efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491284002139

2018

OMB No 1545-0052

**Return of Private Foundation** 

Form 990-PF Department of the Treasury

Internal Revenue Service

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.
 Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

|                                       |   | ndar year 2018, or tax year beginning (   | 7-01-20   | )18 , aı   | nd er | ding 06-30-  | 2019<br>entification numbe   | r  |
|---------------------------------------|---|---|---|--|-------|--|--|--|
|                                       |   | UBLIC LIBRARY FOUNDATION  |   |  |       | 93-1085864   |  |  |
|                                       | ber and<br>D BOX 1                      | street (or P O box number if mail is not delivered to stre<br>102   | eet address)  | Room/suite   |       | <b>B</b> Telephone nu (541) 917-7580                                     | mber (see instruction  | ns)  |
|                                       |   | s, state or province, country, and ZIP or foreign postal coc<br>97321   | le  |  |       | · , ,  | application is pendin  | g, check here  |
| l Ch                                  | ieck ty<br>Section<br>r mark<br>year (f | Final return  Address change  Pe of organization  Address change  Pe of organization  Address change  Name  Section 501(c)(3) exem  A 4947(a)(1) nonexempt charitable trust  Other value of all assets at end from Part II, col (c),  State 1.164.556 | led return change pt private her taxable nethod pecify) _ | former public charity  foundation e private foundation  Cash Accru  be on cash basis |       | 2 Foreign or test, check E If private for under section F If the foundar | ganizations, check he<br>ganizations meeting<br>k here and attach coi<br>undation status was t<br>n 507(b)(1)(A), check<br>ation is in a 60-month<br>n 507(b)(1)(B), check | the 85% mputation   erminated k here    the 85% mputation   mutual mutua |
| Pa                                    | rt I                                    | Analysis of Revenue and Expenses (The of amounts in columns (b), (c), and (d) may not necest equal the amounts in column (a) (see instructions)   |   | (a) Revenue and expenses per books   | (b)   | Net investment income  | (c) Adjusted net income  | (d) Disbursements<br>for charitable<br>purposes  |
|                                       | _                                       | Contributions, gifts, grants, etc , received (attac   | h   | DOOKS  | -     |  |  | (cash basis only)  |
|                                       | 1                                       | schedule)   | n   | 850  |       |  |  |  |
|                                       | 2                                       | Check $\blacktriangleright$ $\square$ if the foundation is <b>not</b> required to   | attach  |  |       |  |  |  |
| Reverne                               | 3                                       | Sch B   | onts  | 30   |       | 30   | 30   |  |
|                                       | 4                                       | Dividends and interest from securities  |   | 29,851   | +     | 29,851   | 29,851   |  |
|                                       | -т<br>5а                                | Gross rents   |   | 25,031   | -     | 25,031   | 25,031   |  |
|                                       | b                                       | Net rental income or (loss)   |   |  | +     |  |  |  |
|                                       | 6a                                      | Net gain or (loss) from sale of assets not on line  | 10  | 10,343   | 3     |  |  |  |
|                                       | b                                       | Gross sales price for all assets on line 6a   | 320,389   | _  |       | 14,264   |  |  |
|                                       | 7<br>8                                  | Capital gain net income (from Part IV, line 2)  Net short-term capital gain   |   |  | +     | 14,204   |  |  |
|                                       | 9                                       | Income modifications  |   |  |       |  |  |  |
|                                       | 10a                                     | Gross sales less returns and allowances   |   |  |       |  |  |  |
|                                       | ь                                       | Less Cost of goods sold   |   |  |       |  |  |  |
|                                       | С                                       | Gross profit or (loss) (attach schedule)  |   |  |       |  |  |  |
|                                       | 11                                      | Other income (attach schedule)  |   | 900  |       |  | 900  |  |
|                                       | 12                                      | Total. Add lines 1 through 11   |   | 41,974   | 1     | 44,145   | 30,781   |  |
|                                       | 13                                      | Compensation of officers, directors, trustees, etc  | <br>:   |  |       |  |  |  |
|                                       | 14                                      | Other employee salaries and wages   |   |  |       |  |  |  |
| Š                                     | 15                                      | Pension plans, employee benefits  |   |  |       |  |  |  |
| 1156                                  | 16a                                     | Legal fees (attach schedule)  |   |  |       |  |  |  |
| <u>g</u>                              | b                                       | Accounting fees (attach schedule)   |   | <b>9</b> 3,515   | 5     |  |  |  |
| نن<br>دە                              | С                                       | Other professional fees (attach schedule) .   |   |  |       |  |  |  |
| Ě                                     | 17                                      | Interest  |   |  |       |  |  |  |
| stra                                  | 18                                      | Taxes (attach schedule) (see instructions)  |   | <b>%</b> 523   | 3     |  |  |  |
| ੂ                                     | 19                                      | Depreciation (attach schedule) and depletion  |   |  |       |  |  |  |
| Ę                                     | 20                                      | Occupancy   |   |  |       |  |  |  |
| <b>₹</b>                              | 21                                      | Travel, conferences, and meetings   |   |  |       |  |  |  |
| e<br>E                                | 22                                      | Printing and publications   |   |  |       |  |  |  |
| <u> </u>                              | 23                                      | Other expenses (attach schedule)  |   | 10,150   |       | 8,379  |  | 1,771  |
| Operating and Administrative Expenses | 24                                      | Total operating and administrative expense  |   |  | 1     |  |  |  |
| <u>g</u>                              |   | Add lines 13 through 23   |   | 14,188   | _     | 8,379  |  | 1,771  |
| _                                     | 25                                      | Contributions, gifts, grants paid   |   | 74,177   | 1     |  |  | 74,177   |
|                                       | 26                                      | <b>Total expenses and disbursements.</b> Add line 25  | s 24 and  | 88,365   | 5     | 8,379  |  | 75,948   |
|                                       | 27                                      | Subtract line 26 from line 12   |   |  | 1     |  |  |  |
|                                       | а                                       | Excess of revenue over expenses and disbursements   |   | -46,391  | .[    |  |  |  |
|                                       | ь                                       | Net investment income (If negative, enter -0-   | )   |  | Ĺ     | 35,766   |  |  |
|                                       | С                                       | Adjusted net income (If negative, enter -0-)  | <u></u> .   |  |       |  | 30,781   |  |
| or                                    | Paner                                   | work Reduction Act Notice, see instructions.  |   |  |       | Cat No. 11289Y   | / For  | m 000-DE (2018)  |

