JAMES PRENDERGAST LIBRARY ASSOCIATION

FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2023 and 2022



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<u>Directors</u>
Sharn Deon Bahgat, CPA
Louann Laurito-Bahgat, CPA, CFE
Laura L. Napoli, CPA

Independent Auditor's Report

To the Board of Trustees of James Prendergast Library Association 509 Cherry Street Jamestown NY 14701

Opinion

We have audited the accompanying financial statements of the James Prendergast Library Association a nonprofit organization, which comprise the statement of financial position as of December 31, 2023, and the related statements of activities and changes in net assets, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the James Prendergast Library Association, as of December 31, 2023, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the James Prendergast Library Association and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the James Prendergast Library Association's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design
 audit procedures that are appropriate in the circumstances, but not for the purpose
 of expressing an opinion on the effectiveness of the James Prendergast Library
 Association's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the James Prendergast Library Association's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

Report on Summarized Comparative Information

We have previously audited the James Prendergast Library Association's 2022 financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated July 11, 2023. In our opinion, the summarized comparative information presented herein as of and for the year ended December 31, 2022, is consistent, in all material respects, with the audited financial statements from which it has been derived.

Bahgat & Saunt Bahgat,

Certified Public Accountants, P.C.

Fredonia, New York

June 26, 2024

JAMES PRENDERGAST LIBRARY ASSOCIATION STATEMENTS OF FINANCIAL POSITION DECEMBER 31, 2023 AND 2022

	2023	2022
<u>ASSETS</u>		
CURRENT ASSETS		
Cash and cash equivalents	\$ 196,142	\$ 310,287
Savings and short-term investments	220,051	238,616
Accounts receivable	1,116	126
Prepaid contributions to retirement system	64,852	50,492
Total Current Assets	482,161	599,395
PROPERTY AND EQUIPMENT		
Property plant & equipment		
net of accumulated depreciation	2,220,130	2,093,435
OTHER ASSETS		
Investments	7,684,802	7,094,434
Art collection	35,300	35,300
Total Other Assets	7,720,102	7,129,734
TOTAL ASSETS	\$ 10,422,393	\$ 9,822,564
<u>LIABILITIES AND NET ASSETS</u>		
CURRENT LIABILITIES		
Accounts payable	\$ 2,881	\$ 40,522
Accrued payroll liabilities	27,504	596
Accrued compensatory time	29,442	33,127
Amounts held in custody for others		1,732
Total Current Liabilities	59,827	75,977
NET ASSETS		
Without donor restrictions	10,169,221	9,446,982
With donor restrictions	193,345	299,605
Total Net Assets	10,362,566	9,746,587
TOTAL LIABILITIES AND NET ASSETS	\$ 10,422,393	\$ 9,822,564

JAMES PRENDERGAST LIBRARY ASSOCIATION STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS FOR THE YEAR ENDED DECEMBER 31, 2023 WITH COMPARATIVE TOTALS FOR THE YEAR ENDED DECEMBER 31, 2022

		2023		2022
	Without Donor Restrictions	With Donor Restrictions	Total	Total
REVENUE AND SUPPORT			:	
Foundations and trusts	\$ 82,432	\$ 103,920	\$ 186,352	\$ 252,190
Section 259 Tax Collection	350,000		350,000	350,000
New York State & other governments	11,154	31,539	42,693	224,083
Chautauqua-Cattaraugus Library System	167,255	347	167,255	168,113
Gifts and donations	3,140	(≆)	3,140	5,279
In-kind Advertising	3,500		3,500	16,000
Fundraising	125,418	3 2 3	125,418	126,444
Fines and fees	16,218	3	16,218	25,086
Interest and dividend income	297,545	: = 3	297,545	261,197
Net realized and unrealized gains	•		,	,
(losses) on investments	565,781		565,781	(1,417,038)
Other income	13,207	ST.V	13,207	4,281
Net assets released from restriction	241,719	(241,719)	,	=
Total Revenue and Support	1,877,369	(106,260)	1,771,109	15,635
EXPENSES				
Library Operations	1,031,981	-	1,031,981	1,060,473
Management and General	112,785	<u> </u>	112,785	101,110
Fundraising	10,364	±	10,364	12,694
Total Expenses	1,155,130		1,155,130	1,174,277
CHANGE IN NET ASSETS	722,239	(106,260)	615,979	(1,158,642)
NET ASSETS, at beginning of year	9,446,982	299,605	9,746,587	10,905,229
NET ASSETS, at end of year	\$ 10,169,221	\$ 193,345	\$ 10,362,566	\$ 9,746,587

JAMES PRENDERGAST LIBRARY ASSOCIATION STATEMENTS OF FUNCTIONAL EXPENSES FOR THE YEAR ENDED DECEMBER 31, 2023

WITH COMPARATIVE TOTALS FOR THE YEAR ENDED DECEMBER 31, 2022

5.	Programs	Supportin	g Activities	Totals		
	Library Operations	Management and General	Fundraising	2023	2022	
Salaries and wages	\$ 565,965	\$ 53,483	\$ 5,063	\$ 624,511	\$ 598,596	
NYS Retirement	41,241	8,450	800	50,491	56,194	
Books and periodicals	64,550	(2)	\ <u>+</u>	64,550	72,200	
Grants program expenses	38,848		-	38,848	60,709	
Employee benefits	54,473	3,744	354	58,571	50,305	
Utilities	34,844	8,711	_	43,555	46,317	
Payroll taxes	41,470	4,279	405	46,154	44,276	
Insurance	18,285	4,571	-	22,856	20,905	
Repairs and maintenance	25,064	6,266	(2)	31,330	30,797	
Legal and professional	23,389	(B)	Ξ,	23,389	15,199	
Office expenses	9,900	1,856	621	12,377	12,074	
Computers and software	7,008	- 	23	7,008	6,955	
Fundraising materials	-	<u>.</u> .	3,121	3,121	5,567	
DVD's	7,093	:#X	:=:	7,093	8,133	
Audio	1,350	20	*	1,350	3,756	
E-books	(2)	120	2 1	27	12,165	
Online Databases	3,470		≅ .	3,470	6,696	
Custodial supplies	3,733	933	(-);	4,666	3,331	
Programs	5,832	-	18 3.	5,832	6,053	
In-Kind Advertising	3,500	3	ş	3,500	16,000	
Miscellaneous expenses	5,855	1,464		7,319	15,183	
Total expenses before depreciation	955,870	93,757	10,364	1,059,991	1,091,411	
Depreciation	76,111	19,028		95,139	82,866	
Total expenses	\$ 1,031,981	\$ 112,785	\$ 10,364	\$ 1,155,130	\$ 1,174,277	

JAMES PRENDERGAST LIBRARY ASSOCIATION STATEMENTS OF CASH FLOWS FOR THE YEARS ENDED DECEMBER 31, 2023 AND 2022

		2023	2022
Cash flows from operating activities: Change in net assets	ď	615.070	f (1.150.642)
Change in het assets	\$	615,979	\$ (1,158,642)
Adjustments to reconcile change in net assets to			
net cash provided by (used in) operating activities:			
Depreciation		95,139	82,866
Net realized gains		(43,657)	(236,308)
(Increase)/Decrease in the following:		` ' '	(, , , , , , , , , , , , , , , , , , ,
Prepaid retirement system contribution		(14,360)	5,702
Accounts receivable		(1,116)	
Accounts payable		(37,641)	37,977
Sales tax payable		12	(1,520)
Amounts held in custody for others		(1,732)	, , ,
Accrued payroll liabilities		26,908	(3,694)
Accrued Compensatory time		(3,685)	3,120
Net cash (used in) provided by operating activities		635,835	(1,270,499)
Cash flows from investing activities			
Purchases of property and equipment		(221,834)	(206,269)
Purchases of investments		(848,747)	(1,234,783)
Proceeds from sales of investments		302,036	2,877,861
Net cash provided by (used in) investing activities	-	(768,545)	1,436,809
Net change in cash and cash equivalents		(132,710)	166,310
·		(122,110)	100,510
Cash and cash equivalents, beginning of year	3	548,903	382,593
Cash and cash equivalents, end of year		416,193	\$ 548,903

NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

NATURE OF OPERATIONS

The James Prendergast Library Association ("The Association") is a not-for-profit agency which operates and provides library services in Jamestown, New York. The James Prendergast Library is an Association Library District. This model is available to libraries currently chartered as Association Libraries that do not want to relinquish their "private" status by re-chartering as a School District Public Library or a Special Legislative District Public Library. Although an Association Library District is not a public entity, the library can emulate the basic characteristics of a public library district by providing a process for the library to secure operating revenue through a public budget vote.

