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Form	990

Department of the Treasury

EXTENDED TO NOVEMBER 15, 2024 Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Eorm990 for instructions and the latest information.

OMB No. 1545-0047 **2023** Open to Public Inspection

Interi	hal Heve		ule tatest il		Inspection		
<u>A</u> I	or th	e 2023 calendar year, or tax year beginning and	ending				
Ba	Check if opplicab	e: C Name of organization		D Employer identif	ication number		
	Addre ohang Name	DAUPHIN COUNTY LIBRARY SYSTEM		23-13523	1 7		
	_ chang ⊤Initial						
	_return _Final _return	101 WALNUT ST	Room/suite		4-4961		
	termir ateo	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	8,628,593.		
	Amen			H(a) Is this a group r	eturn		
	Applic			for subordinates			
	_tiòń pendi	¹⁹ 101 WALNUT STREET, HARRISBURG, PA 1710	A A	NT OPEN			
				H(b) Are all subordinates i			
<u> 1</u>	ax-ex	empt status: 🔀 501(c)(3) 🔄 501(c) () (insert no.) 🗌 4947(a)(1)	on 527,	500 A.S.	list. See instructions		
	Vebsi		View 19	H(c):Group exemption			
κF	orm of	organization: X Corporation Trust Association Other	L Year	of tormation 1889	M State of legal domicile; \mathbf{PA}		
Pa	ert I	Summary					
	1	Briefly describe the organization's mission or most significant activities	TABRAR	YEBULIES CO	MMUNTTY AND		
e	•	TRANSFORMS LIVES BY CONNECTING PEOPLE					
Governance							
Ĕ		Check this box if the organization discontinued its operations or dispos	sed of more	than 25% of its net as			
Š	3	Number of voting members of the governing body (Part VI, lines)a)			16		
	4	Number of independent voting members of the governing body (Rart VI, /line 1b)		4	16		
ŝ	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)	7	5	160		
Activities &		Total number of volunteers (estimate if necessary)	4	6	117		
tivi		Total unrelated business revenue from Part VIII, column (C) line 12	XC)		0.		
Ac					0.		
	a a	Net unrelated business taxable income from Form 990 T, Part Jine 11	<u>44.797</u>				
			. –	Prior Year	Current Year		
a	8	Contributions and grants (Part VIII, line 1h)	·	10,804,899.	7,939,546.		
Revenue	9	Program service revenue (Part VIII, line 2g)		107,433.	114,195.		
sve	10	Investment income (Part VIII, column (A), Tines 3, 4, and 7d)		161,947.	484,098.		
Re		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 1e)		4,489.	9,000.		
		Total revenue - add lines 8 through 11 (must equal Part VII), column (A), line 12)	·····	11,078,768.	8,546,839.		
	13	Grants and similar amounts paid (Part IX; column (A) lines:13)		0.	0.		
		Benefits paid to or for members (Part IX, column (A), time 4)		0.	0.		
ŝ		Salaries, other compensation, employee benefits (Rart IX, column (A), lines 5-10)		4,275,089.	4,335,259.		
Expenses	16a	Professional fundraising fees (Part IX/column (A), line 11e)		68,800.	36,700.		
bei	b	Total fundraising expenses (Part IX, column (D), line 25) 378, 08	38. 🗌				
ш		Other expenses (Pairt IX, column (A), lines 11a 11d>11f-24e)		3,691,267.	4,214,417.		
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		8,035,156.	8,586,376.		
				3,043,612.			
		Revenue less expenses. Subfract line 18 from line 12		3,043,612. ginning of Current Year	-39,537.		
Assets or Assets or					End of Year		
set	20	Total assets (Part X, line 16)		<u>28,450,863.</u>	29,325,000.		
_ ₹	21	Total liabilities (Part X, line 26)		3,696,269.	3,551,171.		
Net/	22	Net assets or fund balances. Subtract line 21 from line 20		24,754,594.	25,773,829.		
Pa	rt II	Signature Block					
Unde	r oena	ties of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	nts and to the best of my	v knowledge and helief, it is		
		, and complete. Declaration of preparer (other than officer) is based on all information of wh					
	001100		ion proparor i	Ido dily kilowicage.	114/2024		
		Signature of officer		Date	11712024		
Sign				Date			
Here	9	STEPHANIE KAZANJIAN, FINANCE DIRECTOR					
		Type or print name and title					
		Print/Type preparer's name Preparer's signature	D	ate Check	PTIN		
Paid		ANN SHENK ANN SHENK	1	1/14/24 if self-employ	P01325100		
Prep		Firm's name TROUT CPA	·		3-1551315		
-					<u>, TANTATA</u>		
Use	only				7 560 0000		
		LANCASTER, PA 17601		Phone no.71	7-569-2900		
May	the IF	S discuss this return with the preparer shown above? See instructions			🔀 Yes 🗌 No		

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

^{332001 12-21-23}

Form 8879-TE		IRS E-file Signatur for a Tax Exe	e Authorization		OMB No. 1545-0047
Form OOTO TE		B, or fiscal year beginning		20	0000
		Do not send to the IRS. K		, 20	2023
Department of the Treasury Internal Revenue Service		Go to www.irs.gov/Form8879TE			
Name of filer				EIN or SSN	I
DAUPHI	N COUNTY I	IBRARY SYSTEM		23-1	352317
Name and title of officer or pe	rson subject to tax	DUSTIN BRINTON-W	ILSON		
		INTERIM EXECUTIV	E DIRECTOR		
Part I Type of	Return and Re	turn Information			
Form 5330 filers may enter or 10a below, and the amo	r dollars and cents. ount on that line for	e using this Form 8879-TE and ent For all other forms, enter whole d the return being filed with this for I-). But, if you entered -0- on the re	ollars only. If you check the bo m was blank, then leave line 1	x on line 1a, 2a, b, 2b, 3b, 4b, 5b	3a, 4a, 5a, 6a, 7a, 8a, 9a, , 6b, 7b, 8b, 9b, or 10b,
1a Form 990 check h	nere X	b Total revenue, if any (Form	990, Part VIII, column (A), line 1	12)	1b <u>8,546,839.</u>
2a Form 990-EZ che	ck here	b Total revenue, if any (Form	990-EZ, line 9)		2b
3a Form 1120-POL	check here	b Total tax (Form 1120-POL, I			3b
4a Form 990-PF che	ck here	b Tax based on investment in			4b
5a Form 8868 check	here	b Balance due (Form 8868, lir			5b
6a Form 990-T chec	k here	b Total tax (Form 990-T, Part			6b
7a Form 4720 check	here	b Total tax (Form 4720, Part I			
8a Form 5227 check		b FMV of assets at end of tax			
9a Form 5330 check	here	b Tax due (Form 5330, Part II,			9b
10a Form 8038-CP ch		b Amount of credit payment			10b
		ure Authorization of Offic			
Under penalties of perjury, of entity)		I am an officer of the above entit	y or I am a person subjec , (EIN)		
intermediate service provid acknowledgement of recei of any refund. If applicable entry to the financial institu financial institution to debi later than 2 business days payment of taxes to receiv personal identification num	der, transmitter, or pt or reason for rej, e, I authorize the U.3. ution account indic it the entry to this a prior to the payme re confidential infor nber (PIN) as my sig	Part I above is the amount shown electronic return originator (ERO) t action of the transmission, (b) the S. Treasury and its designated Fin ated in the tax preparation softwan ccount. To revoke a payment, I m int (settlement) date. I also authorize mation necessary to answer inquir gnature for the electronic return ar	o send the return to the IRS an reason for any delay in proces ancial Agent to initiate an elect re for payment of the federal ta ust contact the U.S. Treasury F ze the financial institutions invo ies and resolve issues related t	nd to receive from sing the return o ronic funds with xes owed on this Financial Agent a olved in the proce to the payment.	n the IRS (a) an r refund, and (c) the date drawal (direct debit) s return, and the t 1-888-353-4537 no sessing of the electronic have selected a
PIN: check one box only					
X I authorize TR	OUT CPA			to enter my F	
		ERO firm name			Enter five numbers, but do not enter all zeros
with a state age on the return's c As an officer or return. If I have i	ncy(ies) regulating of disclosure consent s person subject to ta ndicated within this	23 electronically filed return. If I has charities as part of the IRS Fed/Sta screen. ax with respect to the entity, I will be return that a copy of the return is my PIN on the return's disclosure	ate program, I also authorize th enter my PIN as my signature o being filed with a state agency	e aforementione on the tax year 20	d ERO to enter my PIN 023 electronically filed
Signature of officer or person subject	ct to tax			Date	9
	tion and Authe	entication			
ERO's EFIN/PIN. Enter yo	our six-digit electror	ic filing identification			
number (EFIN) followed by	your five-digit self-	selected PIN.	23846709 Do not enter all a		
-		N, which is my signature on the 2 requirements of Pub. 4163, Mode	-		
ERO's signature			Date	11/14/24	
		ERO Must Retain This For			
	Do Not S	ubmit This Form to the IR	5 Unless Requested To	Do So	
For Privacy Act and Pape	erwork Reduction	Act Notice, see instructions.			Form 8879-TE (2023)
LHA 302521 01-05-24					

(Rev. January 2024)

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

Department of the Treasury Internal Revenue Service

File a separate application for each return. Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Part I - Io	dentification					
Type or	Name of exempt organization, employer, or other filer,	, see instri	uctions.	xpayer	identification numb	er (TIN)
Print				_		
File by the	DAUPHIN COUNTY LIBRARY SYST				23-135231	7
due date for filing your return. See	Number, street, and room or suite no. If a P.O. box, se 101 WALNUT ST	ee instruct	tions.		, ,	
instructions.						
Enter the	HARRISBURG, PA 17101 Return Code for the return that this application is for (file	a separa	te application for each return)			01
Applicati	on Is For	Return	Application Is For			Return
		Code				Code
Form 990) or Form 990-EZ	01	Form 4720 (other than individual)			09
Form 472	20 (individual)	03	Form 5227			10
Form 990)-PF	04	Form 6069			11
Form 990)-T (sec. 401(a) or 408(a) trust)	05	Form 8870			12
Form 990)-T (trust other than above)	06	Form 5330 (individual)			13
Form 990	0-T (corporation)	07	Form 5330 (other than individual)			14
Form 104	I1-A	08				
 After year 	ou enter your Return Code, complete either Part II or Part	: III. Part II	I, including signature, is applicable only	for an	extension of	
time to fi	e Form 5330.					
 If this a 	pplication is for an extension of time to file Form 5330, ye	ou must e	nter the following information.			
Pla	n Name					
Pla	n Number					
Pla	n Year Ending (MM/DD/YYYY)					
	utomatic Extension of Time To File for Exempt Organi					
The b	poks are in the care of STEPHANIE KAZANJI	-				
		' – HA	ARRISBURG, PA 17101			
	none No. <u>717-234-4961</u>		Fax No			
	organization does not have an office or place of business					
	is for a Group Return, enter the organization's four-digit G					
	. If it is for part of the group, check this box					
	quest an automatic 6-month extension of time until			e exem	npt organization retu	rn for
	organization named above. The extension is for the orga	anization's	return for:			
X	calendar year 20 23 or					
	tax year beginning	, 20	, and ending		, 20	
2 If t	he tax year entered in line 1 is for less than 12 months, ch	neck reaso	on: Initial return Fina	al retur	n	
	Change in accounting period			T	I	
	his application is for Forms 990-PF, 990-T, 4720, or 6069,	, enter the	e tentative tax, less			0
	/ nonrefundable credits. See instructions.			3a	\$	0.
	nis application is for Forms 990-PF, 990-T, 4720, or 6069,					0
	imated tax payments made. Include any prior year overpa			3b	\$	0.
	lance due. Subtract line 3b from line 3a. Include your pay					0
usi	ng EFTPS (Electronic Federal Tax Payment System). See	Instructio	ns.	3c	\$	Ο.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

ELECTRONIC FILING STATUS REPORT

	TAXING AUTHORITY	RETURN STATUS	ELECTRONIC FILING STATUS	DATE EXPORTED
FEDERAL FORM	990	QUALIFIED	ACCEPTED	11/14/2024
FEDERAL FORM	990 8868 (FORM 990)	QUALIFIED	ACCEPTED	11/14/2024 05/09/2024
	<u> </u>	2011211122		
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(Code:) (Examples $1, 0.62, 0.29$, including grants of $0, 0, 0$, (Revenue 2		0.
	I ARE A	•••
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		-
(Code:) (Expenses \$ 841,303, including grants of \$ 0,) (Bevenue \$		0.
	IPUTING	
		ED
62,296 TIMES BY LIBRARY VISITORS DURING 17,727 PUBLIC HOURS.	IN	
	LION	
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Other program services (Describe on Schedule O.)		
Other program services (Describe on Schedule O.) (Expenses \$ 3,487,676. including grants of \$ 0.) (Revenue \$ 114,1	95.)	
(Expenses \$ 3,487,676. including grants of \$ 0.) (Revenue \$ 114,1	95.)	
(Expenses \$ 3,487,676. including grants of \$ 0.) (Revenue \$ 114,1	.95.) _{Form} 9	90 (202
	III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III Enfedy describe the organization's mission: MISSION: THE LIBRARY BUILDS COMMUNITY AND TRANSFORMS LIVES BY CONNECTION PEOPLE, IDEAS, AND OPPORTUNITIES. VISION: THE LIBRARY IS THE COMMUNITY'S TRUSTED PARTNER FOR GR CONNECTION. ACCESS TO INFORMATION AND INSPIRATION FUELS A TH Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2? If 'Yes,' describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services, as measured Section 501(6) and 501(6)/40 organizations are required to report the amount of grants and allocations to others, the tot revenue, if any, for each program service reported (code 1 (256, 718. including grant ofs) 0) (newmast COLLECTIONS - LENDING OF BOOKS, MAGAZINES, DVDS AND OTHERR RES THE STARY USERS BORROWED APPR 715,116 ITEMS. OF THIS TOTAL, ADULT AND CHILDREN'S RESOURCE DORNOWED 358,457 AND 356,659 TIMES, RESPECTIVELY. IN ADDITIC OPFFERED BY THE LIBRARY. IN 2023, THE INFLAMENT VIEWED AND 253,490 LOANED 223. UCAMENT TO ASSOCIATE FUN WITH LEARNING PROGRAMMING AND OUTREACH - PROGRAMS FOR FAMILIES AND CHILDREN Code	IIII Statement of Program Service Accomplishments Check if Schedule O contains a response or nois to any line in this Part III Check if Schedule O contains a response or nois to any line in this Part III Steffy describe the organization's mission: MISSION: THE LIBRARY BUILDS COMMUNITY AND TRANSFORMS LIVES BY CONNECTION. ACCESS TO INFORMATION AND INSPIRATION FUELS A THRIVING Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 900-E2? () Tyes, 'describe these new services on Schedule O. Did the organization coase conducting, or make significant changes in how it conducts, any program services, as measured by expenses. Section 5010(8) and 5010(4) organizations are required to report the amount of grants and alfocations to others. The total expenses, at revenue, if any, for each program service expond. Coll the crash program service expond. Coll the Section the organization's program service expond. () (normerst 1,256,718. MORTOR S D THE LIBRARY. 1203, LIBRARY USERS BORROWED APPROXIMATES Coll the THE LIBRARY. 12023, LIBRARY USERS BORROWED APPROXIMATES OFFERD BY THE LIBRARY. 12023, LIBRARY USERS BORROWED APPROXIMATES DEFORMENTS 1,062,029. 0) (Revenues PROGRAMMING AND OUTREACH P ROGRAMS FOR FAMILLES AND CHILDREN REA CORE