|   | _   |  |           | · '       | 1         |
|---|-----|--|-----------|-----------|-----------|
|   | 3   | Accounts receivable ▶  |           |           |           |
|   |     | Less allowance for doubtful accounts ▶                             |           |           |           |
|   | 4   | Pledges receivable ▶   |           |           |           |
|   |     | Less allowance for doubtful accounts ▶                             |           |           |           |
|   | 5   | Grants receivable  |           |           |           |
|   | 6   | Receivables due from officers, directors, trustees, and other      |           |           |           |
|   |     | disqualified persons (attach schedule) (see instructions)          |           |           |           |
|   | 7   | Other notes and loans receivable (attach schedule)                 |           |           |           |
|   |     | Less allowance for doubtful accounts ▶                             |           |           |           |
| , | 8   | Inventories for sale or use  |           |           |           |
|   | 9   | Prepaid expenses and deferred charges                              | 1,315     | 957       | 957       |
|   | 10a | Investments—U S and state government obligations (attach schedule) |           |           |           |
|   | ь   | Investments—corporate stock (attach schedule)                      |           |           |           |
|   | c   | Investments—corporate bonds (attach schedule)                      |           |           |           |
|   | 11  | Investments—land, buildings, and equipment basis ▶                 |           |           |           |
|   |     | Less accumulated depreciation (attach schedule) ▶                  |           |           |           |
|   | 12  | Investments—mortgage loans   |           |           |           |
|   | 13  | Investments—other (attach schedule)                                | 1,201,698 | 1,154,378 | 1,154,378 |
|   | 14  | Land, buildings, and equipment basis ▶                             |           |           |           |
|   |     | Less accumulated depreciation (attach schedule)                    |           |           |           |
|   | 15  | Other assets (describe )   |           |           |           |
|   | 16  | Total assets (to be completed by all filers—see the                |           |           |           |
|   |     | unctrustions Also see page 1 utom I)                               | 1 225 215 | 1 164 556 | 1 164 556 |

|          | 11       | Investments—land, buildings, and equipment basis ▶                       |           |           |        |
|----------|----------|--|-----------|-----------|--------|
|          |          | Less accumulated depreciation (attach schedule) ▶                        |           |           |        |
|          | 12       | Investments—mortgage loans   |           |           |        |
|          | 13       | Investments—other (attach schedule)                                      | 1,201,698 | 1,154,378 | 1,154, |
|          | 14       | Land, buildings, and equipment basis ▶                                   |           |           |        |
|          |          | Less accumulated depreciation (attach schedule) ▶                        |           |           |        |
|          | 15       | Other assets (describe 🕨)  |           |           |        |
|          | 16       | Total assets (to be completed by all filers—see the                      |           |           |        |
|          |          | ınstructions Also, see page 1, item I)                                   | 1,225,215 | 1,164,556 | 1,164, |
|          | 17       | Accounts payable and accrued expenses                                    | 272       | 165       |        |
|          | 18       | Grants payable   |           |           |        |
| es       | 19       | Deferred revenue   |           |           |        |
| apilitie | 20       | Loans from officers, directors, trustees, and other disqualified persons |           |           |        |
| 픋        | 21       | Mortgages and other notes payable (attach schedule)                      |           |           |        |
| _        | 22       | Other liabilities (describe  |           |           |        |
|          | 23       | Total liabilities(add lines 17 through 22)                               | 272       | 165       |        |
|          | <b>-</b> |  |           |           | 1      |

|             | 17 | Accounts payable and accrued expenses                                    | 272       | 165       |
|-------------|----|--|-----------|-----------|
|             | 18 | Grants payable   |           |           |
| Liabilities | 19 | Deferred revenue   |           |           |
| 틎ㅣ          | 20 | Loans from officers, directors, trustees, and other disqualified persons |           |           |
| 힐           | 21 | Mortgages and other notes payable (attach schedule)                      |           |           |
| -           | 22 | Other liabilities (describe )  |           |           |
|             | 23 | Total liabilities(add lines 17 through 22)                               | 272       | 165       |
|             |    | Foundations that follow SFAS 117, check here ▶ ✓                         |           |           |
| è           |    | and complete lines 24 through 26 and lines 30 and 31.                    |           |           |
| Balances    | 24 | Unrestricted   | 1,224,943 | 1,164,391 |
| 찖           | 25 | Temporarily restricted   |           |           |
|             | 26 | Permanently restricted   |           |           |
| Fund        |    | Foundations that do not follow SFAS 117, check here                      |           |           |
| 5           |    | and complete lines 27 through 31.  |           |           |
| şį          | 27 | Capital stock, trust principal, or current funds                         |           |           |
| Assets      | 28 | Paid-in or capital surplus, or land, bldg , and equipment fund           |           |           |
| ⋖           |    |  |           |           |