The Association receives revenue from the State of New York, the City of Jamestown, New York, Chautauqua-Cattaraugus Library System, Section 259 tax levy collection, fundraising activities and contributions from foundations and trusts, charitable organizations, corporations and individuals.

BASIS OF ACCOUNTING

The financial statements of the Association have been prepared on the accrual basis of accounting and accordingly, reflect all significant receivables, payables, and other liabilities.

BASIS OF PRESENTATION

The Association is required to report information regarding its financial position and activities according to two classes of net assets: net assets with donor restrictions and net assets without donor restrictions which are described as follows:

With Donor Restriction

Donor restricted net assets are subject to donor imposed stipulations that may or will be met either by actions of the Association and/or passage of time. When a restriction expires, donor restricted net assets are reclassified to unrestricted net assets and reported in the Statements of Activities and Changes in Net Assets as net assets released from restrictions.

Additionally, the Association has net assets subject to donor imposed stipulations that require the net assets be maintained permanently by the Association. Generally, the donors of these assets permit the Association to use all or a part of the income earned on any related investments for general or specific purposes. See Note 5.

Without Donor Restriction

Net assets without donor restriction are not subject to donor imposed stipulation.

NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

PRIOR YEAR SUMMARIZED COMPARATIVE INFORMATION

The financial statements include certain prior year summarized information in total but not by net asset class. Such information does not include sufficient detail to constitute a presentation in conformity with U.S. generally accepted accounting principles. Accordingly, such information should be read in conjunction with the Association's financial statements for year ended December 31, 2022, from which the summarized information was derived.

INVESTMENTS

Investments are reported at market value on the Statements of Financial Position. Realized and unrealized gains and losses on investments are reflected in the Statements of Activities, net of investment fees.

RESTRICTED AND UNRESTRICTED REVENUE

Contributions are recognized when the donor makes a promise to give to the Association that is, in substance, unconditional. Contributions that are restricted by the donor are reported as increases in net assets without donor restrictions if the restrictions expire in the fiscal year in which the contributions are recognized. All other donor-restricted contributions are reported as increases in net assets with donor restrictions depending on the nature of the restrictions. When a restriction expires, net assets with donor restrictions are reclassified to net assets without donor restriction.

DONATED SERVICES

Donated services are recognized as contributions at fair value if the services (a) create or enhance nonfinancial assets or (b) require specialized skills, which are performed by individuals with those skills and would otherwise be purchased by the Association. The library received donated advertising in 2023 of \$3,500 and \$16,000 in 2022. The donation was valued on the provider's fair market value of providing radio advertising to customers. Numerous volunteers also provided governance and fundraising services throughout the year that are not recognized as contributions in the financial statements since the recognition criteria were not met.

NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

PROPERTY, EQUIPMENT AND DEPRECIATION

Property and equipment are stated at cost. Donations of property and equipment are recorded as contributions at fair value at the date of donation. Such donations are reported as increases in net assets without donor restriction unless the donor has restricted the donated asset to a specific purpose. Assets donated with explicit restrictions regarding their use and contributions of cash restricted for the acquisition of property, equipment or leasehold improvements, are reported as with donor restriction. At the time donated or acquired assets are placed in service, the Association reclassifies net assets with donor restriction to net assets without donor restriction. Property and equipment are depreciated when placed in service over estimated useful lives using the straight-line method. The Association's policy is to capitalize acquisitions of \$1,000 or more and having estimated useful lives of more than one year.

INCOME TAXES

The Association is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code. However, income from certain activities not directly related to the Association's tax-exempt purpose is subject to taxation as unrelated business income. The Association did not have any unrelated business income in 2023 or 2022. In addition, the Association qualifies for the charitable contribution deduction under Section 170(b)(1)(A) and has been classified as an organization other than a private foundation under Section 509(a)(2).

COMPENSATORY TIME

Employees are granted vacation in varying amounts based on date of hire, exempt (professional) versus non-exempt (non-professional) status and length of service. Sick leave is granted at a rate of 12 days per year, based on full-time employment, and may be accrued to a maximum of 165 days. Unused sick leave credits may be used at the time of retirement to extend years of service credit, but not to qualify for early retirement.

USE OF ESTIMATES

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Concluded)

CASH AND CASH EQUIVALENTS

For the purpose of the statement of cash flows, the Association considers all highly liquid investments available for current use with an initial maturity of three months or less to be cash equivalents, except for those held as part of the investment portfolio.

ART COLLECTION

Funds to purchase the art collection pieces were donated to the Association by its founders. Various estates donated additional pieces. The Association classifies the art collection as a capitalized asset without the standard application of depreciation, due to the cultural value of the collection.

During the year ended December 31, 2023, the Association did not sell any pieces of the collection. As of December 31, 2023, twelve pieces remain. The Association intends to retain these pieces of art, which include portraits of Prendergast family members as well as ones of local interest. The collection was valued and adjusted in 2018 to the estimated average of the high /low 2017 estimate provided by Sotheby's. The value of the art collections at December 31, 2023 and 2022 was \$35,300.

FAIR VALUE OF FINANCIAL INSTRUMENTS

The fair value of the Association's financial instruments approximate their carrying values due to the short-term nature of maturities and expected collection or payment periods or because the terms are similar to market terms.

RECLASSIFICATIONS

Certain prior-year financial statement items have been reclassified to conform to the current period financial statement presentation.

NOTE 2 - PROPERTY AND EQUIPMENT

Property and equipment consists of the following, at December 31:

	2023	2022
Buildings and equipment	\$ 4,971,007	\$ 4,797,067
Computer software	10,843	47,417
Construction in Progress	12,125	<u>의</u>
	4,993,975	4,844,484
Less accumulated depreciation	2,773,845	2,751,049
Property and equipment, net	\$ 2,220,130	\$ 2,093,435

Depreciation expense was \$95,139 and \$82,866, for 2023 and 2022 respectively.

NOTE 3 – RETIREMENT PLAN

The Association participates in the New York State and Local Employees' Retirement System (NYSERS). This is a cost-sharing multiple-employer defined benefit retirement system. The net position of the System is held in the New York State Common Retirement Fund, which was established to hold all net assets and record changes in fiduciary net position allocated to the System. The Comptroller of the State of New York serves as the trustee of the Fund and is the administrative head of the System. The New York State Constitution provides that pension membership is a contractual relationship and plan benefits cannot be diminished or impaired. Benefits can be changed for future members only by enactment of a State statute. The System is included in the State's financial report as a pension trust fund. The NYSERS offers a wide range of plans & benefits, which are related to years of service and final average salary. NYSERS issues a publicly available financial report that includes consolidated financial statements and required supplementary information. That report may be obtained by writing to the New York State and Local Retirement System, 110 State Street, Albany, NY 12244.

The NYSERS is noncontributory for employees who joined prior to July 27, 1976. Employees who join the NYSERS after July 27, 1976 and prior to January 1, 2010 contribute 3% to 3.5% of their salary. With the exception of NYSERS tier V and VI employees, employees in the NYSERS greater than ten years are no longer required to contribute. In addition, employee contribution rates under NYSERS tier VI vary based on a sliding scale. For NYSERS, the Comptroller certifies the rates expressed as proportions of members' pension accumulation fund. The Association is required to contribute at an actuarially determined rate. The Association contributions made to NYSERS were equal to 100 percent of the contributions required. The required contributions for the current year and two preceding years were as follows:

<u> </u>	NYSERS
2023-2024	\$ 64,852
2022 -2023	\$ 50,491
2021-2022	\$ 56,194

Pension Expense recorded for calendar year 2023 was \$50,491.

For NYSERS, employer contributions are paid annually based on the System's fiscal year, which ends on March 31st. Prepaid retirement contributions as of December 31, 2023 represent the projected employer contribution for the period of April 1, 2023 through March 31, 2024 based on paid NYSERS covered wages multiplied by the employer's contribution rate. Prepaid retirement contributions as of December 31, 2023 amounted to \$64,852 of employer contributions.

NOTE 3 – RETIREMENT PLAN (Concluded)

The Association was not listed in the plan's most recent available audited financial statements for providing more than five percent of the total contributions to the plan for the years ended March 31, 2023. The Employer Identification Number for NYSERS is 16-0840340. The most recent Pension Protection Act (PPA) zone is green at March 31, 2023, which is based on the funded ratio as of April 1, 2022 and is disclosed in the plan's audited consolidated financial statements. Among other factors, plans in the red zone are general less than 65% funded, plans in the yellow zone are less than 80% funded, and plans in the green zone are at least 80% funded.