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orm	990	(2023)	)

 Form 990 (2023)
 DAUPHIN COUNTY LIBRARY SYSTEM

 Part IV
 Checklist of Required Schedules

14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14a       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts III and IV       16       X				Yes	No
2         b the organization engage in direct or index to partial on engage in lookying activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule 0, Part I         3         X           3         Did the organization engage in diversion in the organization engage in lookying activities, or have a section 501(h) election in elect during the say with "I "res," complete Schedule C, Part I         4         X           4         Better organization asset on the first-block (PL II)         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         5         <	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
<ul> <li>3 Did the organization engage in direct o multical campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II</li> <li>4 Xx</li> <li>5 Section 501(5) organizations. Did the organization engage in lobbying activities, or have a section 501(5) electron in effect during the tax year? If "Yes," complete Schedule C, Part II.</li> <li>6 Did the organization maxima and yound solves that the organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 501(7) "Yes," complete Schedule C, Part II.</li> <li>6 Did the organization maxima and yound solves that does any similar that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 501(7) "Yes," complete Schedule D, Part II.</li> <li>6 Did the organization maxima that officients any similar that the ceives and the organization related and a conservation assement, including easements to provide advice on the distribution or investment of amounts in such funds or accounts for Wink.</li> <li>7 Did the organization maxima the fact X, line 21, for escore or cultorial maxima assets? <i>J. Yes, "complete Schedule D, Part II.</i></li> <li>9 Did the organization report an amount for Maxima (Jet Maxima) (Jet Maxima)</li></ul>				Х	
public office?         If ''reg', complete Schedule C, Part I         If ''reg', complete Schedule C, Part I           5         Section 501(k) organization control (k) 501(k) 50	2		2		<u> </u>
<ul> <li>Section 501(c)(3) organizations. Did the organization argue in lobbying activities, or have a section 501(h) election in effect         during the tax year? // 'Yes,' complete Schedule C, Part II         during the tax year? // 'Yes,' complete Schedule C, Part II         during the tax year? // 'Yes,' complete Schedule C, Part II         during the tax year? // 'Yes,' complete Schedule C, Part II         during the tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II         de tax year? // 'Yes,' complete Schedule C, Part II</li></ul>	3				
during the tax year? (** Yes, * complete Schedule C, Part II         4         X           5         is the organization a section 50 (501(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 001(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 0000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5) 000(5)			3		<u> </u>
5         Is the organization a section 501(c)(4). 201 (c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98.197 (f 'Ves,' complete Schedule C, Part II         S         X           D D the organization maintan any door advestment of amounts in such funds or accounts? (f 'Ves,' complete Schedule D, Part I         6         X           D D the organization maintan any door advestment of amounts in such funds or accounts? (f 'Ves,' complete Schedule D, Part I         7         X           B D dth organization maintan any door advestment of anounts in such funds or accounts? (f 'Ves,' complete Schedule D, Part II         7         X           B D dth organization maintan any door advest of at, historical treasures, or other similar assuet? (f 'Ves,' complete Schedule D, Part II         8         X           D D dth organization maintan collections of works of at, historical treasures, or other similar assuet? (f 'Ves,' complete Schedule D, Part II         8         X           D D dth organization, directly retrough a nelated organization, hold asset monorestricted endowments or in quasi-endowments? (f 'Ves,' complete Schedule D, Part V         10         X           III the organization resport an amount for land, buildings, and equipment in Part X, line 10; if 'Ves,' complete Schedule D, Part V         11a         X           D dt the organization report an amount for intrestments - other securities in Part X, line 12; that is 5% or more of its total assets reported in Part X, line 16? if 'Ves,' complete Schedule D, Part W         11a         X <td>4</td> <td></td> <td></td> <td></td> <td>37</td>	4				37
similar amounts as defined in Rev. Proc. 98:197 µ*es,* complete Schedule C, Part II         5         X           0         Did the organization maintain any donor advised funds or any similar funds or accounts? IV, Yes,* complete Schedule D, Part II         6         X           7         Did the organization maintain collections of works of art, historical treasures, or other a simular state of the organization maintain collections of works of art, historical treasures, or other and the organization maintain collections of works of art, historical treasures, or other and the organization maintain collections of works of art, historical treasures, or other and the organization maintain collections of works of art, historical treasures, or other and the organization area provide credit collections, not associated to part IV         8         X           9         Did the organization, directly or through a neitated organization, hold ascels in donor-restriction denoments or in quasi-indownemis? IV *vs,* complete Schedule D, Part IV         8         X           10         Did the organization answer to any of the following questions is 'Yes,* then complete Schedule D, Part VI         10         X           11         If the organization report an amount for land, buildings, and equipment credit relative treasures or the stotal assets reported in Part X, line 197 // Yes,* complete Schedule D, Part VI         10         X           12         Did the organization report an amount for investments organ related in Part X, line 197 // Yes,* complete Schedule D, Part X         10         X           13         X         1	_		4		<u> </u>
6       Did the organization maintain any donor advised funds or any similar funds or accounts or which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? (II Yes, "complete Schedule D, Part II <ul> <li>B</li> <li>Did the organization neales on thold a conservation assemet, including assements the preserva bornes pase, the environment, historic land areas, or historic structures? (II Yes, "complete Schedule D, Part II</li> <li>B</li> <li>Did the organization maintain any donor advised funds or any similar funds or accounts (SII Yes, "complete Schedule D, Part II</li> <li>B</li> <li>C Y</li> <li>Schedule D, Part II</li> <li>Did the organization maintain any difference on the site of the second si</li></ul>	5				77
provide advice on the distribution or investment of amounts in such funds or accounts? (fr Yes, * complete Schedule D, Part I       6       X         7       Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic istructures? (fr Yes, * complete Schedule D, Part II.       7       X         8       Did the organization maintain collections of works of art, historical treasures, or öther similar assets? (fr Yes, * complete Schedule D, Part II.       8       X         9       Did the organization report an amount in Part X, line 21, for escrow or custodial account lightly: serve as a custodian for amounts not listed in Part X, line 21, for escrow or custodial account lightly: serve as a custodian for amounts not listed in Part X, line 21, for escrow or custodial account lightly: serve as a custodian for amounts not listed in Part X, line 21, for escrow or custodial account lightly: serve as a custodian for amounts not listed in Part X, line 21, for escrow or custodial account lightly: serve as a custodian for amounts not listed organization, directly or through a related organization, dold assets in doner-estroded endowments or in quasi-admovements (fr Yes, * complete Schedule D, Part VI.       10       X         10       Did the organization report an amount for investments - organ related in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 167. If Yes, * complete Schedule D, Part XII.       11       X         11       X       10       Did the organization report an amount for investments - organ related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 167. If Yes	•		5		
7       Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.       Y       X         8       Did the organization maintain collections of vorks of art, historical treasures, or other smin areases? If "Yes," complete Schedule D, Part III.       8       X         9       Did the organization neutrin Part X, line 21, for escrew or custodial account lability; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negatiation services?       9       X         10       Did the organization negotiation report an amount for land, buildings, and equipment in Part X, line 10°, III "Yes," complete Schedule D, Part V       10       X         11       The organization report an amount for investments - order schedule D, Part V       11a       X         12       Did the organization report an amount for investments - order schedule D, Part V       11a       X         13       Did the organization report an amount for investments - order schedule D, Part V       11a       X         14       V       11b       X       11b       X         14       Did the organization report an amount for investments - order metals in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 167       11a       X         11b       Did the organization schedule organization repo	6				v
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II     7     X       8     Did the organization maintain collections of works of art, historical treasures, or other similar assets? If Yas, "complete Schedule D, Part II     7     X       9     Did the organization report an amount in Part X, line 21, for escrew or custodial account liability; serve as a custodian for amounts on listed In Part X, or provide credit counseling, debt management, credit repir, or debt negotiation services?     9     X       10     Did the organization, directly or through a related organization, hold assets in donorrestricted endowments or in quasilendowments? If "Yes," complete Schedule D, Part V     10     X       11     Ithe organization report an amount for land, buildings, and equipment in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 167 if "Yes," complete Schedule D, Part VI     10     X       12     Did the organization report an amount for investments': program related in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 167 if "Yes," complete Schedule D, Part VI     11a     X       13     Did the organization report an amount for other liabilities in Part X, line 257 if "Yes," complete Schedule D, Part X     11e     X       14     X     Did the organization separate or consolidated financial statements for the tax year?     11e     X       14     X     Did the organization asserts?     Part VI     11e     X       15     Did the organi	-		6		
B       Did the organization maintain collections of works of art, historical treasures, or other similar assets? # Yrss, "complete Schedule D, Part III       IIII         B       Did the organization report an amount in Part X, line 21, for escrew or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt neoptation services?       9         IV       Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If 'Yes," complete Schedule D, Part V       9       X         III the organization is answer to any of the following quastions is "Yes," then complete Schedule D, Part V, vis, 's complete Schedule D, Part V, as applicable.       10       X         III the organization report an amount for lined, buildings, and equipment in Part X, line 12/ If 'Yes,' complete Schedule D, Part VI       11       X         III the organization report an amount for investments - program related in Part X, line 12/ If 'Yes,' complete Schedule D, Part VI       11       X         III the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16/ If 'Yes,' complete Schedule D, Part XI       11       X         ID bid the organization inclus in 16/ If 'Yes, 'complete Schedule D, Part XI       11       X         ID bid to organization inclus in the 16/ If 'Yes, 'complete Schedule D, Part XI       11       X         ID bid the organization inclus in the 20/ If 'Yes	1		<b>_</b>		v
Schedule D, Part III       8       X         9       Did the organization report an amount in Part X, line 21, for escrow or cuetodial account ligbility, serve as a cuitodian for amounts not listed in Part X, or provide credit counseling, debt management, credit replint, or debt mapotitation, services?       8       X         9       Did the organization, directly or through a related organization, hold sasets in donor-restricted endowments or in quasi-endowments? If 'Yes,' complete Schedule D, Part V       10       X         11       If the organization is answer to any of the following questions is 'Yes,' then complete Schedule D. Part V, VII, VII, VX, or X, as applicable.       10       X       10       X         0       Did the organization report an amount for land, buildings, and equipment In Part X, line 10? If 'Yes,' complete Schedule D, Part VI       11       X       11       X         0       Did the organization report an amount for livestments- other securities in Part X, line 13, link is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII       11       X         11       Did the organization report an amount for livestments- program related in Part X, line 13, If 'Yes,' complete Schedule D, Part X       11       X         11       Did the organization included in consolidated financial statements for the tax year? If 'Yes,' complete Schedule D, Part X       11       X         12       Did the organization included in accestin 1700/I/I/A/0? If 'Yes,' complete Schedule	•		<b>_</b> _		
9       Did the organization report an amount in Part X, ine 21, for escrow or custodial account liability; serve as a custodial for amounts not listed in Part X, or provide credit counseling, debt management, credit refuir, or debt negatization services?       9       X         10       Ubit the organization, directly or through a related organization, hold assets in donon-restricted endowments       10       X         11       If the organization, directly or through a related organization, hold assets in donon-restricted endowments       10       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V       10       X         11       Did the organization report an amount for investments' - other socurities in Part X, line 12, Irba is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI       11a       X         11       Did the organization report an amount for investments' program related D Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI       11a       X         11       Did the organization report an amount for other assets in Part X, line 2? If "Yes," complete Schedule D, Part X       11a       X         11       Did the organization solution solution solution waves Pink 48 (SC 704)? If "Yes," complete Schedule D, Part X       11d       X         11       Did the organization solution solution solution solution Hark A (SC 704)? If "Yes,"	8				v
amounts not listed in Part X, or provide credit counseling, debt management, credit regain, or debt negotiation services?       9       X         10 Did the organization, directly or through a related organization, hold assets in concrestricted endowments       9       X         11 If the organization directly or through a related organization, hold assets in concrestricted endowments       10       X         as applicable.       10       X       10       X         a Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VI       11       X         b Did the organization oreport an amount for investments - other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VI       11       X         c Did the organization report an amount for investments - other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VI       11       X         d Did the organization report an amount for their liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X       11       X         12       Did the organization report an amount for their liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X       114       X         12       Did the organization instructed financial statements for the tax yearinclude astoton that addressess the organization instru	0		<b>^</b>		
If "Yes," complete Schedule D, Part IV       9       X         10       Did the organization, directly or through a related organization, hold assets in donor-esticled endowments       10       X         11       If the organization's answer to any of the following questions is "Ves," then complete Schedule D, Part V       10       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V       11a       X         12       Did the organization report an amount for investments: or operam related in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part V       11b       X         13       Did the organization report an amount for their labilities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI       11c       X         14       Did the organization report an amount for other labilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11c       X         15       Did the organization report an amount for other labilities in Part X, line 15? If "Yes," complete Schedule D, Part X       11d       X         16       Did the organization report an amount for other labilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         17       Did the organization report an amount for other labilitis in Part X, line 15? If "Yes," complete Schedule D,	9				
10       Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? // 'Yes, ' complete Schedule D, Part V       10       X         11       If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, VII, VII, VII, VII, VII			6		x
or in quasi-endowments? If "Yes," complete Schedule D, Part V     10     X       11     If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, VII, VI, VII, VII, VII,	10		9		- 21
11       If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, VX, or X, as applicable.       11       In the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>II</i> "Yes," complete Schedule D, Part VI       11a       X         Did the organization report an amount for investments other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>I</i> "Yes," complete Schedule D, Part VII       11a       X         C       Did the organization report an amount for investments program related in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>I</i> "Yes," complete Schedule D, Part VIII       11d       X         Did the organization report an amount for other labilities in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>I</i> "Yes," complete Schedule D, Part VIII       11d       X         Did the organization report an amount for other labilities in Part X, line 25? <i>II</i> "Yes," complete Schedule D, Part X       11d       X         Did the organization separate or consolidated financial statements for the tax year include a foothore that addresses the organization asteparate, independent audited financial statements for the tax year?       11f       X         12b       Was the organization asteparate, independent audited financial statements for the tax year?       11f       X         12a       X       Was the organization asteparate, independent audited financial statements for the tax year?       11f	10		10	x	
a applicable.       a) Did the organization report an amount for land, buildings, and equipment in Part X, line 10? // "Yes," complete Schedule D, Part VI       11a       X         b) Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? // "Yes," complete Schedule D, Part VII       11b       X         c) Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? // "Yes," complete Schedule D, Part VII       11b       X         d) Did the organization report an amount for other assets in Part X, line 15? // "Yes," complete Schedule D, Part VII       11d       X         d) Did the organization report an amount for other liabilities in Part X, line 15? // "Yes," complete Schedule D, Part X       11e       X         f) Did the organization separate or consolidated financial statements for the tax year include a footnote that addresses the organization simulating to undertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       11t       X         12a       X       11d       X       11d       X         13       X the organization ashond answered "No You line 72a, then completing Schedule D, Part X and XII is optional       13       X         14a       X       11d       X       11d       X         14a       Did the organization ashond face, moloyees, or agents outside of the United Sta	11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D. Parts VI. VII. VII. IX or X			
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? // *Yes," complete Schedule D, Part VI       11a       X         b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? // *Yes," complete Schedule D, Part VI       11b       X         c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? // *Yes," complete Schedule D, Part VI       11c       X         d Did the organization report an amount for other assets in Part X. line 15, that is 5% or more of its total assets reported in Part X, line 16? // *Yes," complete Schedule D, Part VI       11c       X         d Did the organization report an amount for other assets in Part X. line 25? // *Yes," complete Schedule D, Part X       11d       X         f Did the organization report an amount for other assets in Part X. line 25? // *Yes," complete Schedule D, Part X       11d       X         12a       Did the organization source an amount for other inabilities in Part X. line 25? // *Yes," complete Schedule D, Part X       11t       X         12a       Did the organization source an amount for other inabilities in Part X. line 25? // *Yes," complete Schedule D, Part X       11t       X         12a       Did the organization as school doscribed in ancial statements for the tax year?       11t       X         12a       Did the organization aschool doscribed in	••				
Part VI       11a       X         b       Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11b       X         c       Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11c       X         d       Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11c       X         e       Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         e       Did the organization's separate or consolidated financial statements for the tax year include a toothone that addresses the organization ofbatian separate, independent audited financial statements for the tax year?       11f       X         12a       Did the organization ask Did Used In osciolidated, independent audited financial statements for the tax year?       11f       X         13       Is the organization a school described in section 170(D)(1)(A)(III)?       17 Yes," complete Schedule D, Part X       12a       X         14a       X       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for origin individuals? If "Yes," complete Schedule F, Part II and IV       14a <td< td=""><td>а</td><td></td><td></td><td></td><td></td></td<>	а				
b       Did the organization report an amount for investments, other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11b       X         c       Did the organization report an amount for investments - brogram related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D Part VII       11c       X         d       Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D Part VII       11c       X         d       Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11e       X         f       Did the organization is lability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       11e       X         f       Did the organization is lability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       11f       X         f       Was the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule D, Part X and XII is optional       11s       X         f       If the organization nearbit as differ organization report on Part X, column (A), line 3, more than \$5,000 of grants or other assistance to or or more? If "Yes," complete Schedule F, Parts II and IV       12b       X         f       Did the organization report on Part X,	u		11a	х	
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or for foreign individuals? // "Yes," complete Schedule F, Parts III and IV       16       X         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? // "Yes," complete Schedule G, Part I. See instructions       17       X         18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 c and 8a? // "Yes," complete Schedule G, Part II       18       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? // "Yes,"       19       X         20a       Did the organization operate one or more hospital facilities? // "Yes," complete Schedule H       20a       X         20a       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or       21       X			15		<u> </u>
<ul> <li>17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions</li> <li>18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 c and 8a? <i>If "Yes," complete Schedule G, Part II</i></li> <li>19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i></li> <li>20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i></li> <li>b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?</li> <li>20b 21</li> <li>21 X</li> </ul>	16				
column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions       17       X         18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines       18       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       18       X         19       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       19       X         20a       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II       20a       X			16		<u> </u>
18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines       18       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"       18       X         19       Did the organization operate one or more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"       19       X         20a       Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> 20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or       21       X	17			v	
1c and 8a? If "Yes," complete Schedule G, Part II       18       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       19       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       X	46		17	Ă	
19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"       19       X         20a       Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> 20a       X         20a       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b         21       Did the organization operate on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i> 21	18				v
complete Schedule G, Part III       19       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II       21       X	40	1c and 8a? If "Yes," complete Schedule G, Part II	18		
20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II       21       X	19				v
b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II       21       X	<b>00</b> -				
21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II       21       X					
domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			200		<u> </u>
	<u>~</u>		21		x
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Form	990	(2023)
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	· (contractory		X	
~~			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			x
~~	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		
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	00	х	
04-	Schedule J	23	<u> </u>	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	04-		x
<b>L</b>	Schedule K. If "No," go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
-1	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-		x
<b>b</b>	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
D	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	054		x
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			x
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	07		x
00	entity (including an employee thereof) or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>	00-		x
L	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	00-		x
00	"Yes," complete Schedule L, Part IV	28c 29	Х	
29 20	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Λ	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			x
04	contributions? If "Yes," complete Schedule M	<u>30</u> 31		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			x
00	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	00		x
~	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			v
9E -	Part V, line 1	34		X X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	25h		
26	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	26		x
27	If "Yes," complete Schedule R, Part V, line 2	36		- 23
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	27		x
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	38	х	
Par	Note: All Form 990 filers are required to complete Schedule O           t V         Statements Regarding Other IRS Filings and Tax Compliance	30	27	I
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1.	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		162	
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable1a49Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable1b0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
C	(gambling) winnings to prize winners?	1c	х	
330004				l (2023)
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Form	990 (2023) DAUPHIN COUNTY LIBRARY SYSTEM		23-1352	317	P	age <b>5</b>
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)					
					Yes	No
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	160			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ıs?	•	2b	Х	
				3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a					
	financial account in a foreign country (such as a bank account, securities account, or other financial a		-	4a		x
b	If "Yes," enter the name of the foreign country		,			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	coun	ts (FBAR).			
5a				5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transac			5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the					
ou				6a		x
h	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contribution			- Ou		
				6b		
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).			0.0		
'a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices r	provided to the payor?	7a	Х	
				7b	X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it wa		uirod	70	- 11	<u> </u>
C		sieq	uireu	7c		x
h		7d		70		
	If "Yes," indicate the number of Forms 8282 filed during the year		+2	7e		x
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		t?	7e 7f		X
t	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		00			
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g 7b		<u> </u>
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained			8		
9	sponsoring organization have excess business holdings at any time during the year?			0		
a				9a		
b				9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:			55		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
	Gross income from members or shareholders	11a				
	Gross income from other sources. (Do not net amounts due or paid to other sources against	114				
D.		11b				
123	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		2	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120	I			
	Is the organization licensed to issue qualified health plans in more than one state?			13a		
a	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			154		
h	Enter the amount of reserves the organization is required to maintain by the states in which the					
D.	organization is licensed to issue qualified health plans	13b				
~	Enter the amount of reserves on hand	13c				
14a			•	14a	-	X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul			14a		<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner					<u> </u>
15	excess parachute payment(s) during the year?			15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.			15		
16		inco	me?	16		x
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	ncor	ne?	10		
47	If "Yes," complete Form 4720, Schedule O.	his (14:00)				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activative result in the imposition of an avoing tax under section 4051, 4052 or 40522			47		1
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
200005	If "Yes," complete Form 6069.			Form	990	(2023)
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#### 14001114 350690 20453.000