| <b>24</b> Unrestricted   | 1,224,943 | 1,164,391 |
|--|-----------|-----------|
| 25 Temporarily restricted  |           |           |
| 26 Permanently restricted  |           |           |
| Foundations that do not follow SFAS 117, check here <b>&gt;</b>        |           |           |
| and complete lines 27 through 31.                                      |           |           |
| 27 Capital stock, trust principal, or current funds                    |           |           |
| 28 Paid-in or capital surplus, or land, bldg , and equipment fund      |           |           |
| 29 Retained earnings, accumulated income, endowment, or other funds    |           |           |
| 30 Total net assets or fund balances (see instructions)                | 1,224,943 | 1,164,391 |
| 31 Total liabilities and net assets/fund balances (see instructions) . | 1,225,215 | 1,164,556 |

| 26   | Permanently restricted  |           |     |           |           |  |
|------|---|-----------|-----|-----------|-----------|--|
|      | Foundations that do not follow SFAS 117, check here ▶ □ and complete lines 27 through 31.                                     |           |     |           |           |  |
| 27   | Capital stock, trust principal, or current funds  |           |     |           |           |  |
| 28   | Paid-in or capital surplus, or land, bldg , and equipment fund  |           |     |           |           |  |
| 29   | Retained earnings, accumulated income, endowment, or other funds  |           |     |           |           |  |
| 30   | Total net assets or fund balances (see instructions)  | 1,224,943 |     | 1,164,391 |           |  |
| 31   | Total liabilities and net assets/fund balances (see instructions) .   | 1,225,215 |     | 1,164,556 |           |  |
| t II | Analysis of Changes in Net Assets or Fund Balances  |           |     |           |           |  |
|      | al net assets or fund balances at beginning of year—Part II, column (a), line<br>year figure reported on prior year's return) | •         | I   |           | 1,224,943 |  |
| Ent  | er amount from Part I, line 27a   |           | . 2 |           | -46,391   |  |
|      |   |           |     |           |           |  |

3

4

5

6

1,178,552

1,164,391 Form **990-PF** (2018)

14,161

2 3

4

5

Other increases not included in line 2 (itemize)

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Add lines 1, 2, and 3 . . . . . .

Decreases not included in line 2 (itemize) ▶

| Part IV Capital Gains  | and Losses for Tax on Invest  | ment Income                            |  |   |  |
|--|---|--|--|---|--|
|  | be the kınd(s) of property sold (e g ,<br>arehouse, or common stock, 200 shs                                |  | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr )                       | (d)<br>Date sold<br>(mo , day, yr )                      |
| 1aSee Additional Data Tab  | le  |  |  |   |  |
| b  |   |  |  |   |  |
| С  |   |  |  |   |  |
| d  |   |  |  |   |  |
| e  |   |  |  |   |  |
| (e)<br>Gross sales price   | <b>(f)</b><br>Depreciation allowed<br>(or allowable)  |  | (g)<br>other basis<br>pense of sale    | Gain d  | <b>h)</b><br>or (loss)<br>i) minus (g)                   |
| a See Additional Data Tab  | ole   |  |  |   |  |
| b  |   |  |  |   |  |
| c  |   |  |  |   |  |
| d  |   |  |  |   |  |
| e  |   |  |  |   |  |
| Complete only for asset  | s showing gain in column (h) and ow   | ned by the foundation                  |  |   | <u>(1)</u>   |
| (i)<br>FMV as of 12/31/69  | ( <b>j)</b> Adjusted basis as of 12/31/69   |  | (k)<br>s of col (ı)<br>ıl (ʒ), ıf any  | col (k), but not  | h) gain minus<br>less than -0-) <b>or</b><br>om col (h)) |
| a See Additional Data Tab  | le  |  |  |   |  |
| ь  |   |  |  |   |  |
| c  |   |  |  |   |  |
| d  |   |  |  |   |  |
| e  |   |  |  |   |  |
| ·  | e or (net capital loss)  gain or (loss) as defined in sections 1 art I, line 8, column (c) (see instruction | ons) If (loss), enter -0               | · ,                                    | 3   | -8,452   |
| Part V Qualification   | Under Section 4940(e) for Re  | educed Tax on Net                      | Investment In                          | come  |  |
| _  | private foundations subject to the sec  |  |  |   |  |
| (1 of optional use by domestic                                       | private roundations subject to the sec  | ction 4540(a) tax on in                | et investment meon                     | , ie ,  |  |
| If section 4940(d)(2) applies, l                                     | leave this part blank<br>he section 4942 tax on the distributal   | ble amount of any vea                  | r in the base period                   | , Пу  | es 🔽 No  |
|  | ot qualify under section 4940(e) Do   |  |  |   |  |
| 1 Enter the appropriate a  | mount in each column for each year,   | see instructions before                | e makıng any entrıe                    | s   |  |
| (a)<br>Base period years Calendar<br>year (or tax year beginning in) | <b>(b)</b><br>Adjusted qualifying distributions   | <b>(c)</b><br>Net value of noncharital | ble-use assets                         | <b>(d)</b><br>Distribution rat<br>(col (b) divided by o |  |
| 2017   | 67,824  |  | 1,234,748                              |   | 0 054929   |
| 2016   | 51,072  |  | 1,175,264                              |   | 0 043456   |
| 2015   | 14,100  |  | 1,127,105                              |   | 0 012510   |
| 2014   | 48,532  |  | 1,191,658                              |   | 0 040726   |
| 2013   | 30,602  |  | 1,146,624                              | ı   | 0 026689   |
| 2 Total of line 1, column (  | ` '   |  | 2                                      |   | 0 178310   |
|  | o for the 5-year base period—divide tendation has been in existence if less                                 |  | · · ·   ¬                              |   | 0 035662   |
|  | oncharitable-use assets for 2018 from   |  | 4                                      |   | 1,160,001  |
| <b>5</b> Multiply line 4 by line 3                                   |   |  | 5                                      |   | 41,368   |
|  | nent income (1% of Part I, line 27b)  |  | 6                                      |   | 358  |
| <b>7</b> Add lines 5 and 6   |   |  | 7                                      |   | 41,726   |
|  | tions from Part XII, line 4 ,   |  | 8                                      |   | 75,948   |
|  | reater than line 7, check the box in Pa   | art VI, line 1b, and con               | nplete that part usir                  | g a 1% tax rate Se                                      | e the Part VI  |
| instructions   |   |  |  |   |  |