Pension Fund	EIN Number	Plan Number	2023	2022
NYSERS	16-0840340	50101	Green as of 3/31/23	Green as of 3/31/22

NOTE 4 - RELATED PARTY TRANSACTIONS

The accompanying financial statements include only the accounts of the Association. The Association is considered a related party to Chautauqua-Cattaraugus Library System ("CCLS"). CCLS aids members in other ways including training, public relations, technical services, and grants. During the years ended December 31, 2023, and 2022, the Association received income of \$167,255 and \$168,113 respectively, which includes the base rent described in Note 6.

NOTE 5 - NET ASSETS WITH DONOR RESTRICTIONS

Net assets with donor restriction that are perpetual in nature as of December 31, were as follows:

	2023	2022
General purposes – Purchase of books, periodicals and the presentation of lectures	\$ 110,674	\$ 161,710
Construction purposes- Building repairs and upgrades	 82,671	 137,895
	\$ 193,345	\$ 299,605

NOTE 6 -LONG-TERM LEASE

The Association leases space to the CCLS. In 2022, the Association entered into a three year lease agreement with an annual lease payment of \$58,500 per year. For years ended December 31, 2023 and 2022, the Chautauqua-Cattaraugus Library System paid the Association base rent of \$58,500 for each year, which was paid in monthly installments of \$4,875.

NOTE 7 – INVESTMENTS

Investments are reported at market value for financial statement purposes.

The balances as of December 31, 2023 and 2022,

	5	2023	2022
UBS Financial Services, Inc Investment Account	\$	7,640,111	\$ 7,059,656
American Funds-Mutual Fund Account		44,691	34,778
	\$	7,684,802	\$ 7,094,434

Fair Value Measurements at Reporting Date

The Association's investments are reported at fair value in the accompanying Statements of Financial Position. Generally accepted accounting principles establish a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. These valuation techniques are based upon observable and unobservable inputs. Observable inputs reflect market data obtained from independent resources, while unobservable inputs reflect the Association's market assumptions. These types of inputs create the following fair value hierarchy: Level 1 inputs consist of quoted prices for identical instruments in active markets, Level 2 inputs consist of quoted prices in active markets for similar assets or liabilities or quoted prices in inactive markets for identical or similar assets or liabilities and model-derived valuations whose significant inputs are observable and Level 3 consists of instruments whose significant inputs are unobservable. The Association uses appropriate valuation techniques based on available inputs to measure the fair value of its investments.

Fair Value Measurements at Reporting Date

		December 31, 2023				
Cash and equivalents	Level 1		Total			
	\$	47,047	\$	47,047		
Equities		4,826,962		4,826,962		
Fixed income		2,572,383		2,572,383		
Commodities		193,719		193,719		
Mutual funds		44,691		44,691		
	_\$	7,684,802	\$	7,684,802		

NOTE 7 – INVESTMENTS (Concluded)

•	December 31, 2022									
Cash and equivalents	-		Total							
	\$	50,291	\$	50,291						
Equities		4,335,702		4,335,702						
Fixed income		2,462,149		2,462,149						
Commodities		211,514		211,514						
Mutual funds		34,778		34,778						
	\$	7,094,434	\$	7,094,434						

Expenses relating to investment revenues, including custodial fees and investment advisory fees, amounted to \$43,943 and \$44,318 for the years ended 2023 and 2022, respectively and have been netted against investment revenues in the accompanying Statements of Activities.

NOTE 8 – ENDOWMENT FUNDS

The Association's endowment includes both donor-restricted funds and funds designated by the Board of Trustees. As required by generally accepted accounting principles, net assets associated with endowment funds, including funds designated by the Board of Trustees to function as endowments, are classified and reported based on existence or absence of donor-imposed restrictions. As of December 31, 2023, the Board of Trustees had designated \$7,574,128 of net assets without donor restrictions as a general endowment fund to support the mission of the Association. Since that amount resulted from an internal designation and is not donor-restricted, it is classified and reported as net assets without donor restrictions.

Spending policy

The spending policy states that the Association may appropriate for expenditure or accumulate so much of the endowment fund as it deems prudent for uses, benefits, purposes, and duration for which the endowment fund is established. The Association has determined that, in order to achieve its overall financial objective, the spending rate will be set between 5% and 7% of the trailing twenty quarter average market value of each Fund's portfolio as of the preceding September 30th. Annually, the Board of Directors approves the annual spending policy from this quasi-endowment to help cover annual operating expenses. For December 31, 2023 and 2022, the Board approved quasi-endowment spending of 5% and 5%, respectively based on the balance of the quasi-endowment in the prior 20 quarters. In 2023 and 2022, \$272,859 and \$250,846 respectively, was withdrawn from the endowment investments for general operating purposes.

Investment policy

Investment policies and management of the board-designated quasi-endowment investments are reviewed annually by the Association. Over the long term, the objective is to provide an annual total return, net of the 5% spending, to keep pace with inflation, thus allowing the investments to provide

NOTE 8 - ENDOWMENT FUNDS (Concluded)

for increasing annual spending in perpetuity. The Association has adopted an investment policy designed to broadly diversify the individual securities within the endowment and diversify the asset allocation so as to maximize the return potential within specific risk limitation

Endowment net asset composition by type of fund as of December 31, 2023, is as follows:

	Total Endowment <u>Net Assets</u>				
Endowment funds with donor restrictions Board-designated endowment funds without donor restrictions	\$ 110,674 7,574,128				
Total endowment funds	\$ 7,684,802				

Changes in endowment net assets as of December 31, 2023 are as follows:

	<u>Board</u> <u>Designated</u>	With Donor Restrictions (see Note 5)	<u>Total</u> Endowment Net Assets
Endowment net assets, beginning of year	\$ 6,933,840	\$ 160,594	\$ 7,094,434
Contributions	Xes	*	=
Investment income	253,503	2	253,503
Net unrealized gain	609,724		609,724
Amounts appropriated for expenditure	(222,939)	(49,920)	(272,859)
Endowment net assets, end of the year	\$ 7,574,128	\$ 110,674	\$ 7,684,802

NOTE 9 – ACCRUED COMPENSATORY TIME

The Association established a paid vacation plan for eligible part-time and full-time employees. Part-time employees earn vacation time if they work a total of 260 hours or more in a quarter. The plan is calculated by taking the number of hours worked in the quarter divided by 13 weeks divided by 4. Full-time professionals with 10 years of service receive 20 days of vacation time annually. Full-time employees with less than 10 years of service receive 15 days of vacation annually. Non-professionals who have been employed 10 or more years also receive 20 days of vacation time annually. Non-professionals employed less than 10 years receive 15 days of vacation time annually. Unpaid earned accrued vacation liability for 2023 and 2022 was \$29,442 and \$33,127 respectively.

NOTE 10 - LIQUIDITY AND AVAILABILITY OF FINANCIAL ASSETS

The following reflects the Association's financial assets as of the balance sheet date, reduced by amounts not available for general use because of contractual or donor-imposed restrictions within one year of the balance sheet date.

	2023
Financial assets at year end	\$ 8,100,995
Less those unavailable for general expenditures within one year due to:	
Donor-restricted	193,345
Board Designated- endowment fund	7,574,128
Financial assets available to meet cash needs for	
general expenditure within one year	\$ 333,522

The Association developed a Strategic Plan for 2021-2024 to develop revenue, fundraising, and cost management plans that position the Association on a sustainable path at any level of public funding.

NOTE 11 - CONCENTRATION OF CREDIT RISK

Financial instruments that potentially subject the Foundation to concentrations of credit risk consist principally of cash and cash equivalent accounts in financial institutions. Although the accounts periodically exceed the federally insured deposit amount, management does not anticipate nonperformance by the financial institution.

NOTE 12 – CONTINGENCIES, RISKS, AND UNCERTAINTIES

The Association's revenue consists of a variety of governmental funding and investment funds. The governmental funding is dependent on current economic conditions and community needs as defined by governmental units. These funds could be terminated or significantly reduced with minimal notice. Investments in general are exposed to various risk, such as interest rate, credit, and overall market volatility risk. It is reasonably possible that changes in value of the Association's governmental funding and investments will occur in the near term and that such changes could materially affect the amounts reported in the accompanying financial statements.