Form 990 (2023)
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23-1352317 Page 6

X

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 on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI	
Section A. Governing Body and Management	

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	a 16			
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.				
b	Enter the number of voting members included on line 1a, above, who are independent	ь 16			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	th any other			
	officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under the di	rect supervision			
	of officers, directors, trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990	was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets	?	5		X
6	Did the organization have members or stockholders?		6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	nt one or			
	more members of the governing body?		7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stock	holders, or			
	persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by	the following:			
а	The governing body?		8a	Х	
b	Each committee with authority to act on behalf of the governing body?		8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reache	d at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O		9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Code.)			
				Yes	No
	Did the organization have local chapters, branches, or affiliates?		10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapt	ers, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body be	fore filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to o		12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,	" describe			
	on Schedule O how this was done		12c	X	
13	Did the organization have a written whistleblower policy?		13	X	
14	Did the organization have a written document retention and destruction policy?		14	Х	
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?			77	
a	The organization's CEO, Executive Director, or top management official		15a	X	
b	Other officers or key employees of the organization		15b	Х	
40	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	L			
168	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		40-		v
г.	taxable entity during the year?		<u>16a</u>		X
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate it				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of the steps to safeguard the steps to safeguard the organization of the steps to safeguard the steps to safeguard the organization of the steps to safeguard the organization of the steps to safeguard the steps to safeg		104		
مم	exempt status with respect to such arrangements?		16b		
17 10		000  T (continue E01(a)(2)		ovoilok	
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 9 for public inspection. Indicate how you made these subjictly a charge all that each y	90-1 (Section 501(C)(3)	s only)	avallat	bie
	for public inspection. Indicate how you made these available. Check all that apply.           X         Own website         Another's website         Upon request         Other (explain on the context)	Oshadula Oʻ			
10		,	d finan		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, confli- statements available to the public during the tax year.	st of interest policy, an	uman	Jiai	
20	State the name, address, and telephone number of the person who possesses the organization's books	and records			
20	STEPHANIE KAZANJIAN, FINANCE DIRECTOR - 717-234-4961				
	101 WALNUT STREET, HARRISBURG, PA 17101				
332004	10-21-23		Form	990	(2023)
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	-				

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

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

(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average	(do	not c	Posi			nne	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	son i	s both	n an	compensation	compensation	amount of
	week			uau	recto	i/irus		from	from related	other
	(list any hours for	irecto						the	organizations (W-2/1099-MISC/	compensation from the
	related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	organization
	organizations	ruste	al trus		yee	mpen		1099-NEC)	1000 NEO	and related
	below	Individual trustee or director	In stitutional trustee	a	mplo	est co oyee	ы			organizations
	line)	Indivi	In stit	Officer	Key e	Highest compensated employee	Former			C C
(1) AARON GRUMBLING	37.50									
FINANCE DIRECTOR		Х						123,808.	0.	0.
(2) KAREN CULLINGS	37.50									
EXECUTIVE DIRECTOR							Х	118,567.	0.	0.
(3) DUSTIN BRINTON-WILSON	37.50			-						
INTERIM EXECUTIVE DIRECTOR		Х						16,955.	0.	0.
(4) YVETTE DAVIS	5.00									
PRESIDENT		X		Х				0.	0.	0.
(5) FRANCIS CHARDO	5.00									
VICE PRESIDENT		Х		Х				0.	0.	0.
(6) SALVATORE V FAZZOLARI	5.00									
SECRETARY		Х	$\sim$	Х				0.	0.	0.
(7) JACQUELYN ANDERSON	5.00									
TREASURER		Х		Х				0.	0.	0.
(8) TAKIA COLSTON-KRÓW	2.00									
TRUSTEE OF THE BOARD		Х						0.	0.	0.
(9) CONNIE DOEBELE	2.00									
TRUSTEE OF THE BOARD		Х						0.	0.	0.
(10) RUBY DOUB	2.00									
TRUSTEE OF THE BOARD		Х						0.	0.	0.
(11) ANNIE GARNER	2.00									_
IMMEDIATE PAST PRESIDENT		Х						0.	0.	0.
(12) JOHN HARGREAVES	2.00									_
TRUSTEE OF THE BOARD		Х						0.	0.	0.
(13) CHRISTOPHER WONDERS	2.00								•	•
TRUSTEE OF THE BOARD		Х						0.	0.	0.
(14) ROBERT LAWSON	2.00								•	•
TRUSTEE OF THE BOARD		Х						0.	0.	0.
(15) KELLY BRENNAN	2.00								•	•
TRUSTEE OF THE BOARD		Х						0.	0.	0.
(16) KENNETH R MENGEL	2.00									-
TRUSTEE OF THE BOARD		Х						0.	0.	0.
(17) GLORIA MARTIN-ROBERTS	2.00								<u> </u>	•
TRUSTEE OF THE BOARD		Х						0.	0.	0.
332007 12-21-23										Form <b>990</b> (2023)

14001114 350690 20453.000

Form 990 (2023) DAUPHIN (									23-13	523	817	Page <b>8</b>
Part VII Section A. Officers, Directors, Trus		ploy	ees,			ghes	t C	ompensated Employee	s (continued)			
(A)	(B)				<b>C)</b> itior			(D)	(E)		(F)	
Name and title	Average		not ch	neck	more	than o		Reportable	Reportable		Estima	
	hours per week					s both pr/trus		compensation	compensation		amour	
	(list any	tor						- from the	from related organizations		othe compen:	
	hours for	direct				e.		organization	(W-2/1099-MIS		from	
	related	ee or	Istee			insate		(W-2/1099-MISC/	1099-NEC)		organiz	ation
	organizations	l trus	nal tri		oyee	ompe		1099-NEC)			and rel	ated
	below	Individual trustee or director	Institutional trustee	Officer	ƙey employee	Highest compensated employee	Former				organiza	tions
	line)	Indi	Inst	Offi	Key	Emi	For					
(18) MARK HUNTER SMITH	2.00	37										^
TRUSTEE OF THE BOARD	2 00	Х						0.		0.		0.
(19) STANLEY SMITH TRUSTEE OF THE BOARD	2.00	х						0.		0.		0.
INUSTEE OF THE BOARD		~						0.		<u>.</u>		
										-+		
										$ \rightarrow $		
1b Subtotal								259,330.		0.		0.
c Total from continuation sheets to Part VI	l, Section A							0.		0.		0.
d Total (add lines 1b and 1c)								259,330.		0.		0.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove	) wh	o re	eceived more than \$100,	000 of reportable			•
compensation from the organization											Ve	2 s No
• Did the encodination list and former office	alianatan tanat						la : a			Г	Ye	
<b>3</b> Did the organization list any <b>former</b> officer,										- 1	3 X	
line 1a? If "Yes," complete Schedule J for s										····  -	3 X	+
4 For any individual listed on line 1a, is the su												X
and related organizations greater than \$150 5 Did any person listed on line 1a receive or a										····  -	4	
rendered to the organization? If "Yes," com										- 1	5	x
Section B. Independent Contractors	piele Schedule	2010	JI SU		Jers	011 .				····		
1 Complete this table for your five highest co	mpensated ind	lepe	nder	nt co	ontra	actor	's th	nat received more than \$	100,000 of comp	ensati	on from	
the organization. Report compensation for	-											
(A)								(B)			(C)	
Name and business	address							Description of s	services	Co	ompensat	on
AINSWORTH INC.												
203 LYNNDALE ROAD, MECHAN							_	HVAC MAINTEN	ANCE		178,	)24.
JEM GROUP, LLC, 214 SENAT	'E AVENU	E,	S	υĽ	ΤE			CONSTRUCTION			1 - 0	410
302, CAMP HILL, PA 17011		<u> </u>		1 1	4		_	MANAGEMENT			159,	<u>113.</u>
CARTER'S PRO QUALITY CLEA	-		-					OT EXNENC			122	120
ALLEN STREET, MECHANICSBU CALDWELL, HECKLES AND EAG			05	5-	55	03	-	CLEANING			133,	130.
1270 GROFFTOWN ROAD, LANC	-		1'	76	02			CONSTRUCTION			101,	777
12,0 GROTTIONIC ROAD, DANC		- 1	-	, 0	5 4			20110 11(0C1 10H			<u> </u>	•
2 Total number of independent contractors (in	ncluding but no	ot lin	nited	l to	thos	se lis	ted	above) who received me	ore than			
\$100,000 of compensation from the organiz	zation				4	1						

