

## Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2011

Department of the Treasury  
Internal Revenue ServiceUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code  
(except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public  
Inspection

## A For the 2011 calendar year, or tax year beginning

, 2011, and ending

## B Check if applicable:

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Terminated  
☐ Amended return  
☐ Application pending

C  
 WEST TISBURY LIBRARY FOUNDATION  
 P.O. BOX 1238  
 WEST TISBURY, MA 02575

## D Employer Identification Number

27-1785670

## E Telephone number

508-280-3068

G Gross receipts \$ 1,225,984.

F Name and address of principal officer: ANDREA HARTMAN  
 76 PANHANDLE ROAD WEST TISBURY, MA 02575

H(a) Is this a group return for affiliates? ☐ Yes ☒ NoH(b) Are all affiliates included? ☐ Yes ☐ No

If 'No,' attach a list. (see instructions)

I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) ( ) (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: WWW.WTLIBRARYFOUNDATION.ORG

H(c) Group exemption number

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of Formation: 2010

M State of legal domicile: MA

## Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>TO PROMOTE AND ADVOCATE FOR THE MAINTENANCE, IMPROVEMENT, RENOVATION, EXPANSION AND SUPPORT OF THE LIBRARY BUILDINGS, COLLECTIONS, PROGRAMS AND SERVICES OF THE WEST TISBURY FREE PUBLIC LIBRARY</u>	
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3	Number of voting members of the governing body (Part VI, line 1a).....	11
	4	Number of independent voting members of the governing body (Part VI, line 1b).....	11
	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a).....	0
	6	Total number of volunteers (estimate if necessary).....	20
Revenue	7a	Total unrelated business revenue from Part VIII, column (C), line 12.....	0.
	7b	Net unrelated business taxable income from Form 990-T, line 34.....	0.
	8	Contributions and grants (Part VIII, line 1h).....	123,769.
	9	Program service revenue (Part VIII, line 2g).....	1,222,548.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d).....	14.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e).....	-2,924.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12).....	1,225,984.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3).....	239,635.
	14	Benefits paid to or for members (Part IX, column (A), line 4).....	
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10).....	
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e).....	
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 16,630.	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e).....	5,638.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25).....	271,054.
	19	Revenue less expenses. Subtract line 18 from line 12.....	954,930.
Net Assets or Fund Balances	20	Total assets (Part X, line 16).....	115,221.
	21	Total liabilities (Part X, line 26).....	0.
	22	Net assets or fund balances. Subtract line 21 from line 20.....	1,070,151.

## Part II Signature Block

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 officer) is based on all information of which preparer has any knowledge.

Sign  
Here

Signature of officer

Date

ANDREA HARTMAN

TREASURER

Type or print name and title.

Paid  
Preparer  
Use Only

Print/Type preparer's name

Preparer's signature

Date

Check ☒ if self-employed

PTIN

CLIFFORD N. ABELSON

P01379664

Firm's name ▶ ABELSON &amp; COMPANY

Firm's address ▶ 27 CONGRESS STREET, SUITE 203  
SALEM, MA 01970

Firm's EIN ▶ 04-2742962

Phone no. 978-744-5206

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

BAA For Paperwork Reduction Act Notice, see the separate instructions.

TEEA0113L 08/18/11

Form 990 (2011)



Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III. ☐

1 Briefly describe the organization's mission:

TO PROMOTE AND ADVOCATE FOR THE MAINTENANCE, IMPROVEMENT, RENOVATION, EXPANSION AND SUPPORT OF THE LIBRARY BUILDINGS, COLLECTIONS, PROGRAMS AND SERVICES OF THE WEST TISBURY FREE PUBLIC LIBRARY.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☒ Yes ☐ No

If 'Yes,' describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If 'Yes,' describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 248,701. including grants of \$ ) (Revenue \$ 1,222,973.) SUCCESSFULLY RAISED FUNDS TO HELP THE WEST TISBURY FREE PUBLIC LIBRARY BEGIN RENOVATION OF THE LIBRARY FACILITY.

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services. (Describe in Schedule O.)

4e Total program service expenses 248,701.