NOTE 13 – FUNCTIONAL ALLOCATION OF EXPENSES

The costs of providing various activities have been summarized in the Statements of Activities and Changes in Net Assets. The Association allocated its expenses on a functional basis among program and supporting activities and then summarized and categorized based upon their functional classification. Expenses that can be identified with a specific program or activity are allocated directly according to their natural expenditure classification. Certain categories of expenses are attributable to both program and supporting functions. Therefore, these expenses require allocation on a reasonable basis that is consistently applied. The expenses such as salaries and wages, and employee benefits are allocated on basis of estimates of time and effort. The other expenses that are common to multiple functions are allocated by various statistical percentages determined by management.

NOTE 14 - SUBSEQUENT EVENTS

Events and transactions which have occurred from December 31, 2023 through June 26, 2024, the date these financial statements were available to be issued, have been evaluated by management for the purpose of determining whether there were any events that might require disclosure in these financial statements.



JAMES PRENDERGAST LIBRARY ASSOCIATION 509 CHERRY STREET JAMESTOWN, NY 14701

Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

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

For the 2023 calendar year, or tax year beginning , 2023, and ending . 20 Check if applicable: C Name of organization JAMES PRENDERGAST LIBRARY ASSOCIATION D Employer identification number Address change Doing business as 16-0840340 Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Initial return 509 CHERRY STREET (716) 484-7135 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code JAMESTOWN, NY 14701 Amended return G Gross receipts \$1,503,866. Application pending F Name and address of principal officer: H(a) Is this a group return for subordinates? Yes X No ANNE GREENE, 509 CHERRY ST, JAMESTOWN, NY 14701 H(b) Are all subordinates included? Yes No Tax-exempt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions. Website: www.prendergastlibrary.org H(c) Group exemption number Form of organization: X Corporation Trust Association Other 1880 M State of legal domicile: NY L Year of formation: Part I Summary Briefly describe the organization's mission or most significant activities: 10 PROVIDE LIBRARY SERVICES TO THE RESIDENTS OF THE CITY OF JAMESTONIA, HEN YORK Activities & Governance Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 10 Number of independent voting members of the governing body (Part VI, line 1b) 10 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 5 27 6 Total number of volunteers (estimate if necessary) 6 2 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. Net unrelated business taxable income from Form 990-T, Part I, line 11 0. **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . . . 1,126,109 874,858. Revenue 9 Program service revenue (Part VIII, line 20) 25,086 16,218. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 541,823 341,201. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 4,281 13,209. Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 1,697,299 245,486. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 749,372. 779,727. 16a Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 453,223. 415,846. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,202,595 1, 195, 573. Revenue less expenses. Subtract line 18 from line 12 494,704. 49,913 Assets or Balances Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 9,822,564. 10,422,393. 21 75,977. Net / 59,827. 22 Net assets or fund balances. Subtract line 21 from line 20 746,587. 362,566. Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 07/31/2024 Sign Signature of officer Date Here ANNE E GREENE, EXECUTIVE DIRECTOR Type or print name and title Print/Type preparer's name Preparer's signature Check [] if Paid SHAM BAHGAT, CPA SHAM BAHGAT, CPA self-employed 08/07/2024 P00152592 Preparer Firm's name BAHGAT & LAURITO-BAHGAT, CPAs, P.C. 75-3046624 Use Only Firm's address 16 WEST MAIN ST., SUITE ONE, FREDONIA, NY 14063 Phone no. (716)673-1891

May the IRS discuss this return with the preparer shown above? See instructions

XYes No

Expenses \$ includi	n Schedule O.) ng grants of \$ 1,072,424.) (Revenue \$)	
) (Revenue \$)	
Other program services (Describe or (Expenses \$ includir Total program service expenses				

***************************************	~~~~~~~~ ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	******************************		

Fart	The Checklist of Required Schedules	-		
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
	complete Schedule A	1	×	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	×	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		×
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		×
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		×
6	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 I	6		×
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	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III			×
9	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, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	8	×	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V.	9		×
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X, as applicable.	10	×	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	44-	.,	
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	11a	×	
C	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11b		×
đ	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 IX	11c		×
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e		×
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		×
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	×	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		×
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			
15	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV. Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b		X
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		×
17	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	1	×
18	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		×
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
	If "Yes," complete Schedule G, Part III	19		×
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		×
b 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A) line 12 if "Yes," complete Schedule I. Parts Land II.	20b		· ·

FEII	Checklist of Required Schedules (continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		×
20	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		×
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 Schedule K. If "No," go to line 25a	24.		
b		24a	-	×
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	240	;	
d 25a	any time during the year?	24c		
b		25b		×
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		×
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).	21		Î
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a	ii ii	×
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	_	×
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		×
29 30	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		×
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.	31		×
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	32		×
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	33	×	×
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	35a		×
00	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		×
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		×
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	×	
Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V	AN 101		
			Yes	No
1a b c	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	reportable gaming (gambling) winnings to prize winners?	1c	×	

Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 27			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	×	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	-	×
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,	UD		
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		×
b	If "Yes," enter the name of the foreign country	40		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		×
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		×
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		×
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	Va		^
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	OD	===	-
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		V
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	70		
	required to file Form 8282?	7.		v
ď	If "Vos " indicate the number of Ferma 2000 filed during the	7с	-	<u>×</u>
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	70		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 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-C?	7g 7h	\rightarrow	×
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	711	-	<u>^</u>
	sponsoring organization have excess business holdings at any time during the year?	8		×
9	Sponsoring organizations maintaining donor advised funds.	0		
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:	30		<u> </u>
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources	- 1		
	against 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	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
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.	100		
b	Enter the amount of reserves the organization is required to maintain by the states in which		- 1	
	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		×
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		×
	If "Yes," see the instructions and file Form 4720, Schedule N.			_
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		×
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		×
	If "Yes," complete Form 6069.			

Fell	Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. 3	and See ii	for a	"No ctions
	Check if Schedule O contains a response or note to any line in this Part VI	JCC 11	150100	. 🗵
Sect	on A. Governing Body and Management			P.S.
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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.			
ь	Enter the number of voting members included on line 1a, above, who are independent . 1b 10			
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		×
3	Did the organization delegate control over management duties customarily performed by or under the direct			
4	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		×
4 5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets?	4		×
6	Did the organization have members or stockholders?	5 6		×
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	U		X
	one or more members of the governing body?	7a		×
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		×
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?			
b	Each committee with authority to act on behalf of the governing body?	8a 8b	×	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	OD		
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		×
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	je Co		
10a	Did the organization have local chapters, branches, or affiliates?	40	Yes	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10a		×
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	×	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a		12a	×	
b c	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12b	×	
•	describe on Cahadula O have this was done	12c	×	
13	Did the organization have a written whistleblower policy?	13	×	
14	Did the organization have a written document retention and destruction policy?	14	×	
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?		1	
a b		15a		×
J	Other officers or key employees of the organization	15b	_	<u>×</u>
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a tayable antitudusing the user?	16a		×
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	- II		
Section	on C. Disclosure	16b		
17	List the states with which a copy of this Form 990 is required to be filed NY			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T	(sect	ion 5	01(c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	•		` ,
4-	☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of and financial statements available to the public during the tox years.	inter	est po	olicy,
20	and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and rec	ordo		
	JAMES PRENDERGAST LIBRARY ASSOCIATION, 509 CHERRY STREET, JAMESTOWN, NY 14701 (7		84-7	135

Form	qqn	(2023)

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 the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organiz		1			(C)				,	
(A) Name and title	(B) Average hours	box,	unle: er an	Pos heck	sition mor	e than e is both tor/trus	nan	(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			compensation from the organization and related organization
(1) DANNY HICKMAN	5.00									
PRESIDENT		×		×				0.	0.	0
(2) NED R. LINDSTROM VICE PRESIDENT	5.00	×		×				0.	0.	0
(3) MICHAEL COREY TREASURER	5.00	×		×				0 -	0.	0
(4) CASSIE BLAKESLEE' SECRETARY	5.00	×		×				0.	0.	0
(5) JESSICA CARR TRUSTEE	5.00	×						0 -	0.	0
(6) CINDY JOHNSON TRUSTEE	5.00	×						0.	0.	0
(7) JUDY LONG TRUSTEE	5.00	×						0.	0.	0
(8) MATT MANCUSO TRUSTEE	5.00	×						0.	0.	0
(9) FRANK CORAPI TRUSTEE	5.00	×						0.	0.	0
(10) MARY ZDROJEWSKI TRUSTEE	5.00	×						0.	0.	0 .
(11) ANNE GREENE EXECUTIVE DIRECTOR	40.00			×				76,923.	0.	0
(12)								10,323	0.1	0.
(13)										
(14)				+	1		+			