332008 12-21-23

Form 990 (2023)

Pa	rt VII	Statement of Revenue					
		Check if Schedule O contains a response or	note to any line		(D)	(0)	
				<b>(A)</b> Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	<b>(D)</b> Revenue excluded from tax under
							sections 512 - 514
nts Its	1 a	Federated campaigns 1a					
àrar oun	b	Membership dues 1b					
Contributions, Gifts, Grants and Other Similar Amounts	С	• • • • • • • • • • • • • • • • • • • •					
ar /	d	Related organizations 1d					
s, C	е	Government grants (contributions) 1e 7,1	19,185.				
r Si	f	All other contributions, gifts, grants, and	I				
but			20,361.				
d O	g	Noncash contributions included in lines 1a-1f	20,056.				
Co an	h	Total. Add lines 1a 1f		7,939,546.			
			Business Code				
ė	2 a	LIBRARY SERVICES	900099	114,195.	114,195.		
Program Service Revenue	b						
Se	с						
am eve	d						
ogr	е						
Pre	f	All other program service revenue					
	g			114,195.			
	3	Investment income (including dividends, interest					
		other similar amounts)		544,341.			544,341.
	4	Income from investment of tax-exempt bond pro-	ceeds				
	5	Royalties					
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a 9,000.					
	b	Less: rental expenses 6b 0 .					
	с	Rental income or (loss) 6c 9,000.					
	d	Net rental income or (loss)		9,000.			9,000.
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory <b>7a 21</b> , <b>511</b> .					
	b	Less: cost or other basis					
ne		and sales expenses 7b 81,754.					
Revenue	с	Gain or (loss)					
Rev	d	Net gain or (loss)		-60,243.			-60,243.
ler	8 a	Gross income from fundraising events (not					
Oth		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18					
	b	Less: direct expenses					
	с	Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See	I				
		Part IV, line 19 9a					
	b	Less: direct expenses 9b					
	с	Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns	Τ				
		and allowances 10a					
	b	Less: cost of goods sold 10b					
	с	Net income or (loss) from sales of inventory					
			Business Code				
sno	11 a						
ane	b						
scellaneo Revenue	с						
Miscellaneous Revenue	d	All other revenue					
2		Total. Add lines 11a-11d					
	12	Total revenue. See instructions		8,546,839.	114,195.	0.	
33200	9 12-21						Form <b>990</b> (2023)

332009 12-21-23

Form 990 (2023)

10

Page **9** 

23-1352317

DAUPHIN COUNTY LIBRARY SYSTEM Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons			<u> </u>	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,			222 002	
_	trustees, and key employees	259,330.		223,802.	35,528
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	2 250 016	2 422 026	622 071	102 100
7	Other salaries and wages	3,259,016.	2,432,936.	633,971.	192,109
8	Pension plan accruals and contributions (include	136 171	94,602.	32 004	0 705
~	section 401(k) and 403(b) employer contributions)	<u>136,471.</u> 420,886.	290,810.	32,084. 103,800.	<u>9,785</u> 26,276
9	Other employee benefits	259,556.	179,483.	63,280.	16,793
0 1	Payroll taxes	433,550.	1/9,403.	03,200.	10,195
1	Fees for services (nonemployees):	55,848.	22,562.	26,595.	6 691
a h	ΥΓ	9,737.	3,934.	4,637.	<u>6,691</u> 1,166
b	F	59,066.	23,863.	28,127.	7,076
	Accounting	33,000.	23,003.	20,127.	7,070
	Lobbying Professional fundraising services. See Part IV, line 17	36,700.			36,700
f	Investment management fees	55,092.	27,938.	23,266.	3,888
g			2775501		5,000
Э	column (A), amount, list line 11g expenses on Sch 0.)				
2	Advertising and promotion	54,581.	28,535.		26,046
3	Office expenses	81,717.	49,379.	16,679.	15,659
4	Information technology				
5	Royalties				
6	Occupancy	1,073,527.	922,913.	150,614.	
7	Travel	93,659.	76,800.	16,859.	
8	Payments of travel or entertainment expenses			. ,	
-	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings				
0	Interest	128,765.		128,765.	
1	Payments to affiliates	-		-	
2	Depreciation, depletion, and amortization	1,684,090.	1,625,736.	58,354.	
3	Insurance	71,411.	54,344.	16,696.	371
4	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	LICENSING AND EQUIPMENT	358,056.	335,928.	22,128.	
b	PROGRAM EXPENSES	337,483.	337,483.	,	
c	E-RESOURCES, NEWSPAPERS	112,852.	112,852.		
d	PROFESSIONAL MEMBERSHIP	38,533.	27,628.	10,905.	
	All other expenses		,	,	
5	Total functional expenses. Add lines 1 through 24e	8,586,376.	6,647,726.	1,560,562.	378,088
6	Joint costs. Complete this line only if the organization				•
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here following SOP 98-2 (ASC 958-720)				

11

332010 12-21-23

#### 14001114 350690 20453.000

Form 990 (2023)

14001114 350690 20453.000

24,754,594.

28,450,863.

31

32

33

DAUPHIN COUNTY LIBRARY SYSTEM	DAUPHIN	COUNTY	LIBRARY	SYSTEM
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Check if Schedule O contains a response or note to any line in this Part X

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

(A) (B) Beginning of year End of year 1,942. 10,100. 1 1 Cash - non-interest-bearing 3,389,759. 3,418,029. 2 2 Savings and temporary cash investments 1,321,275. 1,061,419. Pledges and grants receivable, net 3 3 155,440. 629,266. 4 4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disgualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 Notes and loans receivable, net 7 7 8 Inventories for sale or use 8 267,948. 217,979. 9 Prepaid expenses and deferred charges 9 **10a** Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D _____ 10a 33,140,232. b Less: accumulated depreciation 10b 15,048,039. 18,493,378. 18,092,193. 10c Investments - publicly traded securities 11 11 12 Investments - other securities. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 13 14 14 Intangible assets 4,862,932. 5,854,203. 15 15 Other assets. See Part IV, line 11 29,325,000. 28,450,863. 16 16 Total assets. Add lines 1 through 15 (must equal line 33) 2,137,062. 1,991,964. Accounts payable and accrued expenses 17 17 18 18 Grants payable 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 ..... 1,559,207. 1,559,207. 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 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 ..... 3,696,269. 3,551,171. 26 26 Total liabilities. Add lines 17 through 25 X Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. 19,000,502. 19,639,478. Net assets without donor restrictions 27 27 Net assets with donor restrictions 5,754,092. 6,134,351. 28 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 30

23-1352317 Page **11** 

29,325,000. Form **990** (2023)

25,773,829.

Assets

Liabilities

Net Assets or Fund Balances

31

32

33

Form	DAUPHIN COUNTY LIBRARY SYSTEM	23-	13523	17	Pag	_{ge} 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		546		
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,	586		
3	Revenue less expenses. Subtract line 2 from line 1	3				<u>37.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	24,	754	, 5	94.
5	Net unrealized gains (losses) on investments	5				18.
6	Donated services and use of facilities	6		79	,1	05.
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9		206	,9	49.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	25,	773	, 81	<u>29.</u>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
			_		Yes	No
1	Accounting method used to prepare the Form 990: X Cash Cash Corual Other		- 1			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	0.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the					
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	<u> </u>
_	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O	·			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					v
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require			~		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		(2023)
			I	-orm <b>R</b>	990 (	(2023)

Department of the Treasury Internal Revenue Service

(Form 990)

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2023
Open to Public Inspection

## Name of the organization

Nam	e of t	he organization							identification number			
_				LIBRARY SYS					3-1352317			
Par	τı	Reason for Public C	Charity Status.	(All organizations must c	complete th	nis part.) S	ee instruction	S.				
The c	organ	ization is not a private found	ation because it is: (F	For lines 1 through 12, c	heck only	one box.)						
1		A church, convention of chu	urches, or associatio	n of churches described	l in <b>sectio</b>	n 170(b)(1	l)(A)(i).					
2		A school described in secti	ion 170(b)(1)(A)(ii). (	Attach Schedule E (Forn	n 990).)							
3		A hospital or a cooperative	hospital service orga	anization described in s	ection 170	(b)(1)(A)(ii	i).					
4		A medical research organization	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)	(iii). Enter	the hospital's name,			
		city, and state:										
5		An organization operated for		lege or university owned	l or operat	ed by a go	vernmental ur	nit describe	ed in			
- 1		section 170(b)(1)(A)(iv). (C										
6	37	A federal, state, or local gov	-									
7	X	An organization that normal section 170(b)(1)(A)(vi). (Co		ntial part of its support f	rom a gove	ernmental	unit or from th	e general p	oublic described in			
8		A community trust describe		(1)(A)(vi), (Complete Par	ы							
9		•				ed in coniu	inction with a	land-arant	college			
•		An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or										
		university:	frank bonogo er agno				, und oluce of	and denege				
10		An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from										
	activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment											
		income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975.										
		See section 509(a)(2). (Cor	mplete Part III.)									
11		An organization organized a	and operated exclusi	vely to test for public sa	fety. See	section 50	)9(a)(4).					
12		An organization organized a	and operated exclusi	vely for the benefit of, to	perform t	ne function	ns of, or to ca	ry out the	purposes of one or			
		more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section	509(a)(2).	See section 5	509(a)(3). (	Check the box on			
		lines 12a through 12d that	describes the type of	f supporting organization	n and com	plete lines	12e, 12f, and	12g.				
а		<b>Type I.</b> A supporting orga	anization operated, si	upervised, or controlled	by its supp	orted org	anization(s), ty	pically by	giving			
		the supported organizatio	on(s) the power to req	gularly appoint or elect a	majority o	of the direc	tors or trustee	es of the su	ipporting			
		organization. You must c										
b		<b>Type II.</b> A supporting orga			tion with its	s supporte	d organization	n(s), by hav	vina			
		control or management of					-		-			
		organization(s). You mus						,				
с		Type III functionally inte			in connect	ion with. a	and functional	v integrate	d with.			
-		its supported organization						,	,			
d		Type III non-functionally						ted organiz	ration(s)			
-		that is not functionally int										
		requirement (see instructi	-		-		-	anatonin				
•		Check this box if the orga										
U	L	functionally integrated, or					турст, турст	i, iype iii				
f	Ente	er the number of supported of		any integrated support	ng organiz	ation.						
		vide the following information	•	d organization(s)								
		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	inization listed	(v) Amount of	monetary	(vi) Amount of other			
		organization		(described on lines 1-10 above (see instructions))	in your governi Yes	ng document?	support (see in	structions)	support (see instructions)			
				above (see instructions))	103							
Toto	1											
Total							1		1			

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

fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	<b>(c)</b> 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	2382769.	2275630.	3387037.	5149839.	2752522.	15947797.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf	4700956.	4700870.	4846610.	5212938.	5266129.	24727503.
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	0.	0.	0.	0.	0.	
4	Total. Add lines 1 through 3	7083725.	6976500.	8233647.	10362777.	8018651.	40675300.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly					)	
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						40655000
	Public support. Subtract line 5 from line 4.						40675300.
	ction B. Total Support						(m = 1.1
	ndar year (or fiscal year beginning in)	(a) 2019 7083725.	(b) 2020 6976500.	(c) 2021	(d) 2022 10362777.	(e) 2023	(f) Total 40675300.
	Amounts from line 4	1003125.	0970500.	0233047.	10302///.	0010051.	400/5500.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	96,168.	65,852.	48,798.	63,216.	106,496.	380,530.
~	and income from similar sources	90,100.	05,052.	40,190.	05,210.	100,490.	300,550.
9	Net income from unrelated business			*			
	activities, whether or not the	0.	0.	0.	0.	0.	
10	business is regularly carried on	0.	0.	0.	0.	0.	
10	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)						
44	Total support. Add lines 7 through 10						41055830.
12	Gross receipts from related activities,	etc. (see instructio	(and			12	11000000
	First 5 years. If the Form 990 is for th			ourth or fifth tax y	vear as a section 5		
	organization, check this box and stor						
Sec	ction C. Computation of Publi	c Support Per	centage				
	Public support percentage for 2023 (I			olumn (f))		14	99.07 %
15						15	99.14 %
<b>16</b> a	33 1/3% support test - 2023. If the c					ore, check this bo	x and
	stop here. The organization qualifies						V
b	33 1/3% support test - 2022. If the c	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ition			
17a	10% -facts-and-circumstances test	- 2023. If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	nd line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop he	<b>re.</b> Explain in Part	VI how the organiz	zation
	meets the facts-and-circumstances te	-		• • •			
b	10% -facts-and-circumstances test						10% or
	more, and if the organization meets th						
	organization meets the facts-and-circu				• •		
18	Private foundation. If the organizatio	n did not check a l	box on line 13, 16a	a, 16b, 17a, or 17b	o, check this box a		
						Schedule A	(Form 990) 2023

			or Organizatio	ons Descri	bed in Section	on 509(a)(2)
Schedule A	(Form 990)	) 2023	DAUPHIN	COUNTY	LIBRARY	SYSTEM

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
<ul> <li>5 The value of services or facilities furnished by a governmental unit to the organization without charge</li> </ul>						
6 Total. Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year			, ()			
<b>c</b> Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<ul> <li>9 Amounts from line 6</li> <li>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</li> </ul>		6				
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<ul> <li>c Add lines 10a and 10b</li> <li>11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on</li> </ul>						
<ul> <li>12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)</li> <li>13 Total support. (Add lines 9, 10c, 11, and 12.)</li> </ul>						
14 First 5 years. If the Form 990 is for th	ne organization's fir	rst. second. third	ourth, or fifth tax v	vear as a section 5	01(c)(3) organiza	tion.
check this box and <b>stop here</b>	-					,
Section C. Computation of Publ						
15 Public support percentage for 2023 (			olumn (f))		15	%
16 Public support percentage from 2022	2 Schedule A, Part	III, line 15			16	%
Section D. Computation of Inves						
17 Investment income percentage for 20		nn (f), divided by li	ne 13, column (f))		17	%
<b>18</b> Investment income percentage from					18	%
19a 33 1/3% support tests - 2023. If the	organization did n	ot check the box o	on line 14, and line	15 is more than 3	3 1/3%, and line	17 is not
more than 33 1/3%, check this box a						
b 33 1/3% support tests - 2022. If the	organization did n	ot check a box on	line 14 or line 19a	, and line 16 is mo	re than 33 1/3%,	, and
line 18 is not more than 33 1/3%, che	eck this box and <b>st</b>	<b>op here.</b> The orga	nization qualifies a	s a publicly suppo	rted organizatior	ι
20 Private foundation. If the organization						
332023 12-21-23						A (Form 990) 2023
		16				-

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1

Yes No

#### Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

## Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If* "Yes," *describe in* **Part VI** *when and how the organization made the determination.*
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If* "Yes," *provide detail in* **Part VI.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.*
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

17

332024 12-21-23

2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b

Schedule A (Form 990) 2023

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#### Schedule A (Form 990) 2023 DAUPHIN COUNTY LIBRARY SYSTEM

Ра	Supporting Organizations (continued)		
		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and		
	11c below, the governing body of a supported organization? 11a		
b	A family member of a person described on line 11a above? 11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide		
	detail in Part VI. 11c		
Sec	tion B. Type I Supporting Organizations		
		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in</i> <b>Part VI</b> <i>how the supported organization(s)</i> effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in</i> <b>Part VI</b> how argonization of the power to apply the support of the power to apply the power to apply the tax year.		
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		
Sec	supervised, or controlled the supporting organization. 2 tion C. Type II Supporting Organizations		
		Yes	No
4	Ware a majority of the arganization's directors or trustees during the tay year also a majority of the directors	res	INO
	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		

or management of the supporting organization was	vestea in the	same p	persons	that con	itrollea ol	r managea
the summer test and summer institute (s)						

#### the supported organization(s). Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

#### Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to th	ne method	d that the organ	ization us	ed to satisfy	the Integral Part	Test during the	vear (see instructions).
-			i linal line organ	ization us				

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

С		The organization supported a governmental entity.	Describe in Part VI how	you supported a governmental er	tity (see instruction <u>s).</u>
---	--	---------------------------------------------------	-------------------------	---------------------------------	----------------------------------

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "No" provide details in **Part VI.** 

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.* 332025 12-21-23

3b | | Schedule A (Form 990) 2023

2a

2b

3a

Yes No

14001114 350690 20453.000

18

1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust o	n Nov. 20, 1970 ( <i>explain in</i> <b>P</b>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must c	omplet	te Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount	•		Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
_	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally	integra	ated Type III supporting organ	nization (see

ated Type III supporting organ J instructions).

