932001 01-20-20

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.

→ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

	A F	or the	2019 cal andar year, or tax year beginning JUL 1, 2019 and ending	g JUN 30, -2	2020	
	Вс	heck if	C Name of organization	D Employer i		tion number
	 X	Addres change Name change	Josephine Community Library Foundation Doing business as	94-30	5141	5
		Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room			
	7	Final return/	DO BOY 1684		176-0	571
		termin		G Gross receipts		651,423.
^-7		Amend		H(a) Is this a g		
$\langle l \rangle$		Applic		for subor		Yes X No
		pendir	same as C above	H(b) Are all subor		
15)	27.07	empt status			t (see instructions)
\			te: N/A	H(c) Group ex		
						State of legal domicile: OR
Ø	Pa	rt I	Summary	rodi or formation. 22	7 7 111 0	tate of regar comments of the
×			Briefly describe the organization's mission or most significant activities. We fost	er a cultur	e of	giving to
1	Governance		libraries in Josephine County to open minds			
<i>'</i>	nar		Check this box I if the organization discontinued its operations or disposed of			
K	Ver		Number of voting members of the governing body (Part VI, line 1a)	more than 2070 of its	3	14
•	g		Number of voting members of the governing body (Fart VI, line 1a)		4	14
	ಹ		Total number of individuals employed in calendar year 2019 (Part V, line 2a)		5	1
2	tie		· · · · · · · · · · · · · · · · · · ·		6	
B	Activities	7-	Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12) IN COLUMN (C), line 13) IN COLUMN (C), line 12) IN COLUMN (C), line 12) IN COLUMN (C), line 13) IN COLUMN (C), line 14) IN COLUMN (C), line 14) IN COLUMN (C), line 15) IN COLUMN (C), line 15) IN COLUMN (C), line 15) IN COLUMN (C), line 16) IN COLUMN (C), line 17) IN COLUMN (C), line 18) IN C		7a	34,503.
(1	¥	/a	Net unrelated business taxable income from Form 990-T, line 39: _ OSC - 10		7b	0.
	\—		Net unrelated business taxable income nonny only occupy, initia occupy	Prior Year		Current Year
		8	Contributions and grants (Part VIII, line 1h) 20 2021	213,	712.	291,342.
 	Revenue		Program service revenue (Part VIII, line 2g)		0.	0.
! 	Ϋ́	40	Investment income (Part VIII, column (A) lines 3.4 and 7d)	67,8		47,792.
l	æ	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) JOEN LITAH Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
	<u>ت</u>		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	281,		339,134.
	io T		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	65,		61,128.
,	-	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
:	Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	106,839.
:		162	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
•	→ Le	h	Total fundraising expenses (Part IX, column (D), line 25) 100,710.			
C	ΛM	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	207,4	106.	44,778.
•	•		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	273,		212,745.
C			Revenue less expenses Subtract line 18 from line 12		101.	126,389.
0			Tibrotiae loss experieses Capitalismo to materialismo.	Beginning of Currer		End of Year
, N	Assets or Balances	20	Total assets (Part X, line 16)	1,787,3		1,838,555.
		21	Total liabilities (Part X, line 26)		0.	
	골등		Net assets or fund balances. Subtract line 21 from line 20	1,787,	353.	1,838,555.
н) .		rt II				
ત	Und	er pena	alties of perjury, I doclare that I have examined this return, including accompanying schedules and	statements, and to the b	oct of my l	knowledge and belief, it is
표			ct, and complete. Declaration of preparer (other than officer) is based on all information of which pr			
بلا		**	Than the arouse		~ 30	2021
	Sig	n	Signature of officer	Dafe V	,	
Ž	Her		Mary-Walgrave, Secretary			
SCANNED			Type or print name and title			~ T
ਹੋ	-		Print/Type preparer's name Preparer's sygnature	Date ·	Check	PTIN
S	Paid	l	Cynthia Harelson		self-employed	P00732523
Ņ	∖ Prep	arer	Firm's name CYNTHIA HARELSON, CPA, PC		EIN ▶ 2	<u>0-0461947 </u>
Ž	S Use		Firm's address BOX 1537	1 6 2021)		
7	-		GRANTS PASS, OR 97528	Phone	no.541	<u>-479-9775</u>
12	Max	the I	BS discuss this return with the preparer shown above? (see instructions)RECEIVED	ENTITY DEDT		X Yes No

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

See Schedule O for Organization Mission Statement Continuation

Form **990** (2019)

	1990 (2019) Josephine Community Library Foundation 94-3051415 Page 2
(r <u>.</u> a	Statement of Program Service Accomplishments
<u>_`</u>	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission The foundation exists to help libraries in Josephine County, Oregon
	improve lives and build a stronger community.
	Improve fives and saila a scronger communicy.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
_	if "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported
4a	(Code) (Expenses \$8 , 486 • including grants of \$) (Revenue \$)
	Josephine Community Library Foundation is a 501(c)(3) organization that
	exists to secure private philanthropic support for Josephine County
	Library District which is not available through other support means.
	In 1987, concerned volunteers formed Josephine County Library
	Foundation. Independent of the county government, this nonprofit
	foundation lets people donate for the direct benefit of local
	libraries. In 2017 Josephine Community Library District was formed with
	a vote of the local population, with a permanent, dedicated tax of
	assessed property value for those living within the library district
	boundaries but are limited to an operating budget. The Josephine
	Community Library Foundation raises funds for special projects.
	(Code) (Expenses \$ 38,346. Including grants of \$ 36,129.) (Revenue \$)
4b	(Code)(Expenses \$ 38,346 · Including grants of \$ 36,129 ·) (Revenue \$) Josephine County, Oregon library support through out of district
	scholarships, building maintenance and insurance, teen room remodel and
	other projects.
4c	(Code) (Expenses \$ 25,000 • Including grants of \$ 25,000 •) (Revenue \$)
	Josephine County, Oregon library support through book purchases
4d	Other program services (Describe on Schedule O.)
_	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses \$ 71,832.
40	Total program service expenses \(\begin{align*}

Form **990** (2019)