Pai	Section A. Officers, Directors,	Trustees,	Key I	Em	olo	yee	s, ar	ıd F	lighest Compe	ensated Emplo	yees	cont	inuec
	(A) Name and title	(B) Average hours per week	box,	unles er and	Pos neck is pe	rson	e than is both or/trus	n an	(D) Reportable compensation from the	(E) Reportable compensation from related	((F) ated ar of othe	r
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	f	rom the	e n and
(15)		ļ					0.						
(16)													
(17)													
(18)												-	
(19)													
(20)													
(21)													
(22)													
(23)		***************************************											
(24)													
(25)													
1b c	Subtotal	· · · · VII, Section	 1 A	•			2 3		76,923.	0.			0 .
2	Total number of individuals (including but	not limited	to the	ose	liste	ed a	bove)) wh	76,923. no received more	0 . than \$100,000	of		0.
	reportable compensation from the organiz											Yes	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete S	fficer, dired Schedule J f	ctor, for suc	trus ch ir	tee ndiv	, ke ridu	ey en al .	nplo	yee, or highest	compensated	3		×
4	For any individual listed on line 1a, is the organization and related organizations	sum of rep	ortab n \$15	le co 50,0	om _l 00?	pen ? If	satior "Yes	n an ," c	d other compen	sation from the			
5	individual	5 5 E E	8 86	0.00	e 00		· ·	1 (4	34 34 34 34 54 54		4		×
Sooti	for services rendered to the organization? on B. Independent Contractors	If "Yes," co	mple	te S	che	dui	le J fo	or su	ich person .	· · · · ·	5		x
1	Complete this table for your five high compensation from the organization. Repo	est comper	nsated	d in	dep	cale	dent	con	tractors that re	ceived more th	nan \$1	00,00	10 of
	(A) Name and business addr		ation			Odic	, nadi	yca	(B) Description of service		(C)		year.
2	Total number of independent contractor	s (including	i but	not	lin	nite	d to	tho	se listed above) who			
	received more than \$100,000 of compensa	tion from th	e org	aniz	atio	П	J IU	u 10	oo noted above	, who			

Pa	rt VIII							1 ago
_		Check if Schedule O contains a res	spon	se or note to	any line in this Pa	1		[
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Contributions, Gifts, Grants,	1a b c d e f	Membership dues Fundraising events Related organizations Government grants (contributions)	1a 1b 1c 1d 1e	125,418 167,255 392,693				
	₽ .	Noncash contributions included in lines 1a-1f.	1f 1g	189,492 \$				
	o h	Total. Add lines 1a-1f		x x	874,858.			
e e	0-	EINEG AND BURG	ļ	Business Code				
Program Service Revenue	2a b c	FINES AND FEES		561100	16,218.	16,218.	0.	0
	d							
	-	All others						
<u>α</u>	f	All other program service revenue						
-	3	Total. Add lines 2a-2f	ends,	interest, and	16,218. d 297,545.	0.	0.	297,545.
	5	Income from investment of tax-exemp Royalties	ot bor	• • • • • • • • • • • • • • • • • • • •				
	6a b	Gross rents 6a Less: rental expenses 6b		(ii) Personal				
	С	Rental income or (loss) 6c			=			
	d	Net rental income or (loss)						
	7a	Gross amount from (i) Securities sales of assets	s	(ii) Other				
Revenue	b	Less: cost or other basis and sales expenses . 7b 258,38						
ě.	С	Gain or (loss) 7c 43,65						
Other F	d 8a	Net gain or (loss) Gross income from fundraising events (not including \$ 0.		X	43,656.	0.	0.	43,656.
		of contributions reported on line 1c). See Part IV, line 18	Ва					
			Bb					
		Net income or (loss) from fundraising of Gross income from gaming activities. See Part IV, line 19	event 9a	S # # #				
	b		9b		1			
	с 10а	Net income or (loss) from gaming active Gross sales of inventory, less		8 8 8 8				
	J		0a 0b					
		Net income or (loss) from sales of inve		,				
(D		that income of fleed from sales of five	andry	Business Code				
Miscellaneous Revenue	11a b	MISCELANEOUS	9	00088	13,209.	13,209.	0.	0.
eke Sell	С		-10					
Aisí B		All other revenue						
۷		Total. Add lines 11a-11d		24 X4 S4 S4	13,209.			
	12	Total revenue. See instructions		Se SE SE SE	1,245,486	29,427.	0.	341,201.

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must con

Secti	on 501(c)(3) and 501(c)(4) organizations must comp	lete all columns. All	other organizations	must complete colur	nn (A).
_	Check if Schedule O contains a response		in this Part IX		
Do n 8b, 9	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 .		,	general	
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members	62,829.	50,264.	0.424	2 141
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	02,823.	50,264.	9,424.	3,141.
7 8	Other salaries and wages	561,681.	515,700.	44,059.	1,922.
		50,492.	41,242.	8,450.	800.
9	Other employee benefits	58,571.	54,473.	3,744.	354.
10 11	Payroll taxes	46,154.	41,470.	4,279.	405.
a b	Management				
c	Legal	23,389.	23,389.	0.	0.
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	43,943.	43,943	0 =	0.
g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	13,343.	43,3437	0.	0.
12	Advertising and promotion	0.	0.	0.	0 -
13	Office expenses	12,377.	9,900.	1,856.	621.
14	Information technology	7,008.	7,008	0.	0.
15	Royalties	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,,000.		<u> </u>
16	Occupancy	79,551	63,641.	15,910.	0.
17	Travel			20,520.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	95,139.	76,111.	19,028.	0 -
23	Insurance	22,856.	18,285.	4,571.	0 .
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 O.)				
а	DVD'S, AUDIO BCOKS, E-BODKS, ONLINE DATABASES & PERIODICALS	11,913.	11,913.	0.	
b	BOOKS	64,550.	64,550	0.	0.
С	GRANT PURCHASES	38,848.	38,848.	0.	0.
d	MISCELLANEOUS	7,319.	5,855	1,464.	0.
е	All other expenses	8,953.	5,832.	0.	3,121.
25	Total functional expenses. Add lines 1 through 24e	1,195,573.	1,072,424.	112,785.	10,364.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)		. , == = -		23,302.
		REV 05/09/24 PRO			Form 990 (2022)

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Par	tX	e 18.0	
_			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	310,287.	1	196,142
	2	Savings and temporary cash investments	238,616.	2	220,051
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	0 .	4	1,116
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%		1 1	
		controlled entity or family member of any of these persons		5	
	6	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	
Assets	7	Notes and loans receivable, net		7	
155	8	Inventories for sale or use		8	
Q.	9	Prepaid expenses and deferred charges	50,492.	9	64,852.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 4,993,974.			
	b	2,772,044	2,093,435.	10c	2,220,130.
	11	Investments—publicly traded securities	7,094,434.	11	7,684,802.
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11.		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	35,300.	15	35,300.
-	16	Total assets. Add lines 1 through 15 (must equal line 33)	9,822,564.	16	10,422,393.
	17 18	Accounts payable and accrued expenses	75,977.	17	59,827.
	19	Grants payable		18	
	20	Deferred revenue		19	
	21	Tax-exempt bond liabilities		20	
,,	22	Escrow or custodial account liability. Complete Part IV of Schedule D. Loans and other payables to any current or former officer, director,		21	
Liabilities	~~	trustee, key employee, creator or founder, substantial contributor, or 35%			
<u>=</u>		controlled entity or family member of any of these persons		1	
ē.	00	·		22	
- 1	23 24	Secured mortgages and notes payable to unrelated third parties		23	
	25	Unsecured notes and loans payable to unrelated third parties		24	
		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			
	26			25	
S		Organizations that follow FASB ASC 958, check here	75,977.	26	59,827.
Ö		and complete lines 27, 28, 32, and 33.		1	
ᡖ	27	Not consts without day and it	_		
Ba	28	Net agent with the state	9,446,982.	27	10,169,221.
밀		Organizations that do not follow FASB ASC 958, check here	299,605.	28	193,345.
ឨ		and complete lines 29 through 33.			
ö	29			20	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
SSI	31	Retained earnings, endowment, accumulated income, or other funds.		_	
Net Assets or Fund Balances	32	Total net assets or fund balances	9 7/6 507	31	10 262 566
Ne	33	Total liabilities and net assets/fund balances	9,746,587.		10,362,566.
-		and not abboto/fully balances	9,822,564.	33	10,422,393.