Schedule A (Form 990) 2023

332026 12-21-23

DAUPHIN COUNTY LIBRARY SYSTEM Schedule A (Form 990) 2023 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

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Schedule A (Form 990) 2023

# DAUPHIN COUNTY LIBRARY SYSTEM

Par	t V Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	nizations (continu	ued)	
Secti	on D - Distributions				Current Year
_1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	3	3		
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023	15	(iii) Distributable Amount for 2023
_1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
C	From 2020				
d	From 2021				
e	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				
	Excess from 2023				

Schedule A (Form 990) 2023

Schedule A	(Form 990) 2023	DAUPHIN	COUNTY	LIBRARY	SYSTEM		23-1352317	Page 8
Part VI	Supplemental Inform Part IV, Section A, lines 1, line 1; Part IV, Section D, Section D, lines 5, 6, and 3	, 2, 3b, 3c, 4b, 40 lines 2 and 3; Pa	c, 5a, 6, 9a, 9l rt IV, Section	b, 9c, 11a, 11b, E, lines 1c, 2a, 2	and 11c; Part IV, 2b, 3a, and 3b; Pa	Section B, lines 1 irt V, line 1; Part V	17b; Part III, line 12; and 2; Part IV, Sectior Section B, line 1e; Pa	n C,
	(See instructions.)	· · ·						
						•		
332028 12-21-2	3			21			Schedule A (Form S	990) 2023

SCHEDULE D	)
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Department of the Treasury

Internal Revenue Service

(Form	990)
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# **Supplemental Financial Statements**

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

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



Name of the organization

#### DAUPHIN COUNTY LIBRARY SYSTEM

Employer identification number 23 - 1352317

Par	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		s or Accounts. Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	vriting that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's e	exclusive legal control?	Yes 🗌 No
6	Did the organization inform all grantees, donors, and donor ad	dvisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose	conferring
	impermissible private benefit?		YesNo
Par	t II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (for example, recreat	ion or education)	of a historically important land area
	Protection of natural habitat	Preservation of	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualify	ed conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
с	Number of conservation easements on a certified historic stru	icture included on line 2a	
d	Number of conservation easements included on line 2c acqui	red after July 25, 2006, and not	
	on a historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by th	e organization during the tax
	year		
4	Number of states where property subject to conservation eas	ement is located	_
5	Does the organization have a written policy regarding the peri	odic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	holds?	Yes 🗌 No
6	Staff and volunteer hours devoted to monitoring, inspecting, I	nandling of violations, and enforcing con	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conserva-	ation easements during the year
8	Does each conservation easement reported on line 2d above	satisfy the requirements of section 170(	
9	In Part XIII, describe how the organization reports conservation		
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's financial statem	nents that describes the
Der	organization's accounting for conservation easements.	Art Ilistoriaal Trassumas, ar	they Cimiley Accete
Par			ther Similar Assets.
	Complete if the organization answered "Yes" on Form		
та	If the organization elected, as permitted under FASB ASC 956	· ·	
	of art, historical treasures, or other similar assets held for pub		
	service, provide in Part XIII the text of the footnote to its finan		
b	If the organization elected, as permitted under FASB ASC 956	· ·	
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furt	therance of public service,
	provide the following amounts relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1		
-			
2	If the organization received or held works of art, historical trea		al gain, provide
	the following amounts required to be reported under FASB A	-	•
	Revenue included on Form 990, Part VIII, line 1		
	Assets included in Form 990, Part X		
	For Paperwork Reduction Act Notice, see the Instructions	tor Form 990.	Schedule D (Form 990) 2023
332051	09-28-23	22	