94-3051415

1 Is the organization described in section 501(x)(3) or 4947(4)(1) (other than a private foundation)? 1 ''Yes, 'complete Schedule D, Schedule B, Schedule C Contributors' 2 Is the organization engage in direct or indirect political campaging activities, or have a section 501(ft) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II 3 X 2 X 3 X 3 X 4 X 5 Section 501(x)(6) organizations. Both the organization engage in libbying activities, or have a section 501(ft) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II 5 Is the organization assection 501(x)(4), 501(x)(6), 501(x)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revinue Procedure 88.191 If 'Yes,' complete Schedule C, Part III 5 Is the organization assection 501(x)(4), 501(x)(6), 501(x)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revinue Procedure 88.191 If 'Yes,' complete Schedule C, Part III 5 Is the complete Schedule D, Part II or section of the complete Schedule D, Part II or section of the organization receive or hold a conservation eastment, including assemble to provide advice on the distribution or mestiment assets of the organization receive or hold a conservation eastment, including assemble 20, Part III 5 Did the organization report an amount in Part X, line 10, 14 Part X, line 10	•			Yes	No
2 Is the organization region of index or midnet optimized political campaign activities, or have a section 501(ft) election in effect or midnet political campaign activities, or have a section 501(ft) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II Section 501(ft) Graphizations. Dut the organization engage in biblying activities, or have a section 501(ft) election in effect during the tax year? If 'Yes,' complete Schedule C, Part III Is the organization a section 501(c)(f), 501(c)(f), or 501(c)(f	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3 Did the organization reingage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public officer (**If***es**) "complete Schedule C, Part I at the organizations. Did the organization as ection 501(6)(3) organizations. Did the organization of 501(6)(6), or 501(6)(6), or 501(6)(6), or 501(6)(6) organization that receives membership diues, assessments, or similar amounts as defined in Revenue Procedure 88197 If **If**es**, complete Schedule C, Part II bill the organization maintain any donor advoced funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts If If **If**es**, complete Schedule D, Part II Did the organization reverse or hold a conservation assessment, including asseminate to breaere open paped, the environment, historic land areas, or historic structures? If **If**es**, complete Schedule D, Part II Did the organization maintain collections of works of arth, historical resources, or including asseminate in the previous paped, the environment, historic land areas, or historic structures? If **If**es**, complete Schedule D, Part II Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, dieth management, credit repair, or debt negotiation services? If**if**es**es**if**e		If "Yes," complete Schedule A	1	1	
section 50 ((s)) organizations. Did the organization engage in lobbying activities, or have a section 50 ((s)) electron in effect during the tax year? If "Yes," complete Schedule C, Part II as the organization a section 50 ((s)) (5) (or 50 ((c))) (5) ((c)) (5) (or 50 ((c))) (5) (or	2	· · · · · · · · · · · · · · · · · · ·	2	X	
during the tax year? If "Yes," complete Schedule Q, Part II Is the organization a section 50 (10)(8), 501(6)(8), 601(6)(8), 601(6)(8) Bit the organization a section 50 (10)(8), 501(6)(8), 601(6)(8	3		3		х
5 Is the organization a section 501 (c)(4), 501 (c)(5), or 501 (c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 if "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment or amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment or such that the environment, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV 10 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodium for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part VIII If the organization and part to any of the following questions is "Yes," then complete Schedule D, Part VIII If the organization report an amount for land, buildings, and equipment in Part X, line 102, If "Yes," complete Schedule D, Part VIII D bit the organization report an amount for investments - other securities in Part X, line 13, that is 5% or more of ris total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part X IIII III X X IIII X X II	4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
samilar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization receive or hold a conservation easement, including assements to preserve open space, the environment, histonic land draes, or histonic structures II "It'es," complete Schedule D, Part III Did the organization report an amount in Part X, in the structure amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi andowments? If "Yes," complete Schedule D, Part IV If the organization directly or through a related organization, hold assets in donor-restricted endowments or in quasi andowments? If "Yes," complete Schedule D, Part V If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for investments - program related in Part X, line 10? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other liabilities 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 XIII Did the organization report an amount for other liabilities 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 XIII Did the organization shalpity for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part XIII Did the organization shalpity for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part XIII Did the organization asc		during the tax year? If "Yes," complete Schedule C, Part II	4	x	
6 Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part I 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 8 Did the organization menus collections of works of art, historical ressures, or other similar assets? If "Yes," complete Schedule D, Part II 9 Did the organization in amount in Part X, line 21, for escrow 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 negotiation services? If "Yes," complete Schedule D, Part IV 9 Did the organization developed to through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part VI 9 If the organization is port of the following questions is "Yes," then complete Schedule D, Part VI, VII, VIII, VIII, VII, VIII, VI	5		5		х
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or in quasi endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 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 d 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 VIII 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 XIII Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 110	10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
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1c X Form **990** (2019)

	1990 (2019) Josephine Community Library Foundation 94-3051	<u>.415</u>	Р	age 4
Pa	rt IV Checklist of Required Schedules (continued)		1	T
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			<u> </u>
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	Ì		ĺ
	Schedule J	23		Х
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			l <u></u>
	Schedule K. If "No," go to line 25a	24a	<u> </u>	X
	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			
a	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c	\vdash	
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240	 	-
200	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	1		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	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%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
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			v
••	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	-	Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
-	instructions, for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
a	"Yes," complete Schedule L, Part IV	28a		х
ь	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?/f			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		
5 4	Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			,,
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		x	1
Pa	Note: All Form 990 filers are required to complete Schedule O rt V Statements Regarding Other IRS Filings and Tax Compliance	38		<u></u>
- 4	Check if Schedule O contains a response or note to any line in this Part V			
	Silvertin Selection & Committee of the Committee of the Silvertin of the Committee of the Silvertin of the S		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	,		
b		<u> </u>		
_	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		1	

(gambling) winnings to prize winners?

	990 (2019) Josephine Community Library Foundation 94-305	1415	, ь	age 5
Pa	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,		1	111
	filed for the calendar year ending with or within the year covered by this return 2a	1		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	\ <u> </u>	X
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			_
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			\vdash
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	1		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	 	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor	? 7a	_	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	 	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year	1.		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	-	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C3			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			i i
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
11	Section 501(c)(12) organizations. Enter:	7		1
а	Gross income from members or shareholders		i l	
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1		
	amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	7		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans	1		
С	Enter the amount of reserves on hand	7		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N			1
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X

If "Yes," complete Form 4720, Schedule O

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Page
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

	Objects (Orbitally Orbitally Orbital			X
Sec	Check if Schedule O contains a response or note to any line in this Part VI tion A. Governing Body and Management			
000	tion A. doverning body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 14		163	140
	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 O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
-	of officers, directors, trustees, or key employees to a management company or other person?	3	х	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Х	_
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, 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	X	
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 reached 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 Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
þ	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	L	<u> </u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in 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	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			17.
	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b	<u> </u>	Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			X
	taxable entity during the year?	16a		^
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			ĺ
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	401		
~	exempt status with respect to such arrangements?	16b	ļ	
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed OR			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3	s only	ı) avaıl	able
	for public inspection. Indicate how you made these available. Check all that apply			
46	Own website X Another's website X Upon request Upon request Other (explain on Schedule O)	، اند اند		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	u finai	icial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records ▶ Sue Beacham - 541-441-7123			
	7045 Monument Drive, Grants Pass, OR 97526			

		•
Form	990	(2019)

Josephine Community Library Foundation

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent 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 instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) Name and title (1) Judy Christensen	(B) Average hours per week (list any hours for related organizations below line)	stee or director	not c , unle cer an	Pos heck ss pe	more rson	than is bot or/trus	h an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	hours per week (list any hours for related organizations below line)	offi	not c , unle cer an	heck ss pe	more rson	than is bot	h an	'	•	
(1) Judy Christensen	week (list any hours for related organizations below line)	offi	cer an					Compensation	Compensation	
(1) Judy Christensen	(list any hours for related organizations below line)	al trustee or director	aat					l from I	from related	other
(1) Judy Christensen	related organizations below line)	at trustee or dire	aat			ı		the	organizations	compensation
(1) Judy Christensen	organizations below line)	al trustee (89			喜		organization	(W-2/1099-MISC)	from the
(1) Judy Christensen	below line)	를	Ĭ			Bens		(W-2/1099-MISC)		organization
(1) Judy Christensen	line)		lonal		aloge	e com				and related
(1) Judy Christensen		pland	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
	1.00	Ť	▐▔	3	* -	1 0	<u> </u>			
Director		X						٥.ا	0.	0.
(2) Susan Cohen	2.00				<u> </u>	✝	\vdash	-		
Vice President		X		х			ŀ	0.	0.	0.
(3) Mary Walgrave	2.00									
Secretary		Х		Х				0.	0.	0.
(4) Boyd Peters	1.00					<u> </u>				
Director		X						0.	0.	0.
(5) Randall Richardson	2.00									··········
Director	"	X						0.	0.	0.
(6) Grant Medley	2.00									
Treasurer		X						0.	0.	0.
(7) David Mannix	1.00							"		
Director		X						0.	0.	0.
(8) Steve Swearingen	1.00			ĺ						
Director		Х						0.	0.	0.
(9) Sue Beacham	10.00									
Bookkeeper		Х				L		9,122.	0.	0.
(10) Dennis James	1.00							_		
Director		Х	Щ					0.	0.	0.
(11) Sara Katz	1.00							_		_
Director	1 00	Х						0.	0.	0.
(12) Bill Kohn	1.00	,,								•
Director		Х	_	\Box		<u> </u>		0.	0.	0.
(13) Shad Shriver	2.00	,,		χ,				ا م		•
President	1.00	X		Х				0.	0.	0.
(14) Doug Walker	1.00	v					i	ا م	_	0
Director (15) Cynthia Harelson CPA	0.50	Х	Н	\dashv		\vdash		0.	0.	0.
(15) Cynthia Harelson CPA CPA-Paid preparer	0.30	x						1,250.	0.	^
(16) Denise Kalic	1.00	^	\vdash	\dashv	-	Н		1,250.	U•	0.
Director	1.00	х						0.	0.	0.
(17) Rebecca Stolz	40.00	₽		\dashv		Н		U •		
Executive Director	10.00	х		\mathbf{x}				24,695.	0.1	0.