- N

Page 12

					196	
Раг	Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI	5_7_7				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		45,4		
2	Total expenses (must equal Part IX, column (A), line 25)	2		.95,5		
3	Revenue less expenses. Subtract line 2 from line 1	3		49,913.		
4	The service of the services at boginning of your (mast equal that X, line 52, column (X)).					
5	Net unrealized gains (losses) on investments	5		9,746,587. 566,066.		
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				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10	10,3	62,5	66.	
Par	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII	5 5	8 5 5			
			_	Yes	No	
1	Accounting method used to prepare the Form 990: Cash Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	plain o	1			
ο-						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		×	
	If "Yes," check a box below to indicate whether the financial statements for the year were con reviewed on a separate basis, consolidated basis, or both.	ibiled c	r			
	·					
	Separate basis Consolidated basis Both consolidated and separate basis					
D	Were the organization's financial statements audited by an independent accountant?		2b	×		
	If "Yes," check a box below to indicate whether the financial statements for the year were audit separate basis, consolidated basis, or both.	ed on	a			
С	Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over					
	the audit, review, or compilation of its financial statements and selection of an independent accounta	rsigni u nt2				
	If the organization changed either its oversight process or selection process during the tax year, ex		2c	×		
	Schedule O.	piairi oi	'			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set for	th in the				
34	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	ur iit tilt	3a		~	
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	ran th			×	
_	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a		3b			
				000		
	REV 05/09/24 PRO		Forn	n 990	(2023)	

SCHEDULE A (Form 990)

(D)

(E)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

JAMES PRENDERGAST LIBRARY ASSOCIATION

Employer identification number

16-0840340

Pa	rt I	Reason for Public Cha	arity Status. (A	Il organizations mu	st comp	lete this	part.) See instruct	ions.		
The	organi	zation is not a private found	ation because it	is: (For lines 1 throug	h 12. che	ck only o	one box)			
1	\square A	church, convention of church	ches, or associa	tion of churches desc	ribed in s	ection 1	70(b)(1)(A)(i)			
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)									
3	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).									
4	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:									
5	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.)									
6	$\square A$	federal, state, or local gove	rnment or gover	nmental unit describe	d in secti	ion 170(b)(1)(A)(v).			
7	⊠ Ar	n organization that normally escribed in section 170(b)(1	receives a sub	stantial part of its sur	oport fror	n a gove	rnmental unit or fror	n the general public		
8	\square A	community trust described	in section 170(b)(1)(A)(vi). (Complete	Part II.)					
9	□ Ar or	n agricultural research orgar university or a non-land-gra iversity:	nization describe	d in section 170(b)(1)(A)(ix) or	perated in er the na	n conjunction with a me, city, and state or	land-grant college f the college or		
10	su ac	organization that normally ceipts from activities related pport from gross investmen quired by the organization a	I to its exempt fu it income and ur after June 30, 19	inctions, subject to co irelated business taxa 75. See section 509(ertain exc ible incor a)(2) . (Co	eptions; ne (less s mplete P	and (2) no more than section 511 tax) from art III.)	331/m9/ of ite		
11	☐ An	organization organized and	operated exclu	sively to test for publi	ic safety.	See sect	tion 509(a)(4).			
12	☐ An	organization organized and	operated exclus	ively for the benefit of	, to perfo	rm the fui	nctions of, or to carry	out the purposes of		
	on	e or more publicly supporte	d organizations o	described in section 5	i09(a)(1) d	or section	1 509(a)(2). See sect	ion 509(a)(3). Check		
	the	e box on lines 12a through 1	2d that describes	s the type of supportin	g organiz	ation and	complete lines 12e,	12f, and 12g.		
а		Type I. A supporting organization supporting organization. Y	n(s) the power to	regularly appoint or e	elect a ma	ajority of	orted organization(s), the directors or trust	typically by giving ees of the		
b		Type II. A supporting orga control or management of organization(s). You must	nization supervis	sed or controlled in co organization vested in	onnection the same	with its	supported organizati that control or man	on(s), by having age the supported		
С		Type III functionally integits supported organization	rated. A suppor s) (see instruction	ting organization ope ns). You must comp	rated in d lete Part	onnectio	n with, and functiona ions A, D, and E.	ally integrated with,		
d		Type III non-functionally						rted organization(s)		
		that is not functionally integ	grated. The orga	nization generally mu	st satisfy	a distribu	ution requirement an	d an attentiveness		
		requirement (see instructio	ns). You must c	omplete Part IV, Sec	ctions A	and D, ar	nd Part V.			
е		Check this box if the organ functionally integrated, or 7	ization received	a written determination	on from t	ne IRS th	at it is a Type I. Type	e II, Type III		
f	Ente	r the number of supported o				E E W		. [
g	Prov	ide the following information	about the supp	orted organization(s).						
		e of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the d	rganization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
					Yes	No				
(A)					103	No				
(B)										
(C)										

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.)

	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not					(1)	(7)
	include any "unusual grants.")	571,744.	433,980.	285,568.	649,665.	399 440	2,340,397.
2	Tax revenues levied for the	3.1,711.	433,300.	203,300.	049,005.	333,440.	2,340,397.
	organization's benefit and either paid						
	to or expended on its behalf		350,000.	350,000.	350,000.	350 000	1,400,000.
3	The value of services or facilities		330,000.	330,000.	330,000.	330,000.	1,400,000.
	furnished by a governmental unit to the						
	organization without charge						ľ
4	Total. Add lines 1 through 3	571,744.	783,980.	635,568.	999,665.	749 440	3,740,397.
5	The portion of total contributions by	3/1//11	703,300.	033,368.	333,003.	749,440.	3, 740, 397.
·	each person (other than a						
	governmental unit or publicly			1			
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6_	Public support. Subtract line 5 from line 4						3,740,397.
	ion B. Total Support						3,740,337.
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	571,744.	783,980	635,568.	999,665.		3,740,397.
8	Gross income from interest, dividends,						3,,10,33,.
	payments received on securities loans,		1		1		
	rents, royalties, and income from					1	
	similar sources	187,840.	360,500.	469,570.	541,823.	341,201.	1,900,934.
9	Net income from unrelated business						
	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	1					
	(Explain in Part VI.)	163,667.	122,769.	296,713.	155,811.	154,843.	893,803.
11	Total support. Add lines 7 through 10						6,535,134.
12	Gross receipts from related activities, etc.	(see instructio	ns) 🗈 🕮 🗉			12	
13	First 5 years. If the Form 990 is for the	organization's	first, second,	third, fourth,	or fifth tax ye	ar as a section	n 501(c)(3)
D 11	organization, check this box and stop her	e					🗆
Secti	on C. Computation of Public Suppor	t Percentage	9				
14	Public support percentage for 2023 (line 6	, column (f), di				14	57.24 %
15	Public support percentage from 2022 Sch	edule A, Part II	l, line 14 🗼			15	56.85%
16a	331/3% support test—2023. If the organization	zation did not o	cneck the box	on line 13, and	d line 14 is 33°	1/3% or more,	check this
b	box and stop here. The organization qual	mes as a public	cly supported o	organization		🤻	· · · ×
D	33 ¹ /3% support test—2022. If the organization	ation ald not d	check a box or	line 13 or 16a	a, and line 15 is	s 331/3% or mo	ore, check
17-	this box and stop here . The organization	quailles as a p	ublicly suppor	tea organizatio	on		🗆
17a	10%-facts-and-circumstances test—20	23. If the organ	nization did no	t check a box	on line 13, 16	ia, or 16b, and	line 14 is
	10% or more, and if the organization me	ets the facts-a	and-circumstar	nces test, che	ck this box an	d stop here.	Explain in
	Part VI how the organization meets the forganization	acts-and-circu	mstances test	. The organiza	ition qualifies	as a publicly s	supported
							🗆
b	10%-facts-and-circumstances test—20	22. If the organ	nization did no	t check a box	on line 13, 16	Sa, 16b, or 17a	a, and line
	15 is 10% or more, and if the organization	meets the fac	ts-and-circum	stances test, o	check this box	and stop her	e. Explain
	in Part VI how the organization meets the	iacts-and-circ	umstances tes	st. The organiz	ation qualifies	as a publicly s	supported
18	organization	id not all a		40.40 :=:			
	Private foundation. If the organization distructions	iu not check a	a box on line	13, 16a, 16b,	17a, or 17b, o	check this box	and see
-	instructions	<u> </u>	* * * * *	80 80 80 80			a a a

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 qualify under the tests listed below, please complete Part II.)