Part III       Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets:       Continued         3       Using the organization acquisition, accounsely, and other records, check any of the following that make significant use of its collection times (check all that apply).       a       Pable obligition       d       Lean or exchange program       e       Other         a       Pable obligition       d       Lean or exchange program       e       Other         c       Provide a description of the organization solections and explain how they further the organization's exampt purpose in Part XII.       Sumpt the organization acute outs after the normalization acute organization solection?       Yes       No         Part II       Escrive and Custodial Arrangements       Complete if the organization anowered Yes' on Form 990, Part X, Ine 21.       Test the organization anound on Form 900, Part X, Ine 21.         1a       Is the organization anound on Form 900, Part X, Ine 21.       Amount       Test the organization include an anound to Form 900, Part X, Ine 21.       Amount       Test the organization anound the organization anound the organization acute the state of the organization acute the state of the organization acute the state of the organization acute the organization a		ichedule D (Form 990) 2023 DAUPHIN COUNTY LIBRARY SYSTEM 23-1352317 Page 2								
collection terms (check all that apply).       a       Debic exhibition       d       Loan or exchange program         b       Scholarly research       o       Other         c       Preveled exhibition       d       Other         c       Preveled exhibition       Ves       No         Preveled exhibition       Other       Preveled exhibition       Ves       No         Particle description of the organization's oldections and explain how they further the organization's exempt purpose in Part XIII.       Suring the year, did the organization's oldection?       Yes       No         Part V       Escrow and Custodial Arrangements Complete if the organization's oldection?       Yes       No         b       If 'Yes,' explain the arrangement in Part XIII and complete the following table:       Amount       Yes       No         b       If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation inbachen provided in Part XIII       Yes       No         Barring of year blance       3, 456,757       3, 870,418       30,753       2, 757,32       30,753       3,266,575       3,267,31       3,2,652,32       2,33       3,206,576       3,273       3,266,575       3,267,31       3,270,473       2,595,576       3,237,23       3,206,576       3,297,23       3,970,473       2,595,576       3,297,23	Par	Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)								
a       Public schibtion       d       Lan or exchange program         b       Scholary research       e       Otter	3	3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its								
b       Scholarly research       e       Other         2       Preservation for future generations       4       Provide a description of the organization scollections and explain how they further the organization's exempt purpose in Part XIII.         5       Uning the year, did the organization scollection?       Yes       No         Part U       Escrow and CutStodial Arrangements Complete if the organization scollection?       Yes       No         Part U       Escrow and CutStodial Arrangements Complete if the organization scolection?       Yes       No         Part U       Escrow and CutStodial Arrangements Complete the following table:       Yes       No         b       If "Yes," explain the arrangement in Part XIII and complete the following table:       Yes       No         b       If "Yes," explain the arrangement in Part XIII Check here if the explanaton inbase per provide all acount to form 990. Part X, line 21, for escrow on cutstodial acount liabiny?       Yes       No         b       If "Yes," explain the arrangement in Part XIII. Check here if the explanaton inbase per provide in Part XIII       Point yes       No         b       Control organization include an amount on Form 990. Part X, line 21, for escrow on cutstodial acount liabiny?       Yes       No         b       Control organization include an amount on explanation inbase per provide in Part XIII       Point yes       No         b		collection items (check all that apply).	_							
c       Preservation for future generations         4       Provide a description of the organization is collections and explain how they further the organization's exempt purpose in Part XIII.         5       During the year, did the organization is collections and explain how they further the organization's exempt purpose in Part XIII.         5       During the year, did the organization assumed 'Yes' on Form 990, Part IV, line 90, Part IV, line 90, Part X, line 21.         16       Is the organization and part in theste, custodial, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.         17       Is the organization and part, line 21.         18       Is the organization and part, line 21.         19       Is the organization and part, line 21.         10       Is the organization and part, line 21.         11       Is the organization and part, line 21.         12       Additions during the year         13       Ending balance         14       Ending balance         15       Ison organization include an amount on Form 990, Part X, line 21, preserve we distodial acquire line arrangement in Part XIII. Check here if the arganization and provided in Part W         Part V       Endowment Funds       Complete if the organization and provided in Part VI, line 10.         14       Begrinning of year balance       12/4/5/3/20/7/3/20/7/3/2/2/7/3/3.20/6/7/2/3.20/6/7/2.3.20/6/7/2.3.20/6/7/2.3.20/6	а	Public exhibition	d	Loan or exc	hange program					
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.     During the year, did the organization solicit or receive donations of at, historical freasures, or other similar assets     to be add to raise funds rather than to be maintained as part of the organization's collection?     Part IV ESCrOW and Custodial Arrangements     Complete if the organization answered 'Ves' on Form 900, Part X, line 9, or     reported an amount on Form 900, Part X, line 21,     Is the organization an agent, furstee, custodian, or other intermediary for contributions or other assets not included     on Form 900, Part X2     Is be organization an agent, furstee, custodian, or other intermediary for contributions or other assets not included     on Form 900, Part X2     Is be organization an agent, furstee, custodian, or other intermediary for contributions or other assets not included     on Form 900, Part X2     Bit frives, " explain the arrangement in Part XIII and complete the tollowing table:         Amount         to         additions during the year         birtholicon surface they even         birtholicon surface they even         birtholicon surface         birtholicon surface they even         birtholicon         birtholicon         birtholicon         birtholicon         birtholicon         birtholicon	b	Scholarly research	e	Other						
5       During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be solid to raise funds rather than to be maintained as part of the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.         1       Is the organization an agent, trustee, cuscidian, or other intermediary for contributions or other assets not included on Form 990, Part X?       Ves       No         b If "Yes," explain the arrangement in Part XIII and complete the following table:       Amount       Intermediary       Yes       No         b If "Yes," explain the arrangement in Part XIII and complete the following table:       Amount       Intermediary       Yes       No         b If "Yes," explain the arrangement in Part XIII and complete the following table:       Amount       Intermediary       Yes       No         b If "Yes, "explain the anzagement in Part XIII and complete the following table:       Amount       Intermediary       Yes       No         b If "Yes, "explain the anzagement in Part XIII and complete if the organization answered "Yes" on Form 990, Part X, line 21.       Yes       No         b If "Yes, "explain the anzagement in Part XIII and Complete if the organization answered "Yes" on Form 990, Part X, line 21.       No       Intermediary       Yes       No         b If "Yes, "explain the anzagement in Part XIII and Complete if the organization answered "Yes" on Form 990, Part X, line 10.       Intermediary       Intermedia	С	c Preservation for future generations								
To be sold to raise funds rather than to be maintained as part of the organization a collection?         Yes         No           Part IV         Escrow and Custodial Arrangements         Complete if the organization answered 'Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.         Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.         Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.         Is the organization and agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. for secrow or custodial account lability?         Is definitions during the year         Is definitions         Is definition         Is definiton         Is definition         Is definitio	4			-	-		Part XIII.			
Part IV       Escrow and Custodial Arrangements       Complete it the organization answered "Ves" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.         1a       Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X line 21.       Image: Complete intermediary for contributions or other assets not included on Form 990, Part X line 21.       Image: Complete intermediary for contributions or other assets not included on Form 990, Part X line 21.       Image: Complete intermediary for contributions or other assets not included on Form 990, Part X line 21.       Image: Complete intermediary for contributions or other assets not included on Form 990, Part X line 21.       Image: Complete intermediary for contributions or other assets not included on Form 990, Part X line 21.       Image: Complete intermediary for contributions or other assets not included on Form 990, Part X line 21.       Image: Complete intermediary for contributions or other assets not included on Form 990, Part X line 21.       Image: Complete intermediary for contributions or other assets not included on Form 990, Part X line 21.       Image: Complete intermediary for contributions or other assets not included on Form 990, Part X line 21.       Image: Complete intermediary for contributions or other assets not included on Form 990, Part X line 21.       Image: Complete intermediary for contributions or other assets not included on form 990, Part X line 21.       Image: Complete intermediary for contributions includes asset not included in form 990, Part X line 21.       Image: Complete intermediary for contributions includes asset not include asset not includes asset not include asset not includes asset not includes includes inclu	5					nilar assets				
reported an amount on Form 990, Part X, line 21.           1a         Is the organization agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?         Yes         No           b         If 'Yes,'' explain the arrangement in Part XIII and complete the following table:         Amount           1d         Colspan="2">Amount           1d         Colspan="2">Amount           1d         Colspan="2">Amount           1d         Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan= 2mount on Form 990, Part X, line 21, for ascrow or usutodial, account liability,"         Yes         No           1d         Colspan= 2mount on Form 990, Part X, line 21, for ascrow or usutodial, account liability,"         Yes	Des								<u>No</u>	
1a       Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X       Ves       No         b       If 'Yes,' explain the arrangement in Part XIII and complete the following table:       Admount       Amount         c       Beginning balance       Amount       1d       Id         d       Additions during the year       1d       Id       Id         e       Distributions during the year       1d       Id       Id       Id         2a       Did the organization include an amount on Form 990, Part X, line 21, for secrow to dustodial account lability?       Ves       No         b       If 'Yes' explain the arrangement in Part XIII Check here if the explanator misses beer provided in Part XIII       No         Part V       Endowment Fuer XIII. Check here if the explanator misses beer provided in Part XIII       No         d       a Beginning of year balance       (a) Current year       (b) Prov year       (c) Two years back       (e) Four years back         d       Grants or scholarships       3455, 164, 333, 753, 270, 133, 22, 7133, 22, 721, 233, 28, 703, 245, 928, 205, c65, c76, 3, 280, 703, 250, 6576, 3, 280, 703, 200, 661, 200, 066, g       Grants or scholarships       0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0	Par			he organizatior	answered "Yes'	on Form 990, Part	IV, line 9,	or		
on Form 990, Part X7         Yes         No           b If "Yes," explain the arrangement in Part XII and complete the following table:         Amount         Amount           c Beginning balance         Amount         Id         Id           d Additions during the year         Id         Id         Id           a Did the organization include an amount on Form 990, Part X, line 21, for serrow on custodial account liability?         Yes         No           b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII         Yes         No           b The organization include an amount on Form 990, Part X, line 21, for serrow on custodial account liability?         Yes         No           b The organization include an amount on Form 990, Part X, line 21, for serrow on custodial account liability?         Yes         No           b Contributions         415,164         310,753         27,133         38,703,753         27,133         38,703,753         2,29,834         0,0         0,0         0,0         0,0         0,0         0,0         0,0         0,0         0,0         0,0         0,0         0,0         0,0         0,0         0,0         0,0         0,0         0,0         0,0         0,0         0,0         0,0         0,0         0,0         0,0         0,0         0,0		• ·								
b       If "Yes," explain the arrangement in Part XIII and complete the following table:          Amount          c       Beginning balance          1a         d       Additions during the year          1a         f       Ending balance          1a         2a       Distributions during the year          1a         1a          1a          1a         2b       Distributions during the year          1a         2b       Distributions during the year          1a         b       If "Yes," explain the arrangement in Part XIII. Check here if the explanation answered "Yes" on Form 980 Part X, line 10.         Part V       Endowment Funds Complete if the explaintion answered "Yes" on Form 980 Part X, line 10.         1a       Beginning of year balance          3.456, 875, 3.877, 977, 977, 488, 810, 427, 210, 542, 946, 0.0, 0.0, 0.0, 0.0, 0.0, 0.0, 0.0, 0.	1a									
c         Beginning balance         Amount           d         Additions during the year         1d           e         Distributions during the year         1d           2         Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?         Yes         No           2         Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?         Yes         No           Part V         Endowment Funds         Complete if the organization answered Ves on Form 990, Part X, line 10.         Image: State							L Ye	S		
c       Beginning balance       1d         d       Additions during the year       1d         e       Distributions during the year       1d         f       Ending balance       1f         2a       Did the organization include an amount on Form 990, Part X, line 21, for secrew or custodial account lability?       Ves       No         b       If "Yes" explain the arrangement in Part XIII. Check here organization nasueer 07/sec or Form 990, Part X, line 10.       (e) Four years back       (e) Four year       (e) Four year<	a	It "Yes," explain the arrangement in Part XIII	and complete the followin	ig table:			Am	ount		
d Additions during the year       1d         e Distributions       0         b If 'Yes' explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII       Pert V         Part V       Endowment Funds       Complete if the organization answered Yes' on Form 900, Part IX, line 10.         b Contributions       3456, 875, 3,870,473, 3,506,576, 3,287,138, 2,699,205.         c Not investment earnings, gains, and losses       546,283, -577,997, 4488,810, 4427,210, 542,946,         d Grants or scholarships       0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,	-	Decision belonce					7	ount		
e         Distributions during the year         1e           f         Ending balance         1f           2a         Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability?         Ves         No           b         If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.         No           Part V         Endowment Funds. Complete if the organization answered Yes' on Form 990. Part IV, line 10.         (a) Current year.         (b) Prior year         (c) Two years back.           1a         Beginning of year balance         3,456,875.         3,870,478.         3,566,576.         3,287,138.         2,659,205.           b         Contributions         3449,164.         330 / 753.         27,133.         38,703.         65,053.           b         Contributions         3445,875.         3,870,478.         129,091.         225,814.         0.           c         Other expenditures for facilities         124,469.         144,748.         129,091.         225,814.         0.           c         Other expenditures for facilities         124,619.         144,748.         129,091.         225,814.         0.           c         Oto o         9,06         Form endowment         60.0000.         %										
f       Ending balance       11         2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or cuscled in Part XIII       Yes       No         b       If "Ves", explain the array memt in Part XIII. Check here if the explanation has been provided in Part XIII       Yes       No         b       If "Ves", explain the array memt in Part XIII. Check here if the explanation has been provided in Part XIII       (d) Three years back (e) from years back (e) from years back (e) four years back four years back four years back (e) four years back (e) four										
2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         b       If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.       Yes       No         Part V       Endowment Funds       Complete if the organization answered "Yes" on Form 990, Part K, line 10.       Image: Complete if the organization answered "Yes" on Form 990, Part K, line 10.         1a       Beginning of year balance       (a) Current year.       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         b       Contributions       345, 675.       3, 870. 479.       3, 506, 576.       3, 287, 138.       2, 699. 205.         c       Other expenditures for facilities       and programs       124, 469.       144, 743.       129, 091.       225, 814.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.0.       0.0.       0.0.       0.0.       0.0.       0.0.       0.0.       0.0.       0.0.       0.0.       0.0.       0.0.       0.0.       0.0.       0.0.       0.0.       0.0.       0.0.       0.0.       0.0.       0.0.       0.0.       0.0.       0.0.       0.0										
b         If Yes, * explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.           Part V         Endowment Funds: Complete if the organization answered Yes' on Form 900, Part IV, line 10.           1a         Beginning of year balance         (a) Current year         (b) Prori years         (c) Two years back         (d) Four years back           1a         Beginning of year balance         (a) Current year         (b) Prori years         (c) Two years back         (d) Four years back           b         Contributions         (a) Current year         (b) Prori years         (c) Two years back         (d) Four years back           b         Contributions         (a) Current year         (b) Prori years         (c) Two years back         (d) Four years back           b         Gonthibutions         (a) 456, 875.         (a) 810.         (d) 27, 210.         542, 946.           c         Cher expenditures for facilities         124, 469.         1444, 743.         129, 091.         225, 814.         0.           c         A doministrative expensitures for facilities         124, 469.         1444, 743.         129, 909.         225, 814.         0.           g End of year balance         (f) and programs         22, 638.         22, 658.         23, 870, 479.         3, 506, 576.         3, 287, 138.									No	
Part V         Endowment Funds         Complete if the organization answered "Yes" on Form 990, Part IV, line 10.           1a         Beginning of year balance         (a) Current year         (b) Pror year         (c) Twe years back         (d) Three years back         (e) Four years back           b         Contributions         3, 456, 875,         3, 870, 3, 27, 133,         38, 703,         65, 053,           c         Net investment earnings, gains, and losses         546, 283,         -577, 997,         4488, 810,         427, 210,         542, 946,           of ants or scholarships         546, 283,         -577, 997,         4488, 810,         427, 210,         542, 946,           of dynamics         124, 469,         144, 743,         129, 091,         225, 814,         0,           g         End of year balance         4, 201, 215,         3, 456, 875,         3, 870, 479,         3, 506, 576,         3, 287, 138,           2         Provide the estimated percentage of the ourrent year end balance (line 1g, column (al) held as:         a Board designated or quasi-endowment         40, 0000         %           b         Permanent endowment         0.0000         %         %         3a(ii)         X           ii Hore year out and the possession of the organization bisted as required on Schedule R?         3a(iii)         X </th <th></th> <th>-</th> <th></th> <th></th> <th></th> <th>• • • • • • • • • • • • • • • • • • • •</th> <th> ••</th> <th></th> <th></th>		-				• • • • • • • • • • • • • • • • • • • •	••			
(a) Current year         (b) Prior year         (c) Two years back         (d) Three years back         (e) Four years back           1a         Beginning of year balance         3,456,875.         3,870,479.         3,506,576.         3,287,138.         2,699,205.           b         Contributions         345,164.         330,753.         27,133.         38,703.         65,053.           c         Net investment earnings, gains, and losses         546,283.         -577,997.         4488,810.         427,210.         542,946.           d         Grants or scholarships         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.0         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0. <td< th=""><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th></td<>										
b       Contributions       345,164.       330,753.       27,133.       38,703.       65,053.         c       Net investment earnings, gains, and losses       546,283.       -577,997.       488,810.       427,210.       542,946.         d       Grants or scholarships       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       <		·					back (e)	Four ye	ars back	
b       Contributions       345,164.       330,753.       27,133.       38,703.       65,053.         c       Net investment earnings, gains, and losses       546,283.       -577,997.       488,810.       427,210.       542,946.         d       Grants or scholarships       0.       0.       0.       0.       0.       0.         e       Other expenditures for facilities       124,469.       144,743.       129,091.       225,814.       0.         g       End of year balance       4,201,215.       3,456,875.       3,870,479.       3,506,576.       3,287,138.         g       End of year balance       4,01,0000       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %<	1a	Beginning of vear balance	3,456,875.	3,870,479.	3,506,51	76. 3,287,1	38.	2,69	99,205.	
c       Net investment earnings, gains, and losses       546,283.       -577,997.       488,810.       427,210.       542,946.         d       Grants or scholarships       0.       0.       0.       0.       0.       0.         e       Other expenditures for facilities and programs       124,469.       144,743.       129,091.       225,814.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.<			345,164.	330,753.	27,13	33. 38,7	03.	(	55,053.	
d Grants or scholarships       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.			546,283.	-577,997.	488,81	LO. 427,2	10.	54	42,946.	
and programs       124,469.       144,743.       129,091.       225,814.       0.         f Administrative expenses       22,638.       21,617.       22,949.       20,661.       20,066.         g End of year balance       4,201,215.       3,456,875.       3,870,479.       3,506,576.       3,287,138.         2 Provide the estimated percentage of the ourmet year end balance (line 1g, column (a)) held as:       a Board designated or quasi-endowment       40.0000 %         b Permanent endowment       60.0000 %       %       %       %         c Term endowment       0.0000 %       %       %       %         here endowment funds not in the possession of the organization that are held and administered for the organizations?       3a(i)       X         (i) Unrelated organizations?       3a(ii)       X       3a(ii)       X         (ii) Unrelated organizations?       3a(iii)       X       3a(iii)       X         (iii) Related organizations?       3a(iii)       X       3a(ii)       X         (ii) Unrelated organizations listed as required on Schedule R?       4       2escription of property       (a) Cost or other       (b) Cost or other       (c) Accumulated         4       Description of property       (a) Cost or other       (b) Cost or other       (b) Accumulated       (c) Acc				0.		0.	0.		0.	
f       Administrative expenses       22,638.       21,617.       22,949.       20,661.       20,066.         g       End of year balance       4,201,215.       3,456,875.       3,870,479.       3,506,576.       3,287,138.         2       Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       a       Board designated or quasi-endowment       40.0000       %         b       Permanent endowment       60.0000       %       %       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *<	е	Other expenditures for facilities								
f       Administrative expenses       22,638.       21,617.       22,949.       20,661.       20,066.         g       End of year balance       4,201,215.       3,456,875.       3,870,479.       3,506,576.       3,287,138.         2       Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       a       Board designated or quasi-endowment       40.0000       %         b       Permanent endowment       60.0000       %       %       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *       *<		and programs	124,469.	144,743.	129,09	91. 225,8	14.		0.	
2       Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:         a       Board designated or quasi-endowment       40.0000       %         b       Permanent endowment       60.0000       %         c       Term endowment       0000 %         The percentages on lines 2a, 2b, and 2c should equal 100%.       3a       Are there endowment funds not in the possession of the organization that are held and administered for the organization s?       Yes No         (i)       Unrelated organizations?       3a(i)       X         (ii)       Related organizations?       3a(ii)       X         b       If "Yes" on line 3a(i), are the related organization's endowment funds.       Part VI       Land, Buildings, and Equipment         Complete if the organization answerd "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       Description of property       (a) Cost or other basis (other)       (b) Cost or other depreciation       (d) Book value         1a       Land       922,455.       922,455.       922,455.         b       Buildings       24,131,482.       9,197,476.       14,934,006.         c       Leasehold improvements       3,701,478.       3,205,759.       495,719.         c       Land bines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c. column (B)       18,09	f		22,638.	21,617.	22,94	19. 20,6	61.	2	20,066.	
a Board designated or quasi-endowment       40.0000       %         b Permanent endowment       60.0000       %         c Term endowment       .0000       %         The percentages on lines 2a, 2b, and 2c should equal 100%.       3a       Are there endowment funds not in the possession of the organization that are held and administered for the organization by:       Yes No         (i) Unrelated organizations?       3a(i)       X         b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3a(i)       X         4 Describe in Part XIII the intended uses of the organization's endowment funds.       Part VI       Land, Buildings, and Equipment         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       (d) Book value         Description of property       (a) Cost or other       b) Siss (other)       depreciation         1a Land       922,4555       922,4555       922,4555         b Buildings       24,131,482       9,197,476       14,934,006         c Leasehold improvements       3,701,478       3,205,759       495,719         e Other       4,384,817       2,644,804       1,740,013         Total. Add lines 1a through 1e. (Column (a) must equal Form 990, Part X, line 10c. column (B)       18,092,193	g	End of year balance	4,201,215.	3,456,875.	3,870,47	79. 3,506,5	76.	3,28	37,138.	
b       Permanent endowment       60.0000       %         c       Term endowment       .0000       %         The percentages on lines 2a, 2b, and 2c should equal 100%.       3a       Are there endowment funds not in the possession of the organization that are held and administered for the organization by:       (i)       Unrelated organizations?       3a(i)       X         (ii)       Related organizations?       3a(ii)       X       3a(ii)       X         b       If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3b       3b       3b         4       Describe in Part XIII the intended uses of the organization's endowment funds.       3b       3b       3b         Part VI       Land, Buildings, and Equipment       Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       (d) Book value         1a       Land       922, 455.       922, 455.       922, 455.         b       Buildings       24, 131, 482.       9, 197, 476.       14, 934, 006.         c       Leasehold improvements       3, 701, 478.       3, 205, 759.       495, 719.         e       Other       4, 384, 817.       2, 644, 804.       1, 740, 013.	2	Provide the estimated percentage of the curr	ent year end balance (line	e 1g, column (a)	) held as:					
c       Term endowment       .0000 %         The percentages on lines 2a, 2b, and 2c should equal 100%.       3a       Are there endowment funds not in the possession of the organization that are held and administered for the organization by: <ul> <li>(i) Unrelated organizations?</li> <li>(ii) Related organizations?</li> <li>(iii) Related organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.</li> <li>(iii) Cost or other basis (other)</li> <li>(</li></ul>	а	Board designated or quasi-endowment	40.0000 %							
The percentages on lines 2a, 2b, and 2c should equal 100%.         3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: <ul> <li>(i) Unrelated organizations?</li> <li>(ii) Related organizations?</li> <li>(iii) Related organizations?</li> <li>(ii) Part XII the intended uses of the organization's endowment funds.</li> </ul> <ul> <li>Yes No</li> <li>3a(i) X</li> <li>3a(ii) X</li> <li>3b i</li> </ul> 4 Describe in Part XIII the intended uses of the organization's endowment funds.         Part VI         Land, Buildings, and Equipment           Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. <ul> <li>(d) Book value</li> <li>(e) Cost or other</li> <li>(b) Cost or other</li> <li>(c) Accumulated</li> <li>(d) Book value</li> <li>(d) Book value</li> <li>(d) Book value</li> <li>(d) Book value</li> <li>(e) Cost or other</li> <li>(b) Cost or other</li> <li>(c) Accumulated</li> <li>(d) Book value</li> <li>(d) Equipment</li> <li>(f) Equipme</li></ul>	b		%							
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: <ul> <li>(i) Unrelated organizations?</li> <li>(ii) Related organizations?</li> <li>(iii) Related organizations?</li> <li>(ii) Part VI and, Buildings, and Equipment</li> <li>Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.</li> </ul> <ul> <li>(a) Cost or other basis (investment)</li> <li>(b) Cost or other basis (other)</li> <li>(c) Accumulated depreciation</li> <li>(d) Book value</li> </ul> 1a Land         922,455.         922,455.               b Buildings             24,131,482.             9,197,476.             14,934,0066.               c Leasehold improvements	с	Term endowment .0000	%							
organization by:       Yes       No         (i) Unrelated organizations?       3a(i)       X         (ii) Related organizations?       3a(ii)       X         b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3b       3b         4 Describe in Part XII the intended uses of the organization's endowment funds.       3b       3b       3b         Part VI       Land, Buildings, and Equipment       (c) Accumulated depreciation       (d) Book value         Description of property       (a) Cost or other basis (other)       (c) Accumulated depreciation       (d) Book value         1a Land       922,455.       922,455.       922,455.         b Buildings       24,131,482.       9,197,476.       14,934,006.         c Leasehold improvements       3,701,478.       3,205,759.       495,719.         e Other       4,384,817.       2,644,804.       1,740,013.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X, line 10c. column (B))       18,092,193.		The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.							
(i)       Unrelated organizations?       3a(i)       X         (ii)       Related organizations?       3a(ii)       X         b       If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3b       3b         4       Describe in Part XII the intended uses of the organization's endowment funds.       3b       3b         Part VI       Land, Buildings, and Equipment       3b       3b       3b         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       (d) Book value         Description of property       (a) Cost or other       basis (other)       (c) Accumulated       (d) Book value         1a       Land       922,455.       922,455.       922,455.         b       Buildings       24,131,482.       9,197,476.       14,934,006.         c       Leasehold improvements       3,701,478.       3,205,759.       495,719.         d       Equipment       3,701,478.       3,205,759.       495,719.         e       Other       4,384,817.       2,644,804.       1,740,013.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c. column (B))       18,092,193.	3a	Are there endowment funds not in the posse	ssion of the organization	that are held ar	nd administered f	or the		_		
(ii) Related organizations?       3a(ii) X         b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3b         4 Describe in Part XIII the intended uses of the organization's endowment funds.         Part VI       Land, Buildings, and Equipment         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       (d) Book value         Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation         1a       Land       922, 455.       922, 455.         b       Buildings       24, 131, 482.       9, 197, 476.       14, 934, 006.         C Leasehold improvements       2       24, 131, 478.       3, 205, 759.       495, 719.         Other       3, 701, 478.       3, 205, 759.       495, 719.         Colspan= 2       4, 384, 817.       2, 644, 804.       1, 740, 013.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c. column (B))       18, 092, 193.							_	Ye		
b       If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3b         4       Describe in Part XIII the intended uses of the organization's endowment funds.         Part VI       Land, Buildings, and Equipment         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (investment)       (c) Accumulated depreciation         1a       Land       922,455.       922,455.         b       Buildings       24,131,482.       9,197,476.       14,934,006.         c       Leasehold improvements       3,701,478.       3,205,759.       495,719.         e       Other       4,384,817.       2,644,804.       1,740,013.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c. column (B))       18,092,193.								a(i)		
4 Describe in Part XII the intended uses of the organization's endowment funds.         Part VI       Land, Buildings, and Equipment         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (investment)         basis (other)       (c) Accumulated depreciation         1a Land       922,455.         b Buildings       24,131,482.         c Leasehold improvements       3,701,478.         d Equipment       4,384,817.         2,644,804.       1,740,013.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))       18,092,193.										
Part VI       Land, Buildings, and Equipment         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation       (d) Book value         1a       Land       922,455.       922,455.         b       Buildings       24,131,482.       9,197,476.       14,934,006.         c       Leasehold improvements       3,701,478.       3,205,759.       495,719.         e       Other       4,384,817.       2,644,804.       1,740,013.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))       18,092,193.	b							Bb		
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.Description of property(a) Cost or other basis (investment)(b) Cost or other basis (other)(c) Accumulated depreciation(d) Book value1a Land922,455.922,455.b Buildings24,131,482.9,197,476.14,934,006.c Leasehold improvements3,701,478.3,205,759.495,719.e Other4,384,817.2,644,804.1,740,013.Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))18,092,193.			U U	nt funds.						
Description of property(a) Cost or other basis (investment)(b) Cost or other basis (other)(c) Accumulated depreciation(d) Book value1a Land922,455.922,455.b Buildings24,131,482.9,197,476.14,934,006.c Leasehold improvements3,701,478.3,205,759.495,719.d Equipment4,384,817.2,644,804.1,740,013.Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))18,092,193.	Par			+ 11/ 1000 110 0		rt V line 10				
basis (investment)         basis (other)         depreciation           1a Land         922,455.         922,455.           b Buildings         24,131,482.         9,197,476.         14,934,006.           c Leasehold improvements         3,701,478.         3,205,759.         495,719.           e Other         4,384,817.         2,644,804.         1,740,013.           Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))         18,092,193.										
1a Land       922,455.       922,455.         b Buildings       24,131,482.       9,197,476.       14,934,006.         c Leasehold improvements       3,701,478.       3,205,759.       495,719.         e Other       4,384,817.       2,644,804.       1,740,013.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))       18,092,193.		Description of property		• • •			(d)	Book v	alue	
b Buildings       24,131,482.       9,197,476.       14,934,006.         c Leasehold improvements       3,701,478.       3,205,759.       495,719.         e Other       4,384,817.       2,644,804.       1,740,013.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))       18,092,193.			, , ,		. ,	depreciation		000	155	
c       Leasehold improvements         d       Equipment         e       Other         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))						0 107 176				
d Equipment         3,701,478.         3,205,759.         495,719.           e Other         4,384,817.         2,644,804.         1,740,013.           Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))         18,092,193.				<u>44,13</u>	1,402.	5,19/,4/0.	<u>  14, 1</u>	, 234	000.	
e Other         4,384,817.         2,644,804.         1,740,013.           Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))         18,092,193.				2 70	1 179	3 205 750		105	710	
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))										
	rotal	. Aud lines ra through re. (Column (d) must e	<u>qual Form 990, Part X, line</u>	<u>e IUC, column</u>	( <u>B))</u>					