Page **6** 

| 1201       | Statements Regard  | uing    | Activities for which         | FORM 4720 May Be            | Required (Continue                  | u)             |          |                     |       |
|------------|--|---------|------------------------------|-----------------------------|-------------------------------------|----------------|----------|---------------------|-------|
| 5a         | During the year did the foundation   | pay o   | r incur any amount to        |                             |                                     |                |          | Yes                 | No    |
|            | (1) Carry on propaganda, or other  | wise a  | ttempt to influence legisl   | ation (section 4945(e))?    | ☐ Yes                               | <b>✓</b> 1     | No       |                     |       |
|            | (2) Influence the outcome of any s   | pecifi  | c public election (see sect  | tion 4955), or to carry     |                                     |                |          |                     |       |
|            | on, directly or indirectly, any voter registration drive?                                    |         |                              |                             |                                     |                |          |                     |       |
|            | (3) Provide a grant to an individual for travel, study, or other similar purposes?           |         |                              |                             |                                     |                |          |                     |       |
|            | (4) Provide a grant to an organization other than a charitable, etc., organization described |         |                              |                             |                                     |                |          |                     |       |
|            | (5) Provide for any purpose other t  |         |                              |                             | · · L Yes                           | <b>✓</b> 1     | No       |                     |       |
|            | educational purposes, or for the   | e prev  | ention of cruelty to childi  | ren or animals?             |                                     | <b>✓</b> ,     | .        |                     |       |
| b          | If any answer is "Yes" to 5a(1)-(5)  | , dıd a | any of the transactions fa   | all to qualify under the ex | cceptions described in              | <b>Y</b>       | No       |                     |       |
|            | Regulations section 53 4945 or in a  |         | =                            |                             |                                     |                | 5b       |                     |       |
|            | Organizations relying on a current i   |         |                              |                             |                                     |                |          |                     |       |
| c          | If the answer is "Yes" to question 5   | a(4),   | does the foundation clain    | n exemption from the        |                                     | ш              |          |                     |       |
|            | tax because it maintained expendit   |         |                              | •                           |                                     | П.             | .        |                     |       |
|            | If "Yes," attach the statement requi   |         | · · · · · ·                  |                             | · · L Yes                           | ш              | No       |                     |       |
| <b>6</b> a | Did the foundation, during the year  | , rece  | ive any funds, directly or   | indirectly, to pay premi    | ums on                              |                |          |                     |       |
|            | a personal benefit contract?   |         |                              |                             | · 🗆 🗆 vas                           | <b>✓</b> 1     | Na       |                     |       |
| b          | Did the foundation, during the year  | , pay   | premiums, directly or inc    | lirectly, on a personal be  | nefit contract?                     |                | МО   6Ь  |                     | No    |
|            | If "Yes" to 6b, file Form 8870   |         |                              |                             |                                     |                |          |                     |       |
| 7a         | At any time during the tax year, wa  | s the   | foundation a party to a p    | prohibited tax shelter tra  | nsaction?                           |                | .        |                     |       |
| b          | If yes, did the foundation receive a   |         |                              |                             | ∟ Yes                               | <b>V</b>       | NO   7b  |                     |       |
| 8          | Is the foundation subject to the sec   |         | •                            |                             |                                     |                |          |                     |       |
|            | excess parachute payment during t  |         |                              |                             |                                     |                |          |                     |       |
|            | Information About  |         |                              |                             | Yes                                 |                | No —     |                     |       |
| Pa         | and Contractors  | OIIIC   | ers, Directors, Trust        | ices, roundation ma         | illagers, nighty Far                | u EIII         | pioyees  | γ,                  |       |
| 1          | List all officers, directors, truste   | es fo   | oundation managers ar        | nd their compensation       | See instructions                    |                |          |                     |       |
|            | List all officers, all cetors, traste  |         | <b>b)</b> Title, and average | (c) Compensation (If        |                                     | <del>.</del> Т |          |                     |       |
|            | (a) Name and address   | `       | hours per week               | not paid, enter             | employee benefit plans              | and            | (e) Expe | ense acc<br>allowan |       |
|            |  |         | devoted to position          | -0-)                        | deferred compensation               | on             |          |                     |       |
| See        | Additional Data Table  | _       |                              |                             |                                     |                |          |                     |       |
|            |  |         |                              |                             |                                     |                |          |                     |       |
|            |  |         |                              |                             |                                     |                |          |                     |       |
|            |  |         |                              |                             |                                     |                |          |                     |       |
|            |  |         |                              |                             |                                     |                |          |                     |       |
|            |  |         |                              |                             |                                     |                |          |                     |       |
|            |  | -       |                              |                             |                                     |                |          |                     |       |
| 2          | Compensation of five highest-pa  | id en   | nployees (other than t       | hose included on line       | 1—see instructions). I              | f non          | e, enter | "NONE               | . "   |
| , ,        | N  |         | (b) Title, and average       |                             | (d) Contributions t                 |                |          |                     |       |
| (a)        | Name and address of each employee<br>more than \$50,000                                      | paid    | hours per week               | (c) Compensation            | employee benefit plans and deferred |                | (e) Expe | nse acci<br>Ilowanc |       |
|            | more than \$50,000   |         | devoted to position          |                             | compensation                        | •              | Ochici e | o                   | .03   |
| NON        | <br>E  |         |                              |                             |                                     |                |          |                     |       |
|            |  |         |                              |                             |                                     |                |          |                     |       |
|            |  |         |                              |                             |                                     |                |          |                     |       |
|            |  |         |                              |                             |                                     |                |          |                     |       |
|            |  |         |                              |                             |                                     |                |          |                     |       |
|            |  |         |                              |                             |                                     |                |          |                     |       |
|            |  |         |                              |                             |                                     |                |          |                     |       |
|            |  |         |                              |                             |                                     |                |          |                     |       |
|            |  |         |                              |                             |                                     |                |          |                     |       |
|            |  |         |                              |                             |                                     |                |          |                     |       |
|            | I mumahan af athan arradana a  |         | 0.000                        |                             |                                     |                |          |                     |       |
| TOTA       | I number of other employees paid ov  | /er \$5 | 0,000                        |                             | · · · · · •                         |                | F 01     | 10 55               | /2012 |
|            |  |         |                              |                             |                                     |                | Form 99  | 7U-PF               | (∠018 |