A Name and title	Part VII Section A. Officers, Directors, Trus					_		_	Foundation Compensated Employe	es (continued)			Page 8
(list any) hours for related organizations (w.2/1099-MISC) compensation from the organizations (w.2/1099-MISC) compensation from the organizations (w.2/1099-MISC) compensation and related organizations x x x x x x x x x x x x x x x x x x	` (A)	(B) Average hours per	(do	not c	Pos heck ss pe	c) ition more rson	than	one h an	(D) Reportable compensation	(E) Reportable compensation		Estir amo	nated unt of
(18) Reacher Lydon Seecutive Director (former) X X 17,769		(list any hours for related organizations below line)	⊢						the organization	organizations	5)	compe fror organ and r	ensation n the lization related
11 12 12 13 14 15 15 15 15 15 15 15		40.00							4.5.56				
Interium Exec Director/grant writer	· · · · · · · · · · · · · · · · · · ·	40.00	X	_	X	_	<u> </u>	_	17,769.		<u>0 - </u>		0.
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization Ves No	·	40.00	х						49,770.		ο.		0 .
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization Ves No													
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c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization Ves No											_		. — . –
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c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization Ves No													
d Total (add lines 1b and 1c) 102,606. 10. 102 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization yes No 102 In the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year (A) Name and business address NONE Description of services Compensation 2 Total number of independent contractors (including but not limited to those listed above) who received more than	1b Subtotal		•		· · ·			>					0.
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization. Yes No Joint the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Joint any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year (A) Name and business address NONE Description of services Compensation Total number of independent contractors (including but not limited to those listed above) who received more than		II, Section A											
Yes No No No No No No No N		not limited to th	ose	liste	ed a	bove	e) wi	no re	*************************************	<u> </u>	_		- 0
Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year (A) (B) (C) Name and business address NONE Description of services 2 Compensation 2 Total number of independent contractors (including but not limited to those listed above) who received more than												Τv	es No
For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 X Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year (A) (B) (C) Compensation Compensation Total number of independent contractors (including but not limited to those listed above) who received more than			ee, I	cey e	emp	loye	e, o	r hig	hest compensated emp	oloyee on			<u> </u>
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year (A) (B) (C) Compensation Name and business address NONE Description of services 2 Total number of independent contractors (including but not limited to those listed above) who received more than	4 For any individual listed on line 1a, is the s	um of reportab								the organization	ļ		
Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year (A) (B) (C) Compensation NONE Description of services Compensation 2 Total number of independent contractors (including but not limited to those listed above) who received more than	5 Did any person listed on line 1a receive or	accrue compe	nsat	ion f	from	any	unr			idual for services			
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year (A) (B) (C) Compensation Compensation Compensation Total number of independent contractors (including but not limited to those listed above) who received more than		ipiete Scriedur	<i>E J 1</i>	0/ 30	ucn	pers	SUIT					<u> </u>	
(A) Name and business address NONE Description of services Compensation 2 Total number of independent contractors (including but not limited to those listed above) who received more than											ensa	ation fro	m
2 Total number of independent contractors (including but not limited to those listed above) who received more than	(A)					VILLI	OI W		(B)		C		ation
			111	2111									
					•								
	·	-	ot li	mıte	d to		_	stec	l above) who received n	nore than			

Pa	rt V	Statement of Revenue				
	<u>. </u>	Check if Schedule O contains a response or note to any line		(m)	(0)	
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
nts	1 8	a Federated campaigns 1a				
Contributions, Gifts, Grants and Other Similar Amounts	1	b Membership dues 1b				\
S, (•	c Fundraising events 1c				
Giff	(d Related organizations 1d				
ıs,	•	e Government grants (contributions)				
er S	1	f All other contributions, gifts, grants, and				
έξ		similar amounts not included above 1f 291,342.		i		
ont nd (g Noncash contributions included in lines 1a-1f 1g \$ 10,136.	201 242			ĺ
<u>a</u> C		h Total. Add lines 1a-1f	291,342.			
		Business Code				ļ!
ice	2 :					
en Tue		b				
T S		<u> </u>				· · · · · · · · · · · · · · · · · · ·
gra Re		d				
Program Service Revenue		f All other program service revenue				
		g Total. Add lines 2a-2f				
	3					<u> </u>
		other similar amounts)	34,503.	•	34,503.	
	4	·				
į	5	Royalties				
		(i) Real (ii) Personal				
	6	a Gross rents 6a				l . i
		b Less rental expenses 6b				
		c Rental income or (loss) 6c				
		d Net rental income or (loss)				
	7 :	a Gross amount from sales of (i) Securities (ii) Other				
		assets other than inventory 7a 325,578.				
ø)	١	b Less: cost or other basis				
ž		and sales expenses 76 312, 289. c Gain or (loss) 7c 13, 289.				
Other Revenue			13,289.	13,289.		ļ <u>-</u>
r. T		d Net gain or (loss) a Gross income from fundraising events (not	13,203.	13,203.		
Ę.		including \$ of				
•		contributions reported on line 1c) See				
		Part IV, line 18				
		b Less: direct expenses 8b				
		c Net income or (loss) from fundraising events				
	9 :	a Gross income from gaming activities See				
		Part IV, line 19				
	ı	b Less direct expenses 9b				
	,	c Net income or (loss) from gaming activities			·	
	10	a Gross sales of inventory, less returns				
		and allowances 10a				
		b Less cost of goods sold 10b	· <u></u>			ļ!
		c Net income or (loss) from sales of inventory				
Sn		Business Code				<u> </u>
er e	11					
ilar ven		b				
Miscellaneous Revenue		d All other revenue				
Σ		e Total. Add lines 11a-11d				
	12	Total revenue. See instructions	339,134.	13,289.	34,503.	0.
93200	_	-20-20		- <u></u>		Form 990 (2019)

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX X (A) Total expenses (D) Fundraising Do not include amounts reported on lines 6b, Program service Management and 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations 61,128 61,128. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 102,605. 7,427. 28,934. 66,244. trustees, and key employees 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 4,234. 423. 1,059. 2,752. 10 Payroll taxes Fees for services (nonemployees) a Management 1,517. 1,517. **b** Legal 744. 74. 484. c Accounting 186. d Lobbying e Professional fundraising services. See Part IV, line 17 Investment management fees g Other (If line 11g amount exceeds 10% of line 25, 23,776. 5,104. column (A) amount, list line 11g expenses on Sch O.) 18,672. 3,245. Advertising and promotion 3,245. 12 1,234 5,618. 7,345. 493. Office expenses 13 2,434. 2,434. Information technology 14 15 Royalties 16 Occupancy 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 21 Payments to affiliates 22 Depreciation, depletion, and amortization 1,720. 1,720 23 Insurance 24 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 U.) 2,217. 2,217. Library insurance and permits and fe 1,505 License, 70 174. 1,261. c Dues and training 275 275. d e All other expenses 212,745. 71,832. 40,203. 100,710. Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. If following SOP 98-2 (ASC 958-720)

Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) End of year Beginning of year 4,627. 63,507. Cash - non-interest-bearing 1 1 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 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 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other 406,285 basis Complete Part VI of Schedule D 10a 406,285. 406,285. b Less accumulated depreciation 10b 10c 1,376,441. 1,316,363. 11 Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 13 Investments · program-related See Part IV, line 11 13 14 Intangible assets 14 0. 52,400. 15 Other assets See Part IV, line 11 15 1,787,353. 1,838,555. 16 Total assets. Add lines 1 through 15 (must equal line 33) 16 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 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 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 Ō. 0. Total liabilities. Add lines 17 through 25 26 26 Organizations that follow FASB ASC 958, check here > X entro i Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 358,761. 807,330. Net assets without donor restrictions 27 980,023. 1,479,794. Net assets with donor restrictions 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 31 Retained earnings, endowment, accumulated income, or other funds 31 1,838,555. 1,838,555. 1,787,353. Total net assets or fund balances 1,787,353. Total liabilities and net assets/fund balances

Form	990 (2019) Josephine Community Library Foundation	94-	<u>30</u> 31413	Pa	ge 12			
Pa	t XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI							
		1	-					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	33	<u>9,1</u>	34.			
2	Total expenses (must equal Part IX, column (A), line 25)	2			45.			
3	Revenue less expenses Subtract line 2 from line 1	3			89.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,78	<u>7,3</u>	<u>53.</u>			
5	Net unrealized gains (losses) on investments	5	<7.	<u>5,1</u>	87 . :			
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32,							
	column (B))	10	1,83	8,5	<u>55.</u>			
Pa	t XII Financial Statements and Reporting				$\overline{}$			
	Check if Schedule O contains a response or note to any line in this Part XII		 , ,		ᆜ			
				Yes	No			
1	Accounting method used to prepare the Form 990 X Cash — Accrual — Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O							
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	d on a						
	separate basis, consolidated basis, or both				ŀ			
	Separate basis Consolidated basis Both consolidated and separate basis				لــيــا			
þ	Were the organization's financial statements audited by an independent accountant?		2b		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			1 1			
	consolidated basis, or both							
	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	e audit,	1 1					
	review, or compilation of its financial statements and selection of an independent accountant?		2c		 -			
_	If the organization changed either its oversight process or selection process during the tax year, explain on Scl							
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Auc			_v			
	Act and OMB Circular A-133?		3a		X			
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	ired aud						
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	000	(2245)			
			Form	330	(2019)			

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization **Employer identification number** Josephine Community Library Foundation 94-3051415 Part I Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 12, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university 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). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) Is the organization listed (III) Type of organization (v) Amount of monetary (vi) Amount of other (i) Name of supported (described on lines 1-10 support (see instructions) organization support (see instructions) Yes No above (see instructions))

Schedule A (Form 990 or 990 EZ) 2019 Josephine Community Library Foundation 94-3051415 Page 2 Part II 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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received (Do not								
	include any "unusual grants.")	8,615.	9,992.	117,306.	213,712.	155,358.	504,983.		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge								
4	Total. Add lines 1 through 3	8,615.	9,992.	117,306.	213,712.	155,358.	504,983.		
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)						99,341.		
6	Public support. Subtract line 5 from line 4						405,642.		
	ction B. Total Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total		
	Amounts from line 4	8,615.	9,992.	117,306.	213,712.	155,358.	504,983.		
	Gross income from interest,	•	· · · · · · · · · · · · · · · · · · ·	<u> </u>	· · ·				
_	dividends, payments received on								
	securities loans, rents, royalties,								
	and income from similar sources	5,584.	7,526.	22,355.	32,418.	34,503.	102,386.		
9	Net income from unrelated business	<u>-</u>	•			•	•		
_	activities, whether or not the								
	business is regularly carried on								
10	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part VI)								
11	Total support. Add lines 7 through 10						607,369.		
12		etc (see instruction	ons)			12			
	First five years. If the Form 990 is for	•	•	d. fourth, or fifth ta	ax vear as a sectio				
	organization, check this box and stop	-		-, ·····	, ,				
Sec	ction C. Computation of Publ	ic Support Pe	rcentage		•	, ,			
14	Public support percentage for 2019 (line 6, column (f) di	ivided by line 11, o	column (f))		14	66.79 %		
	Public support percentage from 2018			, , ,		15	67.63 %		
	33 1/3% support test - 2019. If the			n line 13, and line	14 is 33 1/3% or n				
	stop here. The organization qualifies					,	▶ X		
ь	33 1/3% support test - 2018. If the		<u>-</u>		line 15 is 33 1/3%	or more, check th	-		
		-					▶□		
17a	and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,								
	and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization								
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization								
ь	10% -facts-and-circumstances tes	ū	•		J	17a, and line 15 is	10% or		
	more, and if the organization meets the	-							
	organization meets the "facts-and-circ								
18	~		-						
	B Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2019								

Schedule A (Form 990 or 990-EZ) 2019 Josephine Community Library Foundation 94-3051415 Page 3 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(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

Sec	ction A. Public Support	elow, please comp	piete Part II.)				
	endar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Gifts, grants, contributions, and	10/10/10	(5/25/5	1 (5/251)	(4) 23 13	(0/20.0	(i) Total
	membership fees received (Do not	 -				/	1
	include any "unusual grants ")	 -					
2	Gross receipts from admissions,		· · ·	<u> </u>		 	
_	merchandise sold or services per-	 -		İ	1		
	formed, or facilities furnished in				1		
	any activity that is related to the organization's tax-exempt purpose	!					
2	Gross receipts from activities that			 	 	/	
3	are not an unrelated trade or bus-				/	1	
	iness under section 513				/		
				 	 	+	
4	Tax revenues levied for the organ-					İ	
	ization's benefit and either paid to						
	or expended on its behalf				_ /		
5	The value of services or facilities						
	furnished by a governmental unit to				<i>y</i>		
	the organization without charge				<u> </u>		
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons				1		
b	Amounts included on lines 2 and 3 received				1		
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b		,	X			
8	Public support. (Subtract line 7c from line 6.)		/				
	ction B. Total Support					· · · · · ·	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,					1	
	dividends, payments received on					İ	
	securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income			1		†	-
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b			1			
	Net income from unrelated business			1	-	··	
	activities not included in line 10b,				1		
	whether or not the business is regularly carried on						
12	Other income Do not include gain	/			 		
-	or loss from the sale of capital			İ	i		
12	assets (Explain in Part VI)			 		 	
	Total support. (Add lines 9, 10c, 11, and 12)	Aba annoncessario			<u> </u>	501/-)/0)	
1-4	First five years. If the Form 990 is for check this box and stop here	the organization s	s nirst, second, tin	ira, iourtii, or iiitii i	iax year as a secti	on 50 r(c)(3) organ	ization,
Sec	ction C. Computation of Publi	ic Support Pe	rcentage				
	Public support percentage for 2019 (li		·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·	- column (f)		145	0/
	, , , , , , , , , , , , , , , , , , ,			Column (ij)		15	<u>%</u>
	Public support percentage from 2018 ction D. Computation of Inves			· · · · · · · · · · · · · · · · · · ·		10	%
	Investment income percentage for 20				 	17	
	, · · · ·	·		iirie 13, column (i))			<u>%</u>
18	/ '					18	<u>%</u>
19a	33 1/3% support tests - 2019. If the	_					1 / IS not
	more than 33 1/3%, check this box ar	•	•				
b	33 1/3% support tests - 2018. If the	-					
	line 18 is not more than 33 1/3%, che		•	,		•	
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see in	structions	

Schedule A (Form 990 or 990 EZ) 2019 Josephine Community Library Foundation 94-3051415 Page 4