Schedule D (Form 990) 2023 DAUPHIN	COUNTY LIBRARY S	SYSTEM	23-1352317 Page 3
Part VII Investments - Other Securities			
Complete if the organization answered			
(a) Description of security or category (including name of sec	curity) (b) Book value	(c) Method of valuatio	n: Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) (B)			
(C)			
(D)			
(E)			
(F)			A
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (E	3))		
Part VIII Investments - Program Relate	ed.		
Complete if the organization answered			
(a) Description of investment	(b) Book value	(c) Method of valuatio	n: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Tetel (Oct (b) must sound Form 000 Dart V line 10 act (			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (E Part IX Other Assets	5)))		
Complete if the organization answered	"Yes" on Form 990, Part IV line	a 11d, See Form 990, Part X	line 15
	(a) Description		(b) Book value
(1) BENEFICIAL INTEREST IN		S	1,489,915.
(2) ENDOWMENT INVESTMENTS		-	4,201,215.
	OPERATING LEASE		163,073.
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line	15, col. (B))		
Part X Other Liabilities	*		
Complete if the organization answered	"Yes" on Form 990, Part IV, line	e 11e or 11f. See Form 990, F	
1.         (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
<b>Total.</b> ( <i>Column (b) must equal Form 990, Part X, line ;</i> <b>2.</b> Liability for uncertain tax positions. In Part XIII, p			
<ol> <li>Liability for uncertain tax positions. In Part Alli, p organization's liability for uncertain tax positions.</li> </ol>			

Schedule D (Form 990) 2023

Sche	dule D (Form 990) 2023 DAUPHIN COUNTY LIBRARY SYST.	см		23-	LJJZJL/ Pag	je 🗝
Pa	t XI Reconciliation of Revenue per Audited Financial Statemen	ts Wit	h Revenue per Re	turn		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total revenue, gains, and other support per audited financial statements			1	9,582,973	3.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a	772,718.			
b	Donated services and use of facilities	2b	79,105.			
с	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII.)	2d	206,949.			
е	Add lines 2a through 2d			2e	1,058,772	
3	Subtract line 2e from line 1			3	8,524,201	1.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	22,638.			
b	Other (Describe in Part XIII.)	4b				
С	Add lines <b>4a</b> and <b>4b</b>			4c	22,638	8.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			-5	8,546,839	9.
Pa	t VII   Decensilistian of Expanses per Audited Einensial Stateman	ate Mi	ith Evnangaa nar E	) ~ tı ır		
Iu	t XII Reconciliation of Expenses per Audited Financial Statemer	ILS VVI	itil Expenses per r	verur	n	
Tu	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			Ketur		
1				1	8,563,738	8.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					8.
1	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements					8.
1 2	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:					8.
1 2	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	<u>2a</u>				8.
1 2 a b c d	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d				8.
1 2 a b c d	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a 2b 2c 2d			8,563,738	0.
1 2 a b c d	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d		1	8,563,738	0.
1 2 b c d e	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d		1 2e	8,563,738	0.
1 2 b c d 3	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d		1 2e	8,563,738	0.
1 2 a b c d e 3 4	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d		1 2e	8,563,738 ( 8,563,738	<u>0.</u> 8.
1 2 d c 3 4 a b	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines <b>4a</b> and <b>4b</b>	2a 2b 2c 2d 4a 4b	22,638.	1 2e	8,563,738 ( 8,563,738 22,638	<u>0.</u> 8.
1 2 a b c d e 3 4 a b c 5	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d 4a 4b	22,638.	1 2e 3	8,563,738 ( 8,563,738	<u>0.</u> 8.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4:

THE LIBARY HAS PERMANENT ENDOWMENTS THAT PROVIDE FUNDING FOR THE LIVELY
MINDS AND THE JOAN Y. LEOPOLD CHILDREN'S BOOK WEEK PROGRAMS. OTHER
ENDOWMENTS PROVIDE LIBRARY MATERIALS FOR THE ALEXANDER FAMILY AND EAST
SHORE AREA LIBRARIES. THE LIBRARY ALSO HAS BOARD DESIGNATED ENDOWMENTS,
DESIGNATED FOR THE FOLLOWING PURPOSES: 1. MAINTENANCE OF THE HISTORIC
MCCORMICK RIVERFRONT LIBRARY; 2. CONTINUING EDUCATION FOR STAFF; 3.
LIBRARY MATERIALS FOR THE LIBRARY SYSTEM; 4. GENERAL OPERATING EXPENSES;
AND 5. YOUTH SERVICES.

## PART X, LINE 2:

THE LIBRARY FOLLOWS THE STANDARDS FOR ACCOUNTING FOR UNCERTAINTY IN INCOME
332054 09-28-23
Schedule D (Form 990) 2023
25

Schedule D (Form 990) 2023       DAUPHIN COUNTY LIBRARY SYSTEM       23-1352317       Page 5         Part XIII       Supplemental Information (continued)       Continued)       Continued       Continued
TAXES ACCORDING TO THE PRINCIPLES OF FASB ASC 740, INCOME TAXES, WHICH
PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR THE
FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN IN
A TAX RETURN. IT REQUIRES MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN BY
THE LIBRARY, INCLUDING WHETHER THE ENTITY IS EXEMPT FROM INCOME TAXES.
MANAGEMENT EVALUATED THE TAX POSITIONS TAKEN AND CONCLUDED THAT THE
LIBRARY HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR
DISCLOSURE IN THE FINANCIAL STATEMENTS.
PART XI, LINE 2D - OTHER ADJUSTMENTS:
UNBUDGETED PENSION ADJUSTMENT 206,949.

Schedule D (Form 990) 2023

332055 09-28-23

SCHEDULE G	Suppleme	ental Information Regarding	Fund	Iraisi	ng or Gaming A	ctivi	ties	OMB No. 1545-0047
(Form 990)	rm 990) Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.							
Department of the Treasury		Attach to Form 990 o						Open to Public
Internal Revenue Service		to www.irs.gov/Form990 for instruc	ctions	and th	ne latest information			Inspection
Name of the organization		COUNTY LIBRARY SY	פיידי	л			23-135	lentification number 2317
Part I Fundrais		Complete if the organization answe			Eorm 990 Part IV/	ine 17		
	complete this par		ieu i	63 01	110m 330, 1 at 10, 1		. 1 0111 990-1	
<ul> <li>a X Mail solicitat</li> <li>b X Internet and</li> <li>c X Phone solicitat</li> <li>d X In-person so</li> <li>2 a Did the organization key employees list</li> </ul>	ions email solicitations tations licitations on have a written o ed in Form 990, P highest paid indiv	f X Solicita g X Special or oral agreement with any individual eart VII) or entity in connection with p viduals or entities (fundraisers) pursu	tion of tion of fundra (incluc rofessi	non-g gover aising o ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		XY	
							mount poid	
(i) Name and addres or entity (func		(ii) Activity	or cor	Did raiser ustody trol of utions?	(iv) Gross receipts from activity	tò (oi fi	Amount paid r retained by undraiser ed in col. <b>(i)</b>	) <b>(vi)</b> Amount paid to (or retained by) organization
MID-ATLANTIC STRATE	EGIC	SEARCH FOR AN OBTAIN GRANT	Yes	No				
SOLUTIONS LLC - PO	BOX 7365,	FUNDING FOR VARIOUS		x	90,000.		30,000	60,000.
GHOST WRITER LLC -	311 W 7TH	FUNDRAISING, PUBLIC						
STREET, WAYNESBORO	PA	RELATIONS, MARKETING AND	_	X	19,300.		21,700	-2,400.
Total					109,300.		51,700	57,600.
	ch the organizatio	on is registered or licensed to solicit o	contrib	utions		it is e	xempt from	registration

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS Schedule G (Form 990) 2023