| Form 990-PF (2018)   |  | Page <b>7</b>             |
|--|--|---------------------------|
| Part VIII Information About Officers, Directors, Trustees and Contractors (continued)  | s, Foundation Managers, Highly Paid E        | Employees,                |
| 3 Five highest-paid independent contractors for professional serv  | rices (see instructions). If none, enter "NO | NE".                      |
| (a) Name and address of each person paid more than \$50,000  | (b) Type of service                          | (c) Compensation          |
| NONE   |  |                           |
|  |  |                           |
|  |  |                           |
|  |  |                           |
|  |  |                           |
| Total number of others receiving over \$50,000 for professional services   |  |                           |
| Part IX-A Summary of Direct Charitable Activities  |  |                           |
| List the foundation's four largest direct charitable activities during the tax year  Include r organizations and other beneficiaries served, conferences convened, research papers pro |  | Expenses                  |
| 1 PROVIDE SUPPORT FOR ADVANCING AND PROMOTING THE INTERESTS LIBRARIES AND RELATED PROGRAMS   | AND DEVELOPMENT OF THE ALBANY PUBLIC         | 75,948                    |
| 2  |  |                           |
| 3  |  |                           |
|  |  |                           |
| 4  |  |                           |
| Part IX-B Summary of Program-Related Investments (see  | a instructions)                              |                           |
| Describe the two largest program-related investments made by the foundation during   | •  | Amount                    |
| 1 N/A  | •  |                           |
| 2  |  |                           |
| All other program-related investments See instructions   |  |                           |
| 3  |  |                           |
|  |  |                           |
| Total. Add lines 1 through 3   |  |                           |
|  |  | Form <b>990-PF</b> (2018) |

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

3

4

5

2

3a 3h

4

5

75.948

75.590

Form 990-PF (2018)

358

57,642

57,642

Form **990-PF** (2018)

2018

| ,,,,, | ,  | U | •  | ' | ١ | _ | · | - |
|-------|----|---|----|---|---|---|---|---|
| Pa    | rt | Х | 11 | ī | ī |   | Γ |   |

| Form | 990-PF  | (2 | 018) |
|------|---------|----|------|
| Da   | rt YIII |    | 111  |

**b** Total for prior years

c From 2015. . . .

a From 2013. . . . .

5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . . . . . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . . f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 . . . . . 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . . 8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions) . . .

6 Enter the net total of each column as

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . . **b** Excess from 2015. . c Excess from 2016. . . .

d Excess from 2017. . .

e Excess from 2018. . .

Subtract lines 7 and 8 from line 6a . . . . . .

indicated below:

same amount must be shown in column (a) )

Undistributed Income (see instructions)

1 Distributable amount for 2018 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2017 only. . . . . .

Excess distributions carryover, if any, to 2018

**b** From 2014. . . . . d From 2016. . . . . . 2,610 e From 2017. . . . .

f Total of lines 3a through e. . . . . . . . 4 Qualifying distributions for 2018 from Part

XII, line 4 ▶ \$ a Applied to 2017, but not more than line 2a

**b** Applied to undistributed income of prior years (Election required—see instructions). . . . . c Treated as distributions out of corpus (Election 

**d** Applied to 2018 distributable amount. . . . .

e Remaining amount distributed out of corpus

2.610

18.306

(a)

Corpus

18.306

2.610

20,916

20,916

(b)

Years prior to 2017

(c)

2017

factors

| Par         | t XVI             | -A Analysis of Income-Producing   | Activities           |                |                       |                       | ruge <b>La</b>                         |
|-------------|-------------------|---|----------------------|----------------|-----------------------|-----------------------|--|
|             |                   | amounts unless otherwise indicated  |                      | usiness income | Excluded by sectio    | n 512, 513, or 514    | (e)<br>Related or exempt               |
| <b>1</b> Pr | ogram             | service revenue   | (a)<br>Business code | (b)<br>Amount  | (c)<br>Exclusion code | ( <b>d)</b><br>Amount | function income<br>(See instructions ) |
|             |                   |   |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |
| e           |                   |   |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |
|             |                   | nd contracts from government agencies   |                      |                |                       |                       |  |
|             |                   | ship dues and assessments   |                      |                |                       |                       |  |
|             | nterest<br>ivestm | on savings and temporary cash ents  |                      |                | 20                    | 20                    |  |
|             |                   | ds and interest from securities   |                      |                | 14                    | 30<br>29,851          |  |
|             |                   | al income or (loss) from real estate  |                      |                |                       | ,                     |  |
| а           | Debt-f            | inanced property  |                      |                |                       |                       |  |
|             |                   | bt-financed property  |                      |                |                       |                       |  |
|             |                   | al income or (loss) from personal property  |                      |                |                       |                       |  |
|             |                   | vestment income (loss) from sales of assets other than                              |                      |                |                       |                       |  |
|             | ventor            |   |                      |                |                       |                       | 10,343                                 |
| 9 N         | let inco          | me or (loss) from special events  |                      |                |                       |                       | 10,313                                 |
|             |                   | rofit or (loss) from sales of inventory   |                      |                |                       |                       |  |
|             | ther re           |   |                      |                |                       |                       |  |
|             |                   | LANEOUS   |                      |                |                       |                       | 900                                    |
|             |                   |   |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |
| e           |                   |   |                      |                |                       |                       |  |
|             |                   | Add columns (b), (d), and (e)   |                      |                |                       | 29,881                | 11,243                                 |
| 13 T        | otal. A           | Add line 12, columns (b), (d), and (e)  |                      |                | 1                     | 3                     | 41,124                                 |
|             | ee wo             | rksheet in line 13 instructions to verify calcu-B Relationship of Activities to the |                      | hmont of Evon  | nt Burnococ           |                       |  |
| Fall        | r VAT             | Explain below how each activity for which   |                      |                | <u> </u>              | ited importantly to   |  |
|             | e No.  <br>▼      | the accomplishment of the foundation's ex   |                      |                |                       |                       |  |
|             | <b>'</b>          | instructions )  |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |
|             |                   |   |                      |                |                       |                       |  |