Part IV Supporting Organizations

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

Section A. All Supporting (Organizations
-----------------------------	---------------

	tion A. All Supporting Organizations		T.	
	A seall of the season of the s		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by	- <u>-</u>	 -	
_	class or purpose, describe the designation If historic and continuing relationship, explain	1	├—	
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
_	organization was described in section 509(a)(1) or (2)	2	├	
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer		 -	
	(b) and (c) below	3a	├	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the	- 		
	organization made the determination	3b	 	
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c	ļ	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations	4b	ļ	
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	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,		1	
	(iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action	l		
	was accomplished (such as by amendment to the organizing document)	5a	<u> </u>	
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class			
	benefited by one or more of its supported organizations, or (III) other supporting organizations that also	1	ļ	
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in	<u> </u>		
	Part VI.	6		
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		l	
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?			
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8		
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		l	
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			
_	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit			
-	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
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			

10a

10b

supporting organizations)? If "Yes," answer 10b below

determine whether the organization had excess business holdings)

b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

	edule A (Form 990 or 990 EZ) 2019 Josephine Community Library Foundation 94-30	<u>5141</u>	.5 p	<u>age 5</u>
Ра	rt IV 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 in (b) and (c)	<u></u>		
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	_11b		
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	1		
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	· · · · · · · · · · · · · · · · · · ·			
_	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		<u> </u>
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		ļ	
	supervised, or controlled the supporting organization	2		
Sec	tion C. Type II Supporting Organizations	_		
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	ĺ		
	the supported organization(s)	1		
Sec	tion D. All Type III Supporting Organizations	· · · ·		Щ
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		162	140
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax		Ì	
	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		1	l
	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 in (2), did the organization's supported organizations have a			l
	significant voice in the organization's investment policies and in directing the use of the organization's			l
	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		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yeatsee instructions			
а	The organization satisfied the Activities Test Complete line 2 below			
ь	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 government entity (see ins	tructions	3)	
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		103	-140
_	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	l— <u> </u>		
	that these activities constituted substantially all of its activities	2a		
þ	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		-	
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	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? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		\longrightarrow	
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		

Sche	edule A (Form 990 or 990 EZ) 2019 Josephine Community Lib	rary	Foundation !	94-3051415 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust o	n Nov 20, 1970 (explain in	Part VI). See instructions. All
	other Type III non-functionally integrated supporting organizations must co	mplete S	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			1
	factors (explain in detail in Part VI)	<u>.l</u>		
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 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		<u> </u>
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		<u> </u>
Sect	tion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2	w. ·	
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		
	Chack have if the current year is the organization's first as a pon functional	ly intogra	stad Tuna III supporting or	nanization (see

Schedule A (Form 990 or 990-EZ) 2019

instructions)

Sche Par	dule A (Form 990 or 990 EZ) 2019 Josephine Com			4-3051415 Page 7
	: Type	(a)(a) Supporting Orga	anizations (continued)	
	on D - Distributions		_	Current Year
	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
	Administrative expenses paid to accomplish exempt purpose	es of supported organization	IS	
	Amounts paid to acquire exempt-use assets			
_5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive	9	
	(provide details in Part VI) See instructions			
9_	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(iı) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-		1	
	able cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
	From 2016			
	From 2017			
	From 2018			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			i i
	Applied to 2019 distributable amount			
_ -	Carryover from 2014 not applied (see instructions)			
_ <u></u>	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2019 from Section D,			<u> </u>
•	line 7 \$		•	
	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
	Remainder Subtract lines 4a and 4b from 4			
_ _ _	Remaining underdistributions for years prior to 2019, if			j
J	any. Subtract lines 3g and 4a from line 2. For result greater			[
	than zero, explain in Part VI. See instructions			į
	Remaining underdistributions for 2019 Subtract lines 3h			<u></u> '
6	-			
	and 4b from line 1. For result greater than zero, explain in			
 -	Part VI See instructions			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c			
8	Breakdown of line 7			<u> </u>
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
е	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

Schedule A	(Form 990 or 990-E	z) 2019 J	osephine	Community	Library	Foundation	94-3051415 Page 8
Part VI	Supplemental Part IV, Section A, line 1, Part IV, Sec	Informa lines 1, 2, tion D, line	ation. Provide the 3b, 3c, 4b, 4c, 5a and 3; Part IV	ne explanations requ a, 6, 9a, 9b, 9c, 11a /, Section E, lines 1d	uired by Part II, li , 11b, and 11c, F c, 2a, 2b, 3a, and	ne 10, Part II, line 17a oi Part IV, Section B, lines 1	717b, Part III, line 12, and 2, Part IV, Section C, /, Section B, line 1e, Part V.
	·						
						<u> </u>	
							
				· · · - · - · · - · · · · · · · · · · ·	- · · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
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		•					

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

➤ Complete if the organization is described below.
➤ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2019

Open to Public

Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations. Complete Parts I-A and B Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

•	Section 501(c	c)(4), (5), or (6) organiza	itions Complete Part III			
Nan	ne of organiza			_		ployer identification number
_		Josephi	ne Community Libr	ary Founda	tion	94-3051415
Pa	irt I-A C	omplete if the or	ganization is exempt unde	er section 501(c)	or is a section 527	organization.
			zation's direct and indirect politica	l campaign activities i	ın Part IV.	
2	Political carr	paign activity expendi	tures		•	. \$
3	Volunteer ho	ours for political campa	ign activities			
De	rt I-B C				(0)	
			ganization is exempt unde			· \$
		•	incurred by the organization under		_	· \$
		•	incurred by organization manager on 4955 tax, did it file Form 4720 fo			· · · · · · · · · · · · · · · · · · ·
	Was a corre		on 4955 tax, did it lile Form 4720 to	or this year?		Yes No
		cribe in Part IV				☐ Yes ☐ No
			ganization is exempt unde	r section 501(c)	except section 50	1(c)(3)
1		• •	d by the filing organization for sections and the section is funded and the section in the section in the section is a section in the section	•		\$
2			nization's funds contributed to oth	er organizations for se		
_	,	tion activities	. Add hare 4 and 0 Fater have a	d F 1100 DOI		\$
3	-	t function expenditure	s Add lines 1 and 2 Enter here an	a on Form 1120-POL	,	•
	line 17b					*
	-	-	1120-POL for this year?			└ Yes └ No
5			mployer identification number (EIN	•	•	0 0
		•	ition listed, enter the amount paid			•
		•	omptly and directly delivered to a additional space is needed, provide		·	arate segregated fund or a
	·		1	T		
	(а) Name	(b) Address	(c) EIN	(d) Amount paid from	1 ' '
					filing organization's funds if none, enter (contributions received and promptly and directly
					londs in none, enter s	delivered to a separate
						political organization
						If none, enter -0-
					 	