LHA 332081 09-13-23

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990, FZ, lines 1 and 6b, List events with gross receipts greater than \$5,000

		of fundraising event contributions and gro			-	s greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	<b>(d)</b> Total events (add col. <b>(a)</b> through
			(event type)	(event type)	(total number)	col. <b>(c)</b> )
Revenue						
Reve	1	Gross receipts				
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
	5	Noncash prizes				
Direct Expenses						
spe	0	Rent/facility costs	4			
ect E	7	Food and beverages				
Dire	8	Entertainment		h		
	9	Other direct expenses				
		Direct expense summary. Add lines 4 through				
Pa	11 rt	Net income summary. Subtract line 10 from line <b>Gaming.</b> Complete if the organization a			reported more than	<u> </u>
_		\$15,000 on Form 990-EZ, line 6a.			oportoù moro than	
anı			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue				
S		Cash prizes				
xpense	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses				
	5		Yes %	Yes %	Yes %	
	6	Volunteer labor	No	Νο	No	
	7	Direct expense summary. Add lines 2 through	5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
		ter the state(s) in which the organization condu				
		he organization licensed to conduct gaming ac No," explain:				Yes No
2						
		ere any of the organization's gaming licenses re			/ear?	Yes No
a	П ″	Yes," explain:				
33208	32 09	)-13-23			Sche	dule G (Form 990) 2023

Schedule G (Form 990) 2023	DAUPHIN COUNTY LIB	RARY SYSTEM	23-1352317 Page 3
<b>11</b> Does the organization conduct g	aming activities with nonmembers?		Yes No
		er of a partnership or other entity formed	
			Yes No
<b>13</b> Indicate the percentage of gamir			···········
			<b>13</b> a %
		n's gaming/special events books and reco	
		0 0 1	
Name			
Address			
<b>15a</b> Does the organization have a col	ntract with a third party from whom the	organization receives gaming revenue?	Yes No
<b>b</b> If "Yes," enter the amount of gar	ning revenue received by the organization	on \$ and the a	amount
of gaming revenue retained by th	ne third party \$		
<b>c</b> If "Yes," enter name and address	s of the third party:		
Name			
Address			
<b>16</b> Gaming manager information:			
Name			
0			
Gaming manager compensation	\$		
Description of services provided			
Description of services provided			
Director/officer		ependent contractor	
17 Mandatory distributions:			
	er state law to make charitable distributi	ons from the gaming proceeds to	
retain the state gaming license?			Yes No
<b>b</b> Enter the amount of distributions		ted to other exempt organizations or spen	
organization's own exempt activ			
Part IV Supplemental Info	rmation. Provide the explanations re-	quired by Part I, line 2b, columns (iii) and (	(v); and Part III, lines 9, 9b, 10b,
15b, 15c, 16, and 17b, a	s applicable. Also provide any additiona	al information. See instructions.	
	_		
SCHEDULE G, PART I,	LINE 2B, LIST OF TE	EN HIGHEST PAID FUNDRA	AISERS:
(I) NAME OF FUNDRAI	SER. MID-ATLANTIC ST	RATEGIC SOLUTIONS LLO	<b>~</b>
(1) HILL OF FORDIAL			~
(I) ADDRESS OF FUND	RAISER: PO BOX 7365,	STEELTON, PA 17113	
· · ·			
(II) ACTIVITY: SEAR	CH FOR AN OBTAIN GRA	ANT FUNDING FOR VARIOU	JS ACTIVITIES AN
(I) NAME OF FUNDRAI	SER: GHOST WRITER LI	JC	
<i>/_</i> ,			
		REET, WAYNESBORO, PA	17268-2111
(11) ACTIVITY: FUND	RAISING, PUBLIC RELA	ATIONS, MARKETING AND	
332083 09-13-23	-		Schedule G (Form 990) 2023

Schedule G	(Form	990

Part IV Supplemental information (continued)	
Schedule G (Fo	orm 990
32084_04-01-23	

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SC	HEDULE J	<b>Compensation Information</b>	1	OMB No. 1	545-004	47
(Fo	orm 990) For certain Officers, Directors, Trustees, Key Employees, and Highest			20	00	
•	-	Compensated Employees		20	ZJ	)
Dene	terrant of the Treesury	Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.		Open to	Publ	ic
	tment of the Treasury al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe		
Nam	e of the organization		Employer i			nber
_		DAUPHIN COUNTY LIBRARY SYSTEM	23-1	35231	7	
Pa	rt I Question	s Regarding Compensation				
					Yes	No
1a		ate box(es) if the organization provided any of the following to or for a person listed on Form	990,			
		line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or c					
	Travel for com					
		ation and gross-up payments				
	Discretionary	spending account Personal services (such as maid, chauffer	ir, chef)			
b		on line 1a are checked, did the organization follow a written policy regarding payment or				
~	•	rovision of all of the expenses described above? If "No," complete Part III to explain		1b		
2	-	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		
2	Indicate which if a	wy of the following the proprietion used to establish the companyation of the proprietion's				
3		ny, of the following the organization used to establish the compensation of the organization's actor. Check all that apply. Do not check any boxes for methods used by a related organization of the organization of the second s				
		ation of the CEO/Executive Director, but explain in Part III.	JITLO			
	Compensation					
	·	ompensation consultant				
	·	ther organizations Approval by the board or compensation c	ommittee			
			ommittee			
4	During the year, did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
•	organization or a re					
а	-	e payment or change-of-control payment?		4a		x
b		eive payment from a supplemental nonqualified retirement plan?				X
с		eive payment from an equity-based compensation arrangement?		4.		X
	-	les 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	Only section 501(c	)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	'n			
	contingent on the r	evenues of:				
а	The organization?			5a		X
		ation?				X
		r 5b, describe in Part III.				
6	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	'n			
	contingent on the n	-				
а	The organization?			<u>6a</u>		X
b		ation?		6b		X
		r 6b, describe in Part III.				
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments				
		es 5 and 6? If "Yes," describe in Part III		7		X X
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	10			
				8		X
9		id the organization also follow the rebuttable presumption procedure described in				
_		53.4958-6(c)?				
For	Paperwork Reducti	on Act Notice, see the Instructions for Form 990.	Sched	lule J (Forn	n <b>990</b> )	2023

LHA 332111 11-06-23

Schedule J (Form 990) 2023

Page **2** 

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) AARON GRUMBLING	(i)	123,808.	0.	0.	0.	0.	123,808.	0.
FINANCE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) KAREN CULLINGS	(i)	118,567.	0.	0.	0.	0.	118,567.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) DUSTIN BRINTON-WILSON	(i)	16,955.	0.	0.	0.	0.	16,955.	0.
INTERIM EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							 

Schedule J (Form 990) 2023

332113	11-06-23

Schedule J (Form 990) 2023 DAU	OPHIN	COUNTY	LIBRARY	SYSTEM	
Part III Supplemental Information					

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J (Form 990) 2023

33

#### SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

# **Noncash Contributions**

OMB No. 1545-0047

Open to Public

Inspection

Employer identification number

23-1352317

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

Name of the organization

#### DAUPHIN COUNTY LIBRARY SYSTEM

Pa	tl	Types of Property							
			<b>(a)</b> Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	etermin	•	s
4	۸ <i>.</i> ++	Works of art		items contributed	ronn 550, r art vin, into rg				
1 2		Works of art							
		Historical treasures							
3		Fractional interests							
4		s and publications							
5		ning and household goods							
6		and other vehicles							
7		s and planes							
8		ectual property							
9		irities - Publicly traded							
10		irities - Closely held stock							
11		irities - Partnership, LLC, or							
		interests							
12		irities - Miscellaneous							
13		ified conservation contribution -							
14		ified conservation contribution - Other							
15		estate - Residential							
16		estate - Commercial							
17		estate - Other							
18		ectibles							
19		l inventory			-				
20	Drug	s and medical supplies							
21	Taxio	dermy							
22		orical artifacts							
23		ntific specimens							
24	Arch	eological artifacts			115.051				
25	Othe	· /	X	14,537	117,271.	FAIR VALUE			
26	Othe	r ( <u>LIBRARY MATERIA</u> )	X	200	2,785.	FAIR VALUE			
27	Othe	er ()							
28	Othe	r ()							
29	Num	ber of Forms 8283 received by the organiz	zation during	the tax year for co	ontributions				
	for w	hich the organization completed Form 828	83, Part V, D	onee Acknowledg	ement 29				
								Yes	No
30a		ng the year, did the organization receive by							
	mus	hold for at least 3 years from the date of t	the initial co	ntribution, and whi	ich isn't required to be used	for			
	exen	npt purposes for the entire holding period?	?				30a		X
b	lf "Y	es," describe the arrangement in Part II.							
31	Does	the organization have a gift acceptance p	oolicy that re	quires the review o	of any nonstandard contribut	tions?	31		X
32a	Does	the organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell noncash				

b If "Yes," describe in Part II. 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

contributions?

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2023

32a

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LHA 332141 09-11-23

Schedule M (Form 990) 2023 DAUPHIN COUNTY LIBRARY SYSTEM	23-1352317	Page <b>2</b>
Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, is reporting in Part I, column (b), the number of contributions, the number of items received, or this part for any additional information.	and 33, and whether the organiza a combination of both. Also comp	tion plete
332142 09-11-23	Schedule M (Form	990) 2023
25		

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SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



23-1352317

DAUPHIN COUNTY LIBRARY SYSTEM

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

COMMUNITY AND INDIVIDUAL ACHIEVEMENT.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

IN ADDITION TO GENERAL LIBRARY SERVICES OFFERED TO THE PUBLIC, THE

LIBRARY PROVIDES THE FOLLOWING CORE SERVICES: 1. REFERENCE WHICH MAKES

REFERENCE STAFF AND RESOURCES AVAILABLE TO MEMBERS; 2. THE LIBRARY

SERVES AS THE DISTRICT CENTER PROVIDING DELIVERY, REFERENCE SUPPORT AND

OTHER LIBRARY SERVICES TO DAUPHIN, CUMBERLAND AND PERRY COUNTIES.

EXPENSES \$ 3,487,676. INCLUDING GRANTS OF \$ 0. REVENUE \$ 114,195.

FORM 990, PART VI, SECTION A, LINE 7A:

THE BOARD OF TRUSTEES IS COMPRISED OF 17 MEMBERS. **12 MEMBERS ARE ELECTED** TO A THREE-YEAR TERM BY THE GOVERNING BODY. THE REMAINING FIVE MEMBERS ARE APPOINTED FOR A THREE-YEAR TERM BY THE DAUPHIN COUNTY COMMISSIONERS. THE APPOINTMENTS ARE STAGGERED SO THAT THE APPOINTEES ARE DIVIDED INTO THREE THIS ENSURES THAT NO MORE THAN ONE-THIRD OF CLASSES OF EQUAL DISTRIBUTION. THE TRUSTEES ARE ELECTED IN ANY GIVEN YEAR. AT DECEMBER 31, THERE 2023 WERE TWO VACANCIES ON THE BOARD OF TRUSTEES

FORM 990, PART VI, SECTION B, LINE 11B:

 THE 990 PROCESS IS AS FOLLOWS.
 THE 990 IS PREPARED AFTER THE AUDIT OF THE

 FINANCIAL STATEMENTS IS COMPLETE.
 THE DRAFT 990 IS PRESENTED TO THE

 FINANCE COMMITTEE OF THE BOARD OF TRUSTEES AND THE EXECUTIVE DIRECTOR.

 AFTER OBTAINING THE APPROVAL OF THE COMMITTEE, THE DRAFT 990 IS PRESENTED

 TO THE FULL BOARD OF TRUSTEES WITH THE FINANCE COMMITTEE MAKING A

 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

 LHA
 332211 11-14-23

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36

Name of the organization DAUPHIN COUNTY LIBRARY SYSTEM	Employer identification numbe
RECOMMENDATION TO THE BOARD FOR APPROVAL. ONCE ALL QUE	ESTIONS HAVE BEEN
SATISFACTORILY ANSWERED AND THE BOARD APPROVES THE 990,	, IT IS FILED WITH
THE INTERNAL REVENUE SERVICE.	

FORM 990, PART VI, SECTION B, LINE 12C:

EACH JANUARY, THE EXECUTIVE COMMITTEE REVIEWS THE CONFLICT OF INTEREST POLICY. ANY NECESSARY REVISIONS ARE MADE AT THAT TIME. THE POLICY IS THEN PRESENTED AND REVIEWED AT THE JANUARY BOARD OF TRUSTEES MEETING. ALL TRUSTEES, THE EXECUTIVE DIRECTOR AND THE FINANCE DIRECTOR ARE REQUIRED TO COMPLETE, SIGN AND RETURN A COPY OF THE POLICY AND PROVIDE DETAILS OF KNOWN CONFLICTS. EACH IS GIVEN A COPY FOR THEIR RECORDS. THE FINANCE DIRECTOR COLLECTS THE SIGNED DOCUMENTS WHICH ARE RETAINED IN THE SYSTEM FILES. FOR THE CALENDAR YEAR 2023, ALL TRUSTEES SUBMITTED A SIGNED COPY OF THE POLICY AND PROVIDED DETAILS OF ANY KNOWN CONFLICTS.

FORM 990, PART VI, SECTION B, LINE 15:

THE PERSONNEL COMMITTEE OF THE BOARD OF TRUSTEES, ALONG WITH THE HUMAN RESROUCES AND FINANCE DIRECTORS, CONDUCTS AN ANALYSIS OF SALARY AND BENEFITS FOR THE ORGANIZATION. PRIMARY FOCUS IS PLACED ON SENIOR STAFF IN THE REVIEW WITH THE COMMITTEE. WAGE AND BENEFIT DATA IS GATHERED FROM VARIOUS SOURCES INCLUDING SURVEYS OF NON-PROFIT ORGANIZATIONS IN PENNSYLVANIA AS WELL AS OTHER NON-PROFITS IN THE EASTERN UNITED STATES AND OTHER LIBRARY ASSOCIATIONS. THE COMPENSATION OF THE EXECUTIVE DIRECTOR IS DETERMINED BY THE BOARD OF TRUSTEES. THE FINANCE DIRECTOR'S SALARY IS SET ALONG WITH ALL OTHER STAFF OF THE LIBRARY AS PART OF THE ANNUAL BUDGETING AND STAFF EVALUATION PROCESSES.

37

FORM 990, PART VI, SECTION C, LINE 19:

332212 11-14-23

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023	Page <b>2</b>
Name of the organization DAUPHIN COUNTY LIBRARY SYSTEM	Employer identification number 23-1352317
THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND A	UDITED FINANCIAL
STATEMENTS ARE AVAILABLE TO THE PUBLIC BY REQUEST AT THE L	IBRARY'S
ADMINISTRATIVE OFFICES. THE 990 AND AUDITED FINANCIAL STA	TEMENTS ARE ALSO
AVAILABLE ON THE LIBRARY'S WEBSITE. THE LIBRARY INCLUDES	ANNUAL FINANCIAL
INFORMATION IN VARIOUS MAILINGS TO DONORS THROUGHOUT THE Y	EAR.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
PENSION ADJUSTMENT	206,949.
FORM 990, PART XII, LINE 2:	
THE AUDIT REPORT IS REVIEWED AND APPROVED BY THE FINANCE C	COMMITTEE. IT
IS THEN PRESENTED TO THE BOARD OF TRUSTEES WITH A RECOMMEN	DATION FROM
THE COMMITTEE TO APPROVE.	
332212 11-14-23	Schedule O (Form 990) 2023

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