| Form 990-PF (2018)              |                    |                      |   |              |  |             | Pa     | ge <b>13</b> |
|---------------------------------|--------------------|----------------------|---|--------------|--|-------------|--------|--------------|
|                                 | mation Re          |                      | fers To and Transact                                      | ions and I   | Relationships With Nonchari  | table       |        |              |
|                                 |                    |                      | any of the following with a<br>n section 527, relating to |              | ganızatıon described ın section 501<br>anızatıons?                         |             | Yes    | No           |
| a Transfers from the re         | eporting found     | dation to a noncha   | ırıtable exempt organizatı                                | on of        |  |             |        |              |
| (1) Cash                        |                    |                      |   |              |  | 1a(1)       |        | No           |
| (2) Other assets.               |                    |                      |   |              |  | 1a(2)       |        | No           |
| <b>b</b> Other transactions     |                    |                      |   |              |  |             |        |              |
| (1) Sales of assets             | to a noncharı      | itable exempt orga   | nization  |              |  | 1b(1)       |        | No           |
| (2) Purchases of as             | sets from a n      | oncharitable exem    | npt organization  |              |  | 1b(2)       |        | No           |
| (3) Rental of faciliti          | es, equipmen       | nt, or other assets. |   |              |  | 1b(3)       |        | No           |
| (4) Reimbursement               | arrangemen         | ts                   |   |              |  | 1b(4)       |        | No           |
| (5) Loans or loan g             | uarantees.         |                      |   |              |  | 1b(5)       |        | No           |
| (6) Performance of s            | services or me     | embership or fund    | raising solicitations                                     |              |  | 1b(6)       |        | No           |
| <b>c</b> Sharing of facilities, | equipment, m       | nailing lists, other | assets, or paid employees                                 |              |  | 1c          |        | No           |
| ın any transaction or           | sharing arra       | ngement, show in     | column (d) the value of t                                 | he goods, ot | n received less than fair market valu<br>ther assets, or services received |             |        |              |
| (a) Line No (b) Amoui           | nt involved        | (c) Name of noncha   | aritable exempt organization                              | (d) Desc     | cription of transfers, transactions, and sha                               | ring arra   | ngemen | ts           |
|                                 |                    |                      |   |              |  |             |        |              |
|                                 |                    |                      |   |              |  |             |        |              |
|                                 |                    |                      |   |              |  |             |        |              |
|                                 |                    |                      |   |              |  |             |        |              |
|                                 |                    |                      |   |              |  |             |        |              |
|                                 |                    |                      |   |              |  |             |        |              |
|                                 |                    |                      |   |              |  |             |        |              |
|                                 |                    |                      |   |              |  |             |        |              |
|                                 |                    |                      |   |              |  |             |        |              |
|                                 |                    |                      |   |              |  |             |        |              |
|                                 |                    |                      |   |              |  |             |        |              |
|                                 |                    |                      |   |              |  |             |        |              |
|                                 |                    |                      |   |              |  |             |        |              |
|                                 |                    |                      |   |              |  |             |        |              |
|                                 |                    |                      | 1.1.1.  | <u> </u>     | <del> </del>   |             |        |              |
| described in section            | ,<br>501(c) (other | than section 501(    | , or related to, one or mo<br>(c)(3)) or in section 527?  |              | ` <u> </u>   | <b>✓</b> No |        |              |
| <b>b</b> If "Yes," complete th  | _                  |                      | l   |              |  |             |        |              |
| (a) Nam                         | e of organizatio   | on                   | (b) Type of organization                                  | ition        | (c) Description of relati  | onship      |        |              |
|                                 |                    |                      |   |              |  |             |        |              |
|                                 |                    |                      |   |              |  |             |        |              |
|                                 |                    |                      |   |              |  |             |        |              |
|                                 |                    |                      |   |              |  |             |        |              |

| <b>b</b> If res, complete the following schedule |                          |                                 |
|--|--------------------------|---------------------------------|
| (a) Name of organization                         | (b) Type of organization | (c) Description of relationship |
|  |                          |                                 |
|  |                          |                                 |
|  |                          |                                 |
|  |                          |                                 |
|  |                          |                                 |

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge May the IRS discuss this return with the preparer shown 2019-09-25 Signature of officer or trustee Date Title

(see instr )? 🔲 Yes 🗆 No Print/Type preparer's name Preparer's Signature Date PTIN Check if self-P00129289 employed ▶ □ GLEN O KEARNS CPA 2019-09-25 Firm's name ▶ ACCUITY LLC Firm's EIN ▶45-4207980 Firm's address ▶ PO BOX 1072