						
						_

Schedule C (Form 990 or 990-EZ) 2019 J	osephi	ne C	ommunity Li	brary Found	ation 94-	3051415 Page 2
Part II-A Complete if the orga section 501(h)).	nization is	s exe	mpt under sectio	n 501(c)(3) and fil	ed Form 5768 (election under
A Check ► ☐ If the filing organization expenses, and share	of excess lol	bying		Part IV each affiliated	group member's na	me, address, EIN,
Limits	on Lobbying	Expe			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influe	ence public oi	oinion i	grassroots lobbying)			
b Total lobbying expenditures to influe	-		• •			
c Total lobbying expenditures (add line	es 1a and 1b)				
d Other exempt purpose expenditures	6					
e Total exempt purpose expenditures	(add lines 1c	and 1	d)			
f Lobbying nontaxable amount Enter	the amount f	rom th	e following table in bot	h columns		
If the amount on line 1e, column (a) or	(b) is: 1	he lob	bying nontaxable am	ount is:		
Not over \$500,000	2	0% of	the amount on line 1e			
Over \$500,000 but not over \$1,000,	000 \$	100,00	00 plus 15% of the exc	ess over \$500,000		
Over \$1,000,000 but not over \$1,500	0,000 \$	175,00	00 plus 10% of the exc	ess over \$1,000,000		
Over \$1,500,000 but not over \$17,00	00,000	225,00	00 plus 5% of the exce	ss over \$1,500,000		
Over \$17,000,000		1,000,	000			
g Grassroots nontaxable amount (ente	er 25% of line	111				
h Subtract line 1g from line 1a If zero		•				
i Subtract line 1f from line 1c. If zero c	•				<u></u>	
j If there is an amount other than zero	·		line 1i, did the organiz	ation file Form 4720	******	
reporting section 4911 tax for this ye						Yes No
(Some organizations that	at made a se	ction 5	eraging Period Under 01(h) election do not ate instructions for li	have to complete all	of the five columns	below.
· · · · · · · · · · · · · · · · · · ·	Lobbying	Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2016	i	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount	9,0	90.			· ·	9,090.
b Lobbying ceiling amount (150% of line 2a, column(e))						13,635.
c Total lobbying expenditures	9,0	000.				9,000.
d Grassroots nontaxable amount	2,2	273.				2,273.
e Grassroots ceiling amount (150% of line 2d, column (e))						3,410.
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2019

Schedule C (Form 990 or 990-EZ) 2019 Josephine Community Library Foundation 94-3051415 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

or e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)	(b)		
of the	e lobbying activity	Yes	No	Amo	ount	
1	During the year, did the filing organization attempt to influence foreign, national, state, or	"				
	local legislation, including any attempt to influence public opinion on a legislative matter		}			
	or referendum, through the use of				'	
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total Add lines 1c through 1i					
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
_	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)(5), or s∈	ction		
	501(c)(6).					
				Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?		1			
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		-	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the	he prior yea	ar? 3			
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section	on 501(c	(5), or s∈	ction		
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	i "No" OF	₹ (b) Part	:III-A, lin	e 3, is	
	answered "Yes."					
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	ical				
	expenses for which the section 527(f) tax was paid).					
а	Current year		2a			
b	Carryover from last year		2b			
С	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and		İ			
	expenditure next year?	•	4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Pai	t IV Supplemental Information				-	
Prov	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou	p list); Part I	II-A, lines 1	and 2 (see		
ınstn	uctions), and Part II-B, line 1. Also, complete this part for any additional information					
		•				
						
				 		

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Josephine Community Library Foundation

Employer identification number 94-3051415

Pa	rt I Organizations Maintaining Donor Advise		Accounts.Complete if the
	organization answered "Yes" on Form 990, Part IV, Iir		
		(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)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised fu	ınds
	are the organization's property, subject to the organization's	-	Yes No
6	Did the organization inform all grantees, donors, and donor a	<u> </u>	
	for charitable purposes and not for the benefit of the donor of	• •	•
	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990, Part I	
1	Purpose(s) of conservation easements held by the organizat		·
	Preservation of land for public use (for example, recrea	· ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	torically important land area
	Protection of natural habitat	· 	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a	conservation easement on the last
	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 str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the orga	anization during the tax
	year >		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	t holds?	L Yes L No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conserva	tion easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation e	easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)(4)	— —
	and section 170(h)(4)(B)(ii)?		└── Yes └── No
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expense state	ement and
	balance sheet, and include, if applicable, the text of the foot	note to the organization's financial statements	that describes the
-	organization's accounting for conservation easements	7.A. 119.4	. 0::11
Ра	rt III Organizations Maintaining Collections o		r Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under FASB ASC 95	· ·	
	of art, historical treasures, or other similar assets held for put		rance of public
	service, provide in Part XIII the text of the footnote to its fina		
b	If the organization elected, as permitted under FASB ASC 95	•	
	art, historical treasures, or other similar assets held for public	c exhibition, education, or research in furtheran	ice of public service,
	provide the following amounts relating to these items		
	(i) Revenue included on Form 990, Part VIII, line 1		► \$ ► \$
_	(ii) Assets included in Form 990, Part X	and the second s	
2	If the organization received or held works of art, historical tre		n, provide
	the following amounts required to be reported under FASB A	AGU 908 relating to these items	▶ ¢
	Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X		•
n	ASSETS DICTURED IN FORM 990 PARTA		n

Sche	dule D (Form 990) 2019 Josephi	ne Communi	ty L	ibrary	Found	ation	า	<u>94-30</u>	5141	5 Page 2
Pa	rt III Organizations Maintaining C									ued)
3	Using the organization's acquisition, access	on, and other record	ds, check	any of the	following that	at make s	ignificant	use of its	;	
	collection items (check all that apply)									
а	Public exhibition	d	י וווי	Loan or exc	hange progr	am				
b	Scholarly research	е	. L. (Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how th	ey further tl	he organizat	ion's exei	mpt purp	ose in Par	t XIII	
5	During the year, did the organization solicit of					ner sımılar	assets		_	
	to be sold to raise funds rather than to be m								Yes	No_
Pa	t IV Escrow and Custodial Arran		ete if the	organizatio	n answered	"Yes" on	Form 99	0, Part IV,	line 9, or	
	reported an amount on Form 990, Pa	rt X, line 21								
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for d	contribution	s or other as	ssets not	ıncluded		_	
	on Form 990, Part X?							L	Yes	L∐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing t	able						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						_1e			
f	Ending balance						1f			
	Did the organization include an amount on F	· ·					ity?	L.	Yes	No ليـــا
	If "Yes," explain the arrangement in Part XIII									
Pa	t V Endowment Funds. Complete	f the organization an	swered	"Yes" on Fo	rm 990, Par					
	_	(a) Current year		rior year	(c) Two yea		·	ears back		years back
1a	Beginning of year balance	1,376,441.	1,	,245,218.		1,467.		48,220.		527,241.
b	Contributions	45,271.		63,398.		6,312.		204,235.		10,227.
С	Net investment earnings, gains, and losses	<31,349.	^	67,825.	4	7,439.	1	69,012.		<89,2 48. >
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs	74,000.								
f	Administrative expenses									
g	End of year balance	1,316,363.	1,	376,441.	1,24	5,218.		21,467.		448,220.
2	Provide the estimated percentage of the curr	rent year end baland	e (line 1ç	g, column (a)) held as					
а	Board designated or quasi-endowment	 	_%							
Ь	Permanent endowment	%								
C	· ————————————————————————————————————	%								
	The percentages on lines 2a, 2b, and 2c sho	•								
За	Are there endowment funds not in the posse	ssion of the organiza	ation tha	t are held ar	nd administe	ered for th	ne organi	zation	_	
	by								$\overline{}$	Yes No
	(i) Unrelated organizations								3a(i)	X
	(ii) Related organizations								3a(ıi)	X
	If "Yes" on line 3a(ii), are the related organiza								_3b	
Bo:	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		wment f	unds						
Fai										
	Complete if the organization answered									
	Description of property	(a) Cost or o		(b) Cost	-		cumulate	1	(d) Book	value
	land.	basis (investri	nent)	basis (аер	reciation		^^	250
	Land				2,350.					350.
	Buildings			∠5	6,833.				256	,833.
	Leasehold improvements	<u> </u>			7 100					100
	Equipment			<u>5</u>	7,102.				57	,102.
_	Other	<u> </u>		——					400	
ı otal	. Add lines 1a through 1e (Column (d) must e	quai ⊢orm 990, Part	x, colum	ın (B), line 1	UC)				406	,285.

Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" (
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or en	d-of-year market value
) Financial derivatives			
) Closely held equity interests	 		
Other			
(A)			
(B)			
(C)			
(D)			·
(E) (F)			
(G)			
(H)			
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.	· · · · · ·		
Complete if the organization answered "Yes" of	on Form 000 Boot IV line	11a Can Farm 000 Bank V III - 10	
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or en	d-of-vear market value
	(D) DOOR VAIGO	(3) Medice of Valuation Cost of en	o or year market value
(1)			
(3)			
(4)			
(5) (6)			
(7)			
(8)			·····
(9)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" of	on Form 000 Port IV line	11d Con Form 000 Dart V line 15	
	Description	Tid. See Form 990, Part X, line 13	(b) Book value
	resemption		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)		· ·	
(6)	_		
(7)			
(8)			
(9) otal. (Column (b) must equal Form 990, Part X, col (B) line	15)		
	13)		
Part X Other Liabilities.	on Form 000 Boot IV line	110 or 116 Con Form 000 Dort V line 06	
Part X Other Liabilities. Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11e or 11f See Form 990, Part X, line 25	
Part X Other Liabilities. Complete if the organization answered "Yes" of (a) Description of liability	on Form 990, Part IV, line	11e or 11f See Form 990, Part X, line 25	(b) Book value
Part X Other Liabilities. Complete if the organization answered "Yes" of the Complete if the Organization answered "Yes" of the Complete if the Organization answered "Yes" of the Complete in Comple	on Form 990, Part IV, line	11e or 11f See Form 990, Part X, line 25	
Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2)	on Form 990, Part IV, line	11e or 11f See Form 990, Part X, line 25	
Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2) (3)	on Form 990, Part IV, line	11e or 11f See Form 990, Part X, line 25	
Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2) (3) (4)	on Form 990, Part IV, line	11e or 11f See Form 990, Part X, line 25	
Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2) (3) (4) (5)	on Form 990, Part IV, line	11e or 11f See Form 990, Part X, line 25	
Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2) (3) (4) (5)	on Form 990, Part IV, line	11e or 11f See Form 990, Part X, line 25	
Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7)	on Form 990, Part IV, line	11e or 11f See Form 990, Part X, line 25	
Part X Other Liabilities. Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)	on Form 990, Part IV, line	11e or 11f See Form 990, Part X, line 25	
Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7)		11e or 11f See Form 990, Part X, line 25	

Schedule D (Form 990) 2019

	dule D (Form 990) 2019 Josephine Community Librar t XI Reconciliation of Revenue per Audited Financial Statem			Page 4
Par			nue per Return.	
_	Complete if the organization answered "Yes" on Form 990, Part IV, line 12:	3		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12. Net unrealized gains (losses) on investments	2a		
a b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
	Add lines 2a through 2d			
3	Subtract line 2e from line 1		3	
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		
ь	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b	•	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	
Pai	t XII Reconciliation of Expenses per Audited Financial Stater	nents With Expe	enses per Return.	
_	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1		
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1	`	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 . 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) t XIII Supplemental Information.		5	
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Pai 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any ad		Part V, line 4, Part X, line 2, Part X	I,
				-

SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

▶ Attach to Form 990.

			-
OMB No 1545-0047	2019	Open to Public	Inspection .

<u>\$</u>

X Yes

Employer identification number 94-3051415

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

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection

Josephine Community Library Foundation

General Information on Grants and Assistance

Part

criteria used to award the grants or assistance?

핡	ocedures for mon	toring the use of grant	funds in the Unite	d States	į		
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	Domestic Organ	izations and Domestic	: Governments. C	complete if the orga	inization answered "Y	es" on Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000 Part II can be duplicated if additional space is needed.	\$5,000 Part II car	be duplicated if addit	onal space is need	ded.			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash	(f) Method of valuation (book, FMV, appraisal,	(g) Description of noncash assistance	(h) Purpose of grant or assistance
				assistance	other)		
Josephine Community Library							Book purchases and
District - 200 NW C Street -	1						support of summer reading
Grants Pass, OR 97526	82-2213656	Governmental divisio	sio 25,000.	0			program
Josephine Community Library				-			
District - 200 NW C Street -							
Grants Pass, OR 97526	82-2213656	Governmental divisio	sio 15,300.	0.			Scholarships
							•
Josephine Community Library							Teen room remodel,
							Magazine racks, Memory of
Grants Pass, OR 97526	82-2213656	Governmental divisio	sio 8,161.	0.			Ruth Nixon
Josephine Community Library							
District - 200 NW C Street -							HVAC upgrade, building
Grants Pass, OR 97526	82-2213656	Governmental divisio	sio 12,667.	0.			and property maintenance.
		,					
2 Enter total number of section 501(c)(3) and government organizat	nd government o	rganizations listed in the line 1 table	e line 1 table				A
3 Enter total number of other organizations listed in the line 1 table	s listed in the line	1 table					0
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	, see the Instruct	tions for Form 990.					Schedule I (Form 990) (2019)

Page 2 (f) Description of noncash assistance 94-3051415 (e) Method of valuation (book, FMV, appraisal, other) Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed Organization requires report from organization receiving the grant, (d) Amount of non-cash assistance Josephine Community Library Foundation (c) Amount of cash grant (b) Number of recipients reporting on the use of the grant. (a) Type of grant or assistance Part I, Line 2: Schedule I (Form 990) (2019) Part III

Schedule I (Form 990) (2019)

932102 10-26-19

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

Josephine Community Library Foundation	94-3051415
Form 990, Part I, Line 1, Description of Organization Mis	sion:
and future.	
Form 990, Part VI, Section A, line 3:	
Sue Beacham effectively acts as the CFO for the Josephine	County Library
Foundation. Sue is paid as an independent contractor.	
During the 2018-19 & 19-20 year the organization hired an	interum director
while they searched for a permenant director. The interum	director was paid
as an independent contractor for the period she served in	that position.
Both of the above were under the direct supervision of the	e board.
Form 990, Part VI, Section A, line 4:	
Bylaws were updated for name change from Josephine County	Library
Foundation to Josephine Community Library Foundation effect	ctive July 1,
2019.	
Form 990, Part VI, Section B, line 11b:	
990 will be reviewed by the board at a regularly scheduled	d board meeting
prior to filing.	
Form 990, Part VI, Section B, Line 12c:	
Officers and the board are asked to review their potential	l conflicts a
minimum of annually.	
Form 990, Part VI, Section C, Line 19:	
Governing documents and financial statements are available	e to the public



Secretary of State Corporation Division 255 Capitol Street NE, Suite 151 Salem, OR 97310-1327

Phone:(503)986-2200 www filinginoregon.com

Registry Number: 059950-89

Type: DOMESTIC NONPROFIT CORPORATION

Next Renewal Date: 01/26/2020

THE JOSEPHINE COMMUNITY LIBRARY ... 200 NW C STREET GRANTS PASS OR 97526

Acknowledgment Letter

The document-you submitted was recorded as shown-below. Please review and verify the information listed for accuracy.

DocumentARTICLES OF AMENDMENT

Filed On 07/09/2019

Jurisdiction OREGON Nonprofit Type
PUBLIC BENEFIT WITH
MEMBERS

Name

JOSEPHINE COMMUNITY LIBRARY FOUNDATION

Principal Place of Business 200 NW C ST GRANTS PASS OR 97526 Registered Agent
JUDY CHRISTENSEN
527 SE M ST
GRANTS PASS OR 97526

Mailing Address
PO Box (L84
GRANTS PASS OR 97528

President
SUSAN COHEN
1624 NW OLMAR DR
GRANTS PASS OR 97526

Secretary
MARY WALGRAVE
1402 NW LAWNRIDGE
GRANTS PASS OR 97526

BYLAWS

of

THE JOSEPHINE COUNTYCOMMUNITY LIBRARY FOUNDATION, INC.

(A Nonprofit Corporation)

ARTICLE I. BOARD OF DIRECTORS

Section 1. Powers. The affairs of the corporation shall be managed by the Board of Directors. The Board may exercise all powers vested in the corporation.