-	tion A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees						
•	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
•	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
_	unrelated trade or business under section 513						
4	Tax revenues levied for the						1
	organization's benefit and either paid to or expended on its behalf						
_							
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	-						
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3						
10	received from disqualified persons .						
b							
	received from other than disqualified persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Secti	ion B. Total Support						
Calen	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether					1	
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets					A I	
40	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
11	and 12.)						
14	First 5 years. If the Form 990 is for the organization, check this box and stop here						
Section	on C. Computation of Public Support		• • • • •				
15	Public support percentage for 2023 (line 8)			2 solume (fl)		45	
16	Public support percentage from 2022 Scho			o, column (i))		15	<u>%</u> %
	on D. Computation of Investment Inc			8 6 (E 18 36)		10	70
17	Investment income percentage for 2023 (li			v line 13 colu	mn (fl)	17	%
18	Investment income percentage from 2022	Schedule A. F	Part III. line 17	, iiio 10, 00id	(1)	18	
19a	331/3% support tests—2023. If the organiz						
	17 is not more than 331/3%, check this box a	nd stop here.	The organization	on qualifies as a	publicly suppo	rted organization	on
b	331/3% support tests - 2022. If the organiza						
	line 18 is not more than 331/3%, check this be	ox and stop he	ere. The organi	zation qualifies	as a publicly su	ipported organi	zation .
_20	Private foundation. If the organization did	l not check a t	box on line 14,	19a, or 19b, c	heck this box a	and see instruc	tions .

Part IV **Supporting Organizations**

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

Section A. All	Supporting	Organizations	

Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. 1 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 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below. За 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. 3ь c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. 3c 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below. 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 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 lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document). 5a 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 Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 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 regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990). 7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990). 8 Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI. 9a Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI. 9b Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI. 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 supporting organizations)? If "Yes," answer line 10b below.

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

determine whether the organization had excess business holdings.)

10a

Par	t IV Supporting Organizations (continued)			age
		-	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	The second described of the second described described of the second described descr			
	11c below, the governing body of a supported organization?	11a		
b	,	11b		
С	the state of the person decembed of the above: If the to line the, the, of the,			
C4	provide detail in Part VI.	11c		
Seci	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? 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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
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, supervised, or controlled the supporting organization.	2		
Sect	ion 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 the supported organization(s).			
Sect	ion D. All Type III Supporting Organizations	1		-
	and the most porting organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		103	110
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
Secti	on 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 year (see in	nstruc	tions	.) <u>.</u>
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			,
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see ins	structi	ons).
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
Ь	Did the activities described on line 2a, above, constitute activities that, but for the organization's	4.0		
_	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 lines 3a and 3b below.	20	-	
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? If "Yes" or "No," provide details in Part VI .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Par	Type III Non-Functionally Integrated 509(a)(3) Supporting Or	aan	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	a tru	st on Nov. 20, 1970 (exp	lain in Part VI). See
	instructions. All other Type III non-functionally integrated supporting organ	nizat	ions must complete Sec	tions A through E.
Sec	tion 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		
88	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	ion B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	on C—Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	lly in	tegrated Type III suppor	ting organization

Par	Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	izations (continue	adl	rage
	tion D—Distributions	of dapperting organ	izations (continue	30)	Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		1	
2	Amounts paid to perform activity that directly furthers ex	empt purposes of suppo	orted		
	organizations, in excess of income from activity	877		2	
3	Administrative expenses paid to accomplish exempt pur	nizatione	3		
4	Amounts paid to acquire exempt-use assets	poses of supported orga	a neadons	4	
5	Qualified set-aside amounts (prior IRS approval required	_ provide details in Port	1/0	5	
6	Other distributions (describe in Part VI). See instructions	—provide details in Fait	VI)	_	
7	Total annual distributions. Add lines 1 through 6.	•		6	
- 8	Distributions to attentive supported organizations to which	ch the organization is res	nonsive	7	
	(provide details in Part VI). See instructions.	on the organization is rec	ponsive		
9	Distributable amount for 2023 from Section C, line 6			8	
10	Line 8 amount divided by line 9 amount			9	
<u> </u>	Ellio o dinioditi divided by line 9 amount		(22)	10	4110
Sect	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023	ns	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required—explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
С	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)			_	
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			_	
4	Distributions for 2023 from			-	
	Section D, line 7:				
а	Applied to underdistributions of prior years	7		-	
b	Applied to 2023 distributable amount			-	
С	Remainder. Subtract lines 4a and 4b from line 4.			+	
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j and 4c.				
8	Breakdown of line 7:			-	
а	Excess from 2019 .			-	
b	Excess from 2020			-	
С	Excess from 2021			+	
	Excess from 2022			-	
	Excess from 2023			-	

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
Pt II I	n 10: Other Income Part II, Line 10 Description: FUNDRAISING EVENT INCOME
2019: 1	14272. 2020: 101886. 2021: 80873. 2022: 126444. 2023: 125418. Description:
FINES &	FEES FROM ADD'L SERVICES 2019: 41074. 2020: 11631. 2021: 18667. 2022:
25086.	2023: 16218. Description: OTHER 2019: 8321. 2020: 9252. 2021: 197173.
2022: 4	281. 2023: 13207.

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Schedule B (Form 990)

Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

Employer identification number

Name of the organization

Department of the Treasury

Internal Revenue Service

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

Schedule of Contributors

JAMES PRENDERGAST LIBRARY ASSOCIATION 16-0840340 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 3) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation ☐ 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

JAMES PRENDERGAST LIBRARY ASSOCIATION

Employer identification number

16-0840340

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.							
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
1	THE LENNA FOUNDATION 133 EAST FAIRMONT AVENUE #2 PO BOX 13 LAKEWOOD NY 14750		Person					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
2	RALPH C SHELDON FOUNDATION INC. 217 NORTH MAIN ST JAMESTOWN NY 14701	\$36,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
3	JAMESTOWN CITY SCHOOL DISTRICT 197 MARTIN ROAD JAMESTOWN NY 14701	\$ 350,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
No.	Name, address, and ZIP + 4 CHAUTAUQUA-CATTARAUGUS LIBRARY SYSTEM 106 W FIFTH STREET	Total contributions	Person Payroll Noncash (Complete Part II for					
No. 4	Name, address, and ZIP + 4 CHAUTAUQUA-CATTARAUGUS LIBRARY SYSTEM 106 W FIFTH STREET JAMESTOWN NY 14701 (b)	\$ 108,755.	Person Payroll Complete Part II for noncash contributions.)					
(a) No.	Name, address, and ZIP + 4 CHAUTAUQUA-CATTARAUGUS LIBRARY SYSTEM 106 W FIFTH STREET JAMESTOWN NY 14701 (b) Name, address, and ZIP + 4 KATHERINE GANZ FUND JCC FOUNDATION	\$ 108,755. (c) Total contributions	Person					

JAMES PRENDERGAST LIBRARY ASSOCIATION

Employer identification number

16-0840340

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.								
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
7	NYS LOCAL INCENTIVE-CHAUT. CATT LIBRARY SYSTEM 106 W FIFTH STREET JAMESTOWN NY 14701	\$11,154.	Person X Payroll Complete Part II for noncash contributions.)						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
8	CARNAHAN-JACKSON FOUNDATION PO BOX 3326 JAMESTOWN NY 14701	\$47,750.	Person Payroll Noncash (Complete Part II for noncash contributions.)						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
9	THE CUMMINS FOUNDATION 301 EAST MARKET STREET INDIANAPOLIS IN 46204	\$10,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
10	JESSIE SMITH DARRAH FUND 202 WEST FOURTH STREET JAMESTOWN NY 14701	\$17,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
11	HOLMBERG FOUNDATION 519 Washington St. JAMESTOWN NY 14701	\$18,000.	Person X Payroll						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
	, =====================================		Type of contribution						

Name of organization

JAMES PRENDERGAST LIBRARY ASSOCIATION

Employer identification number

16-0840340

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
2 222333 3		\$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
- S		\$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
victim		\$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		\$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		\$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		\$					

Schedule B (Form 990) (2023) Name of organization Employer identification number JAMES PRENDERGAST LIBRARY ASSOCIATION 16-0840340 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift from (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

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

Attach to Form 990.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization Employer identification number JAMES PRENDERGAST LIBRARY ASSOCIATION 16-0840340 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate value of contributions to (during year) . 3 Aggregate value of grants from (during year) . . 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? **Conservation Easements** Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) ☐ Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified 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 Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included on line 2a . 2c Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) 8 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1 \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items. Assets included in Form 990, Part X