Part IV	Checklist of Required Schedules
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[illegible]



## Part IV Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21	X	Yes	No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and II.	22	X		
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J.	23	X		
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25.	24a	X		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b			
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c			
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d			
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I.	25a	X		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I.	25b	X		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II.	26	X		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27	X		
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	28a	X		
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.	28a			
b	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.	28b	X		
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV.	28c	X		
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M.	29	X		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M.	30	X		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I.	31	X		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32	X		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I.	33	X		
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1.	34	X		
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X		
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2.	35b	X		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2.	36	X		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI.	37	X		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	38	X		



**Part V Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response to any question in this Part V. ☐

1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		1a	0
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.		2a	0
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a	X
b If 'Yes,' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O.		3b	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a	X
b If 'Yes,' enter the name of the foreign country: _____			
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b	X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		6a	X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b	
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		7a	X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c	X
d If 'Yes,' indicate the number of Forms 8282 filed during the year.		7d	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f	X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		8	
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?		9a	
b Did the organization make a distribution to a donor, donor advisor, or related person?		9b	
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12.		10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		10b	
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders.		11a	
b Gross income from other sources (Do not net amounts due or received from them.)		11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a	
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.		12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?		13a	
Note. See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		13b	
c Enter the amount of reserves on hand.		13c	
14a Did the organization receive any payments for indoor tanning services during the tax year?		14a	X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O.		14b	



**Part VI**

**Governance, Management and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

**Section A. Governing Body and Management**

Check if Schedule O contains a response to any question in this Part VI ☒

1a	Enter the number of voting members of the governing body at the end of the tax year	11
1b	Enter the number of voting members included in line 1a, above, who are independent	11

2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	X	2
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	X	3
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	X	5
6	Did the organization have members or stockholders?	X	6
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	X	7a
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?	X	7b
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		8
8a	The governing body?	X	8a
8b	Each committee with authority to act on behalf of the governing body?	X	8b
9	Is there any officer, director, or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.	X	9

**Section B. Policies**

(This Section B requests information about policies not required by the Internal Revenue Code.)

10a	Did the organization have local chapters, branches, or affiliates?	No
10b	Did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X

12a	Did the organization have a written conflict of interest policy? If "No," go to line 13.	X
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done.	
13	Did the organization have a written whistleblower policy?	X
14	Did the organization have a written document retention and destruction policy?	X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	
15a	The organization's CEO, Executive Director, or top management official.	X
15b	Other officers or key employees of the organization.	X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	X

**Section C. Disclosure**

17 List the states with which a copy of this Form 990 is required to be filed **MA**

18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.	<input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.	SEE SCHEDULE O
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization:	ANDREA HARTMAN P.O. BOX 692 WEST TISBURY MA 02575 508-280-3068



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

Check if Schedule O contains a response to any question in this Part VII. ☐

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

1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (describe hours for related organization in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated compensation from the organization and related organizations (other than W-2/1099-MISC)
		Former	Highest compensated employee	Key employee	Officer	Institutional trustee			
(1) KIM BAUMHOFFER	5						0.	0.	0.
(2) CAROL D. BRUSH	5						0.	0.	0.
(3) NANCY COLE	5						0.	0.	0.
(4) TERRY CUTLER	5						0.	0.	0.
(5) SAM HISER	5						0.	0.	0.
(6) CHUCK HUGHES	5						0.	0.	0.
(7) JACK POTZ	5						0.	0.	0.
(8) HUNTER MOORMAN	5						0.	0.	0.
(9) LYNN WHITING	5						0.	0.	0.
(10) ANDREA HARTMAN	5						0.	0.	0.
(11) CHRIS DECKER	5						0.	0.	0.
(12) CLERK	5						0.	0.	0.
(13)									
(14)									



[illegible]



## Statement of Revenue

	CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS				PROGRAM SERVICE REVENUE				OTHER REVENUE																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																												
	1 a Federated campaigns	1 b Membership dues	1 c Fundraising events	1 d Related organizations	1 e Government grants (contributions)	1 f All other contributions, gifts, grants, and similar amounts not included above	1 g Noncash contributions included in lines 1a-1f: \$	1 h Total. Add lines 1a-1f	2 a Business Code	2 b-2 d	2 e All other program service revenue	2 f Total. Add lines 2a-2f	3 Investment income (including dividends, interest and other similar amounts)	4 Income from investment of tax-exempt bond proceeds	5 Royalties	6 a Gross rents	6 b Less: rental expenses	6 c Rental income or (loss)	7 a Gross amount from sales of assets other than inventory	7 b Less: cost or other basis and sales expenses	7 c Gain or (loss)	7 d Net gain or (loss)	8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18.	8 b Less: direct expenses	8 c Net income or (loss) from fundraising events	9 a Gross income from gaming activities. See Part IV, line 19.	9 b Less: direct expenses	9 c Net income or (loss) from gaming activities	10 a Gross sales of inventory, less returns and allowances	10 b Less: cost of goods sold	10 c Net income or (loss) from sales of inventory	Miscellaneous Revenue	11 a MERCHANDISE SALES	11 b-11 d	11 e Total. Add lines 11a-11d	12 Total revenue. See instructions.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																	
(A) Total revenue			695.			1,221,853.		1,222,548.					3,011.	3,011.												425.	425.								425.	1,225,984.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																	
(B) Related or exempt function revenue																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																					