Sign Here Paid **Preparer Use Only** ALBANY, OR 973210415

Phone no (541) 223-5555

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) How acquired (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) Date acquired Date sold P—Purchase (mo, day, yr) (mo, day, yr) D-Donation **KROGER** Р 2018-07-02 1 1 PFIZER INC Ρ 2014-07-17 2018-10-19 CISCO SYSTEMS INC Р 2017-01-31 2019-03-19 EMBRAER SA Ρ 2018-07-11 THE MOSAIC CO Ρ 2018-12-12 Р ISHARES MSCI MEXICO 2016-12-01 2019-03-19 Р GENERAL ELECTRIC 2017-10-05 2018-08-29 Р EMBRAER SA 2018-08-16 2018-12-20 XEROX CORP Ρ 2017-07-07 2019-03-19 AETNA INC Р 2018-08-15 2013-04-01 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 6,705 7,414 -709 6,694 4,688 2,006 3,199 1,850 1,349 10,686 9,355 1,331 9,075 5,784 3,291 7,667 7,616 51 2,569 4,889 -2,3202,585 2,329 256 5,592 6,263 671 3,941 1.015 2,926 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (k) over col (j), if any (j) as of 12/31/69 -709 2,006 1,349 1,331 3,291 51 -2,320256 671 2,926

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) How acquired (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation **EXXON MOBIL CORP** Р 2015-09-03 2018-12-06 BAKER HUGHES AGE COMPACLASS Ρ 2018-03-20 2019-04-10 GENERAL ELECTRIC Р 2018-08-29 **ASTRAZENECA** Р 2016-05-26 2018-12-19 **SCHLUMBERG** Ρ 2012-06-22 2019-04-10 Ρ US TREASURY NOTE 2016-05-13 2018-09-27 Ρ CIENA CORP 2017-09-28 2018-12-19 ELECTRONICS FOR IMAG Р 2000-01-07 2019-04-16 Ρ 2017-12-20 2018-10-16 NEWELL BRANDS INC MERCK & CO INC Р 2018-12-19 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 6,999 6,737 262 3,083 3,518 -435 5,009 8,282 -3,2733,414 2.684 730 2,269 3,090 -821 35,759 -937 34,822 1,516 994 522 9,769 7,388 2,381 -4,806 6,214 11,020 5,235 2.884 2,351 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (i) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 262 -435 -3,273730 -821 -937 522 2,381 -4,806 2,351

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) How acquired (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) Date acquired Date sold P—Purchase (mo, day, yr) (mo, day, yr) D-Donation US TREASURY NOTE Р 2016-05-13 2019-04-30 PORTLAND GENERAL ELECTRIC Ρ 2018-03-20 2018-10-19 ARCONIC INC Р 2012-08-13 2019-01-04 FLUOR CORP Р 2018-10-31 2019-05-22 FLEXTRONICS INTL LTD Ρ 2018-10-29 Ρ **US TREASUERY NOTE** 2017-06-02 2019-01-04 Ρ XEROX CORP 2019-05-03 Р AETNA INC 2013-04-01 2018-10-10 PROCTOR & GAMBLE Ρ 2019-01-23 2016-11-09 XEROX CORP Р 2017-07-07 2018-10-18 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 40,000 40,867 -867 2,582 2,202 380 25,303 25,847 -544 4,458 6.820 -2,362 5,226 9,957 -4,731 24,888 25,188 -300 7,236 6,803 433 8,206 2,030 6,176 3,765 3,449 316 4,134 4,445 -311 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (i) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any -867 380 -544 -2,362 -4,731 -300 433 6,176 316 -311

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) How acquired Date acquired Date sold P—Purchase (mo, day, yr) (mo, day, yr) D-Donation Р WAL-MART STORES 2019-01-23 Р 1 CIENA CORP 2017-09-28 2018-10-19 ALLEGHANY CORP Ρ 2014-04-17 2019-02-22 Р FIRSTENERGY CORP 2017-04-07 2018-10-19 Ρ AMDOCS LIMITED 2018-10-19 2019-03-18 Ρ **ISHARES RUSSEL 2000** 2014-07-22 2018-10-19 Р PORTLAND GENERAL ELECTRIC 2018-03-20 2019-03-19 Р MICROSOFT CORP 2018-10-19 Р AMDOCS LIMITED 2017-02-10 2019-03-18 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) (f) 4,424 3,138 1,286 1,877 2,637 760 3,170 2,046 1,124 8,853 7,280 1,573 3,246 3,819 -573 8,534 6,332 2,202 4,576 973 3,603 6,054 1,558 4,496 5,950 6.543 -593 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 1,286 760 1,124 1,573 -573 2,202 973 4,496 -593

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account. (e) other allowances hours per week not paid, enter Contributions to (b) devoted to position -0-) employee benefit plans and deferred compensation BARBARA KROCHTA TREASURER ٥ 000 00 PO BOX 102 ALBANY, OR 97321 DICK OLSEN MEMBER 000 00 PO BOX 102 ALBANY, OR 97321 MARK SPENCE MEMBER 000 00 PO BOX 102 ALBANY, OR 97321 JIM HOGAN CHAIR ٥ ٥ 000 00 PO BOX 102 ALBANY, OR 97321 BECKY KOONTZ SECRETARY 000 00 PO BOX 102 ALBANY, OR 97321 JOHN BYRNE VICE CHAIR 0 000 00 PO BOX 102 ALBANY, OR 97321 SCOTT GIVENS **MEMBER** 0 000 00 PO BOX 102 ALBANY, OR 97321 RICHARD ENGEMAN MEMBER 000 00