Section 2. Number. The number of directors of the corporation shall not be less than eight or more than 21. The Board of Directors, by amendment of these Bylaws, may increase or decrease the number of directors, provided that no decrease in number shall have the effect of shortening the term of any incumbent. The manner of electing successor directors may be changed from time to time by amendment of these Bylaws.

Section 3. Dual Board Membership. No member of the Board of Directors of the Josephine County Community Library Foundation, except the duly named liaison of the Josephine Community Library District Board, shall serve concurrently on the board of the Josephine Community Library District.

Section 4. Election and Tenure of Office. Directors and officers shall be elected at the annual meeting of the directors. The term of each director shall be three years. Directors may be re-elected for any number of consecutive terms.

Section 5. Ex Officio Members. Ex officio non-voting members of the board shall include the Josephine Community Library Foundation executive director, the Library Director of Josephine Community Library District, and the Josephine Community Library District Board liaison.

Section 6. Vacancies. The Board of Directors shall have the power to fill any vacancy occurring in the Board.

Section 7. Committees. The Board of Directors, by motion approved by a majority of the directors in office, may designate and appoint one or more committees, which shall consist of two or more directors, which committees shall have and exercise such authority of the Board of Directors in the management of this corporation as may be delegated by the Board.

Section 8. Inactive Members. A Board member may request to become inactive at any time during his/her tenure, by submitting said request to the Board for consideration. Upon receiving said written request, the Board shall approve or disapprove by a majority vote of those Board members present at the scheduled meeting of the Board of Directors said request.

Upon approval by the Board of Directors the inactive member shall be listed as inactive. He/she shall receive copies of agendas and minutes of meetings. Inactive members have no voting rights and are not to be counted for the purpose of establishing a quorum at meetings of the Board. Inactive status of a member shall continue for up to one

calendar year from the date of approval. Further extension of inactive status shall remain discretionary with the Board of Directors.

The President may declare a member inactive at a meeting of the Board if a member is unable to attend meetings for a good cause.

- **Section 9. Meeting Attendance.** As attendance at meetings is important, if inactive or excused status has not been requested, any director who misses three consecutive regular meetings shall be asked to resign.
- **Section 10. Removal.** A director may be removed at any time, with or without cause, by the board of directors.
- **Section 11. Resignation.** A director may resign at any time by delivering written notice to the president or secretary. A resignation is effective when notice is given or upon the date specified in the notice.

ARTICLE II. MEETING OF THE BOARD OF DIRECTORS

- **Section 1. Meetings.** The annual meetings of the Board of Directors shall be held in Josephine County in September of each year, with the day and place set by the Board. Further, it is the desire of the directors to meet monthly, but at a minimum, said directors shall meet no fewer than four times annually.
- **Section 2. Special Meetings.** Special meetings of the Board of Directors may be held in Josephine County whenever called by the President or any three or more directors.
- Section 3. Meeting Notice. Notice of the time and place of any meeting of the Board of Directors shall be required. Notice of the time and place of any special meetings of the Board of Directors shall be given by the Secretary, or by the person or persons calling the meeting, by mail, telegram, e-mail, or by personal communication, over the telephone or otherwise, at least three days prior to date on which the meeting is to be held. Attendance of a director at any meeting shall constitute a waiver of notice of such meeting, except where the director attends a meeting for the purpose of objecting to the transaction of any business because the meeting is not lawfully called or convened. Neither the business to be transacted nor the purpose of any meeting of the Board of Directors need be specified in the notice or in any waiver of notice of such meeting.
- **Section 4. Quorum.** A quorum shall consist of greater than 50 percent of the body of duly elected and active directors for the transaction of business. For example, if the active board consists of 20 or 21 members, a quorum is 11. The act of the majority of directors present at a meeting at which a quorum is present shall be the act of the Board. At any meeting of the Board at which a quorum is present, any business may be transacted and the Board may exercise all of its powers.
- **Section 5. Conflict of interest.** Any member of the Board of Directors with a conflict of interest shall abstain from voting on any motion relating to that conflict and shall be required to state said conflict on an annual basis so long as said conflict continues to exist and is relevant to the conducting of business of the Board.

Section 6. Vote by Writing or Email. Any action of the Board of Directors may be taken without a meeting if a consent, in writing, setting forth the action to be taken, shall be signed by two-thirds of the directors entitled to vote with respect to the subject matter thereof. Said action may be presented to the Board by the President, Executive Director, or their designee. Said action may also be taken by means of e-mail so long as the other requirements of this article are met.

ARTICLE III. HOLD HARMLESS

This corporation shall defend, indemnify, and hold harmless, every registered agent, director or officer and his/her heirs, executors, and administrators, against liability and against expenses reasonably incurred by him/her in connection with any action, suit or proceeding to which he/she may be made a party by reason of his/her being or having been a director or officer of this corporation, except in relation to matters as to which he/she shall be finally adjudged in such action, suit or proceeding to be liable for willful misconduct. The forgoing rights shall be exclusive of other rights to which he/she may be entitled.

ARTICLE IV. OFFICERS

Section 1. Officers. The officers of the corporation shall be a President, Vice-president, Secretary, and a Treasurer (each of whom must be a director of the corporation), and such other officers and assistant officers as may be deemed necessary by the Board of Directors, each of whom shall be annually elected by the Board of Directors and shall serve until his/her successor is duly elected and qualified. In addition to the powers and duties specified below, the officers shall have powers and perform such duties as the Board of Directors may prescribe.

- Section 2. President. The President shall exercise the usual executive powers pertaining to the office of President and shall preside at meetings of the Board of Directors.
- **Section 3. Vice President.** In the absence or disability of the President, the Vice-president shall act as President.
- **Section 4. Secretary.** It shall be the duty of the Secretary to keep records of the proceedings of the Board of Directors.
- **Section 5. Treasurer.** The Treasurer shall maintain and review financial records and report to the Board of Directors monthly. He/she shall cause to be deposited all funds and other valuable effects of the corporation, in such depositories as may be designated by the Board of Directors. In general, he/she shall perform all the duties incident to the office of Treasurer.
- **Section 6. Officer Vacancies.** Vacancies in any office arising from any cause shall be filled by the Board of Directors at any regular or special meeting.
 - Section 7. Compensation. There shall be no compensation of any officer.

Section 8. Removal. Any officer elected or appointed may be removed by a majority of the full Board of Directors whenever in its judgment the best interests of the corporation will be served thereby.

ARTICLE V. ADMINISTRATIVE AND FINANCIAL PROVISIONS

Section 1. Fiscal Year. The fiscal year of the corporation shall be the period from July 1 to and including the following June 30.

Section 2. Loans. No loans shall be made by the corporation to any officer or to any director.

Section 3. Records. The corporation shall keep current and complete books and records of accounts and minutes of the proceedings of its Board of Directors. These books and records shall be available for public inspection at the office of the JCLF executive director.

Section 4. Changes to Bylaws. These Bylaws may be altered, amended or repealed by the affirmative vote of a majority of the Board of Directors at any annual or special meeting of the Board of Directors, provided notice and proposed changes or amendments are submitted in writing to each Director at least thirty days in advance of the scheduled vote.

Section 5. Annual Report. An Annual Report and Financial Statement (Form CT-12) shall be provided each year to the Attorney General of the State of Oregon.

Section 6. Check Signatures. All checks issued by the Josephine County Community Library Foundation shall bear any two signatures of duly appointed signers established by board resolution.

Section 7. Robert's Rules. The rules of procedure at meetings of the Board of Directors of the corporation shall be the rules contained in *Robert's Rules of Order on Parliamentary Procedure*, as amended, or other recognized parliamentary rules, so far as applicable and when not inconsistent with these Bylaws, the Articles of Incorporation, or any resolution of the Board of Directors.

REVISED and adopted by the Board of Directors on July 1, 2019

Board President, Josephine CountyCommunity Library Foundation