deduction to 2018. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.) (See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) 4,360 Part III MACRS Depreciation (Don't include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2017 314,950 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2017 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (a) Classification of property (e) Convention (f) Method (g) Depreciation deduction placed in (business/investment use service only-see instructions) 19a 3-year property **b** 5-year property c 7-year property d 10-year property HY 556 59,273 10 years S/L e 15-year property f 20-year property S/L 25 yrs g 25-year property h Residential rental 275 yrs MM property 275 yrs S/L MM i Nonresidential real 39 yrs MM S/L MM S/L Section C-Assets Placed in Service During 2017 Tax Year Using the Alternative Depreciation System 20a Class life S/L S/L b 12-year 12 yrs S/L c 40-year 40 yrs MM Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 319,866 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

	4562 (2017)																Page 2
Pa		d Property for enterta						vehic	les, c	erta	ın aır	craft,	certair	ı com	puters	, and p	roperty
	" Note:	For any ve olumns (a)	hicle for v	which you	are usi	ng the	standa						lease (expens	se, con	nplete o ı	nly 24a
		-Deprecia											for pas	ssenge	r autor	nobiles.)	
24 a	Do you have e	vidence to su	pport the b	ousiness/inve	estment	use clain		Yes [] No	24	b If '	Yes," ı	s the ev	dence	written?	Yes \	☐ No
	(a) e of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment u percentage	se Cost or o	d) ther basis		(e) for depreness/inveruse use only	stment	(f) Recov perio	- 1	Met	g) thod/ ention		(h) preciation eduction		(i) Elected sec cos	
25	Special dep											25					_
26	Property use							(,						
			1	%													
				%			-										
	- -	L		%		l							l				
27	Property use	ed 50% or		_	usiness	use:		ı		- Ia	5/L ~		Τ.				
				% %	,						5/L -	-	_				
				%				Ì			5/L -						
28	Add amount	ts in columi	n (h), lines	25 throug	jh 27. E	nter he	re and	on line	21, pa	age 1	١.	28					
29	Add amount	ts in columi	n (ı), line 2									<u> </u>	<u></u>	.]	29		
_							mation					11			lf vou		واورطور
	plete this sect our employees																venicies
30	30 Total business/investment miles driven during the year (don't include commuting miles) .			•	(a) (b) Vehicle 1 Vehicle 2			Ve	(c) Vehicle 3 Ve			(d) (e) ehicle 4 Vehic					
31	Total commu	ting miles dr	iven during	the year													
	2 Total other personal (noncommuting) miles driven																
33	Total miles lines 30 thro		-												_		
34	Was the ve			•	Yes	No	Yes	No	Yes	3	No	Yes	No	Yes	No	Yes	No
	use during o	•					<u> </u>	<u> </u>	1					 			
35	Was the ver than 5% ow																
36	Is another veh							<u> </u>								<u> </u>	
	wer these que e than 5% ow	estions to d	letermine		t an ex	ception										s who ar	en't
	Do you mail	ntain a writ	ten policy	/ statemer	nt that p	rohibit				f veh	ııcles	ınclud	ding co	mmutii	ng, by	Yes	No
38	Do you mail employees?	ntain a writ	tten policy	y statemer	nt that i	prohibit	ts perso	onal us	e of v								
39	Do you treat															-	
40	Do you prov	vide more t	than five v	vehicles to	your e	mploye	es, ob	tain inf	ormati	on f	rom y	our er	nploye	es abo	ut the		
41	use of the ve Do you mee																
	Note: If you		o 37, 38, 3	39, 40, or 4	41 is "Y	es," do	n't com	plete	Section	n B f	or the	cove	red veh	ıcles.			
Pa	rt VI Amor	<u>tization</u>					_						(-1	т			
		a) on of costs		(b) Date amortiz begins	ation	Amo	(c) rtizable a	mount		Code	(d) e sectio	on	(e) Amortiz period percent	ation I or	- Amorti	(f) zation for ti	his year
42	Amortization	of costs tl	hat begins	s during yo	our 201	7 tax ye	ear (see	ınstru	ctions)	·							
						_						\dashv					
						7.1.								140			
43	Amortization	n of costs t	nat begar	n betore yo	ur 2017	r tax ye	ear						• •	43			

44 Total. Add amounts in column (f). See the instructions for where to report.

American Esbrary Association
Schedule 2
2Q17 Form 990-T
Schedule J, Part II - Advertising Income and Advertising Loss

Name of periodical	a	Gross advertising <u>income</u>		Direct advertising <u>costs</u>		Advertising gain or (loss)		Circulation income		Readership <u>costs</u>		eductible" excess eadership costs
Part II Periodicals reported on a separate basis								•				
American Libraries	\$	781,089	\$	179,173	\$	601,916	\$	370,559	\$	1,386,157	\$	601,916
Public Libraries		49,049		33,589		15,460		75,390		259,848		15,460
C & RL		(259)		10,715		(10,974)		7,500		65,033		-
C&RL News		473,538		116,702		356,836		185,848		535,539		349,691
RBML		10,004		6,030		3,974		11,727		22,340		3,974
Knowledge Quest		24,355		7,041		17,314		46,902		269,328		17,314
LRTS		1,650		-		1,650		43,103		90,056		1,650
Conference/Other Advertising		644,450		748,587		(104,137)		-		-		•
RUSQ		1,000		5,233		(4,233)		135		68,252		-
ITAL		-		-		-		-		-		•
C&L		19,316		10,905		8,411		19,141		106,990		8,411
DTTP		3,780		183		3,597		9,343		18,124		3,597
		-		-		-		•		-		-
YALS		12,129		5,663		6,466		25,214		66,540		6,466
Totals - Schedule J - Part II	\$	2,020,101	\$	1,123,821	\$	896,280	\$	794,862	\$	2,888,209	\$	1,008,479