PO BOX 102 ALBANY, OR 97321

| efile GRAPHIC print - DO NOT F   | PROCESS As | Filed Data -           |                        | [                      | DLN: 93491284002139                         |  |  |  |
|----------------------------------|------------|------------------------|------------------------|------------------------|---|--|--|--|
| TY 2018 Accounting Fees Schedule |            |                        |                        |                        |   |  |  |  |
| _                                |            |                        |                        |                        |   |  |  |  |
|                                  |            | BANY PUBL<br>3-1085864 | IC LIBRARY FO          | DUNDATION              |   |  |  |  |
| Category                         | Amoun      | t Net                  | t Investment<br>Income | Adjusted Net<br>Income | Disbursements<br>for Charitable<br>Purposes |  |  |  |
| ACCOUNTING                       |            | 3,515                  |                        |                        |   |  |  |  |

DLN: 93491284002139

Name: ALBANY PUBLIC LIBRARY FOUNDATION

**EIN:** 93-1085864

Cain Loss Cala Othor Assats Cahadula

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

| Gain Loss Sale Other Assets Schedule |               |              |           |                |                   |        |              |                |             |                          |
|--------------------------------------|---------------|--------------|-----------|----------------|-------------------|--------|--------------|----------------|-------------|--------------------------|
| Name                                 | Date Acquired | How Acquired | Date Sold | Purchaser Name | Gross Sales Price | Basis  | Basis Method | Sales Expenses | Total (net) | Accumulated Depreciation |
| CISCO SYSTEMS INC                    | 2017-01       | PURCHASE     | 2019-04   |                | 2,204             | 1,233  |              |                | 971         |                          |
| NTNL OILWELL VAR                     |               | PURCHASE     | 2019-06   |                | 7,229             | 12,121 |              |                | -4,892      |                          |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - |                   | DLN: 93491284002139 |  |  |  |  |  |  |
|--------------------------------------|-----------------|-------------------|---------------------|--|--|--|--|--|--|
| TY 2018 Investments - Other Schedule |                 |                   |                     |  |  |  |  |  |  |
| Name: A                              | ALBANY PUBLIC L | IBRARY FOUNDATION |                     |  |  |  |  |  |  |

1,154,378

1,154,378

| EIN: 93-1003                 | 0004                  |            |                                  |
|------------------------------|-----------------------|------------|----------------------------------|
| Investments Other Schedule 2 |                       |            |                                  |
| Category/ Item               | Listed at Cost or FMV | Book Value | End of Year Fair<br>Market Value |
|                              |                       |            |                                  |

FMV

ETNI 02 1005064

CHARLES SCHWAB INVESTMENTS

| D                                    | Amount          |                       |                     |  |  |  |  |  |
|--------------------------------------|-----------------|-----------------------|---------------------|--|--|--|--|--|
| EIN:                                 | 93-1085864      |                       |                     |  |  |  |  |  |
| Name:                                | ALBANY PUBL     | IC LIBRARY FOUNDATION |                     |  |  |  |  |  |
| TY 2018 Other Decreases Schedule     |                 |                       |                     |  |  |  |  |  |
| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - |                       | DLN: 93491284002139 |  |  |  |  |  |

UNREALIZED LOSS ON INVESTMENTS 14,161

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data -                      |                          | DLN                    | : 93491284002139                            |  |  |  |
|--------------------------------------|--------------------------------------|--------------------------|------------------------|---|--|--|--|
| TY 2018 Other Expenses Schedule      |                                      |                          |                        |   |  |  |  |
|                                      |                                      |                          |                        |   |  |  |  |
| Name:                                | ALBANY PUBLIC                        | LIBRARY FOUND            | DATION                 |   |  |  |  |
| <b>EIN:</b> 93-1085864               |                                      |                          |                        |   |  |  |  |
| Other Expenses Schedule              |                                      |                          |                        |   |  |  |  |
| Description                          | Revenue and<br>Expenses per<br>Books | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable<br>Purposes |  |  |  |
| EXPENSES                             |                                      |                          |                        |   |  |  |  |
| ADMIN EXPENSES                       | 1,217                                |                          |                        | 1,217                                       |  |  |  |

257

100

197

8,379

8,379

257

100

197

FIDELITY BOND EXPENSE

INVESTMENT MANAGEMENT FEES

FILING FEE

INSURANCE

Name: ALBANY PUBLIC LIBRARY FOUNDATION

MISCELLANEOUS

**EIN:** 93-1085864

As Filed Data -

Other Income Schedule

efile GRAPHIC print - DO NOT PROCESS

Description

DLN: 93491284002139

Revenue And

900

**Expenses Per Books** 

Net Investment Income

**Adjusted Net Income** 

900

| efile GRAPHIC print - DO NOT PROCE | SS As Filed Data | -                | DL           | N: 93491284002139          |  |  |  |  |  |
|------------------------------------|------------------|------------------|--------------|----------------------------|--|--|--|--|--|
| TY 2018 Taxes Schedule             |                  |                  |              |                            |  |  |  |  |  |
|                                    |                  |                  |              |                            |  |  |  |  |  |
| Na                                 | ma. ALBANV DIE   | BLIC LIBRARY FOU | NDATION      |                            |  |  |  |  |  |
|                                    |                  |                  | NDATION      |                            |  |  |  |  |  |
| E                                  | IN: 93-1085864   |                  |              |                            |  |  |  |  |  |
| Category                           | Amount           | Net Investment   | Adjusted Net | Disbursements              |  |  |  |  |  |
|                                    |                  | Income           | Income       | for Charitable<br>Purposes |  |  |  |  |  |
| FEDERAL EXCISE TAX                 | 358              |                  |              | -                          |  |  |  |  |  |
| OREGON TAX                         | 165              |                  |              |                            |  |  |  |  |  |