**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Check if Schedule O contains a response to any question in this Part IX. ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.			
(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
239,635.	239,635.		
2	Grants and other assistance to individuals in the United States. See Part IV, line 21.		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.		
4	Benefits paid to or for members.		
5	Compensation of current officers, directors, trustees, and key employees.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0.	0.
7	Other salaries and wages.		
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions).		
9	Other employee benefits.		
10	Payroll taxes.		
11	Fees for services (non-employees):		
	a Management.		
	b Legal.		
	c Accounting.		
	d Lobbying.		
	e Professional fundraising services. See Part IV, line 17.		
	f Investment management fees.		
	g Other.		
12	Advertising and promotion.	2,457.	2,457.
13	Office expenses.	6,427.	2,903.
14	Information technology.		
15	Royalties.		
16	Occupancy.		
17	Travel.		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.		
19	Conferences, conventions, and meetings.		
20	Interest.		
21	Payments to affiliates.		
22	Depreciation, depletion, and amortization.		
23	Insurance.		
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)		
a	COSTS OF PUBLIC EVENTS	15,557.	15,557.
b	PRINTING AND PUBLICATIONS	6,615.	
c	OTHER COMMUNICATION COSTS	243.	243.
d	BANK FEES	120.	120.
e	All other expenses.		
25	Total functional expenses. Add lines 1 through 24e.	271,054.	5,723.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).		



Part X Balance Sheet

(A) Beginning of year		(B) End of year	
1	Cash — non-interest-bearing	1	37,002.
2	Savings and temporary cash investments	2	277,499.
3	Pledges and grants receivable, net	3	755,650.
4	Accounts receivable, net	4	
5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.	5	
6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions).	6	
7	Notes and loans receivable, net	7	
8	Inventories for sale or use	8	
9	Prepaid expenses and deferred charges	9	
10a	Land, buildings, and equipment: cost or other basis.	10a	
b	Less: accumulated depreciation	10b	
11	Investments — publicly traded securities	11c	
12	Investments — other securities. See Part IV, line 11.	12	
13	Investments — program-related. See Part IV, line 11.	13	
14	Intangible assets	14	
15	Other assets. See Part IV, line 11.	15	
16	Total assets. Add lines 1 through 15 (must equal line 34).	16	115,221.
17	Accounts payable and accrued expenses	17	
18	Grants payable	18	
19	Deferred revenue	19	
20	Tax-exempt bond liabilities	20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D.	21	
22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L.	22	
23	Secured mortgages and notes payable to unrelated third parties.	23	
24	Unsecured notes and loans payable to unrelated third parties.	24	
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.	25	
26	Total liabilities. Add lines 17 through 25.	26	0.
Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29 and lines 33 and 34.			
27	Unrestricted net assets.	27	115,221.
28	Temporarily restricted net assets.	28	37,002.
29	Permanently restricted net assets.	29	
Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds.	30	
31	Paid-in or capital surplus, or land, building, or equipment fund.	31	
32	Retained earnings, endowment, accumulated income, or other funds.	32	
33	Total net assets or fund balances.	33	115,221.
34	Total liabilities and net assets/fund balances.	34	1,070,151.



**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response to any question in this Part XI. ☐**Part XII Financial Statements and Reporting**Check if Schedule O contains a response to any question in this Part XII. ☐

1	Total revenue (must equal Part VIII, column (A), line 12).	1	1,225,984.
2	Total expenses (must equal Part IX, column (A), line 25).	2	271,054.
3	Revenue less expenses. Subtract line 2 from line 1.	3	954,930.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4	115,221.
5	Other changes in net assets or fund balances (explain in Schedule O).	5	0.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)).	6	1,070,151.

1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other. Explain \_\_\_\_\_

2a Were the organization's financial statements compiled or reviewed by an independent accountant? ☒ Yes ☐ No

b Were the organization's financial statements audited by an independent accountant? ☒ Yes ☐ No

c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? ☒ Yes ☐ No

d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:  
☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? ☒ Yes ☐ No

b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. ☐ Yes ☒ No