Par	t III Organizations Maintaining	Collections of	Art, His	storical	Treasures	, or O	ther Similar	Assets	(cont	inued)
3	Using the organization's acquisition, collection items (check all that apply).	accession, and o	ther reco	ords, che	ck any of th	e follo	wing that make	e signific	ant u	se of its
а	□ Public exhibition		d	□ Loan	or exchang	ie proa	ram			
b	☐ Scholarly research		e	Othe						
С										
4										
5	5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar									
	assets to be sold to raise funds rather than to be maintained as part of the organization's collection?									
Par	Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.									
1a	Is the organization an agent, trustee included on Form 990, Part X?	, custodian, or ot	her inter	mediary f	or contribut	tions o	r other assets	_	.,	
b						8 %	80 80 80 80 80 80 80 80 80 80	#)(Yes	☐ No
U	If "Yes," explain the arrangement in P	art XIII and compi	ete the f	ollowing t	able.			Δ		
С	Beginning balance							Amoun	t	
d						10				
e	Distributions during the year					10				
f	Ending balance					16				
2a	Did the organization include an amount							1:L-0 []	Van	
b	If "Yes," explain the arrangement in P									□ NO
Par	tV Endowment Funds	art Am. Check her	e ii the e	xpianatio	n nas been	provide	ed in Part XIII		•	Ц
	Complete if the organization	answered "Ves	" on Fo	rm 000. I	Part IV line	. 10				
	Complete if the organization	(a) Current year		ior year	(c) Two year		(d) Three years b	ack (a) i	FOUR VES	ars back
1a	Beginning of year balance	7,094,435.		1,204.	7,463,			_		
Ь	Contributions	7,004,400.	0,50	0.		138.	6,563,85 364,83			,210. ,821.
С	Net investment earnings, gains, and			0.	23,	130.	304,03	0.	134	,021.
	losses	907,169.	-1 17	1 605	1,085,	170	681,19	4 1	101	027
d	Grants or scholarships	507,105.	1,11	1,005.	1,005,	170.	001,19	4 . 1	, 104	,027.
е	Other expenditures for facilities and									
	programs	272,859	25	0,846.	94	046.	94,04	6	376	,184
f	Administrative expenses	43,943.		4,318.		714.	52,18	_		,016.
g	End of year balance	7,684,802.		4,435.			7,463,650			,858.
2	Provide the estimated percentage of t							0. 0	, 505	, 030
a	Board designated or quasi-endowmer			e (mie 19	j, coluitiit (a)	n neiu a	25.			
b	Permanent endowment	11 97. 9	70							
С	Term endowment 3.%				9					
	The percentages on lines 2a, 2b, and	2c should equal 10	00%							
3a	Are there endowment funds not in the	possession of th	ie organi	zation tha	at are held a	and ad	ministered for	the		
	organization by:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4.5		2. 4.0 .10.0	2.10 00	Timilotor Ga 101	410	Ye	s No
	(i) Unrelated organizations?							. За	_	×
	// F3							3a		×
b	If "Yes" on line 3a(ii), are the related or						· · · · ·	. 3		
4	Describe in Part XIII the intended uses							. 0		_
Part			ni o onac	J.WITTOTTE TO	31100.					
	Complete if the organization		on For	m 990. F	Part IV. line	11a. S	See Form 990) Part	(line	10
	Description of property	(a) Cost or oth	her basis	(b) Cost o	r other basis ther)	(c) A	Accumulated preciation		Book va	
1a	Land		0 .							0.
b	Buildings		0.4	4 0	18,845.	2	,150,473.	1	868	372.
	Leasehold improvements				45,065.		33,937.			128.
d	Equipment				30,064.		589,434.			630.
е	Other	ž *			,					
Total.	Add lines 1a through 1e. (Column (d) m	ust equal Form 99	30, Part)	X, line 10d	c, column (B	3))	2 2 2	2	220	130.
	The state of the s		V 05/00/24 D							

	(a) Description of security or category	(b) Book value	(c) Method of valuation:
D =====	(including name of security)		Cost or end-of-year market value
	al derivatives		
	held equity interests		
Other			
(A) (B)			
(C)		-	
D)		-	
E)			
-7.	•••••••••••••••••••••••••••••••••••••••	•	
G)			
H)		1	
tal. (Colu	ımn (b) must equal Form 990, Part X, line 12, col. (B))		
art VIII	Investments—Program Related	-1	
	Complete if the organization answered "Yes" on Fo	rm 990, Part IV, line	11c. See Form 990, Part X, line
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
- C-1	/LV /		
art IX	mm (b) must equal Form 990, Part X, line 13, col. (B)) Other Assets		
artix		em 000 Dout IV line:	44d Can Faura 2000 Bank V Bina
	Complete if the organization answered "Yes" on For	m 990, Fart IV, line	
	(a) Description		(b) Book value
	mn (b) must equal Form 990, Part X, line 15, col. (B))		
al. (Colu	Other Liabilities		
			11e or 11f. See Form 990, Part >
al. (Colu	Other Liabilities Complete if the organization answered "Yes" on For		11e or 11f. See Form 990, Part X
al. (Colu art X	Other Liabilities Complete if the organization answered "Yes" on For line 25.		
art X	Other Liabilities Complete if the organization answered "Yes" on For line 25. (a) Description of liability		
art X	Other Liabilities Complete if the organization answered "Yes" on For line 25. (a) Description of liability		
al. (Colu art X	Other Liabilities Complete if the organization answered "Yes" on For line 25. (a) Description of liability		
art X	Other Liabilities Complete if the organization answered "Yes" on For line 25. (a) Description of liability		
al. (Colu art X	Other Liabilities Complete if the organization answered "Yes" on For line 25. (a) Description of liability		
al. (Colu art X	Other Liabilities Complete if the organization answered "Yes" on For line 25. (a) Description of liability		
al. (Colu art X	Other Liabilities Complete if the organization answered "Yes" on For line 25. (a) Description of liability		
al. (Colu art X	Other Liabilities Complete if the organization answered "Yes" on For line 25. (a) Description of liability	m 990, Part IV, line	

Par	Reconciliation of Revenue per Audited Financial Staten Complete if the organization answered "Yes" on Form 990,	nents \ Part I	With Revenue per V. line 12a.	Retur	1
1	Total revenue, gains, and other support per audited financial statements			1	1,771,109.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	,			1,771,105.
а	Net unrealized gains (losses) on investments	2a	566,066.		
b	Donated services and use of facilities	2b	3,500.	1	
C	Recoveries of prior year grants	2c	3,300.	1	
d	Other (Describe in Part XIII.)	2d		†	
е	Add lines 2a through 2d	20 00	10 20 Et 142 020 020 140	2e	569,566.
3	Subtract line 2e from line 1	20 A)		3	1,201,543.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1			1,201,545.
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	43,943		
b	Other (Describe in Part XIII.)			1	
C	Add lines 4a and 4b		as va va on on on	4c	43,943.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.1		5	1,245,486.
Part	XII Reconciliation of Expenses per Audited Financial States	nents	With Expenses pe		rn
	Complete if the organization answered "Yes" on Form 990,	Part I\	/. line 12a.		
1	Total expenses and losses per audited financial statements	200 200 5		1	1,155,130.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				1,133,130.
а	Donated services and use of facilities	2a	3,500.		
b	Prior year adjustments	2b			
С	Other losses				
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d		N 91 % 38 % 10 W	2e	3,500.
3	Subtract line 2e from line 1	te te t		3	1,151,630.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1			1,131,030.
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	43,943.		
b	Other (Describe in Part XIII.)	4b	10,7513.	1	
С	Add lines 4s and 4h		* * * * * * *	4c	43,943
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	e 18.)		5	1,195,573.
Part 2	XIII Supplemental Information				
2; Part	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part Line 4: ENDOWMENT FUND EARNINGS ARE USED TO FINE	NCE (vide any additional inf	ormatic	on.
SERIE	INVESTMENT FUND IS SET ASIDE FOR CAPITAL NEEDS AS	WELL	AS FUNDING A	LECTU	RE
Pt II	I, Line 4: THE COLLECTION IS AVAILABLE FOR PUBLIC	VIE	WING. THE COLLI	ECTIO	N
ENRIC	THES THE LIVES OF THE ORGANIZATION'S PATRONS AND T	HE CO	OMMUNITY		
			•••••••••••••••		*******************
*******		*******	•••••	********	
********					••••••

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Schedule D (For		Page 5
Part XIII	Supplemental Information (continued)	

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SCHEDULE G (Form 990)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the organization						Employer identifi	ication number
JAMES PRENDERO						16-0840340	
Form 99	90-EZ filers are n	ot required to	complete	this part.		Form 990, Part IV,	line 17.
1 Indicate whet	her the organizatio	n raised funds				heck all that apply.	
a 🗌 Mail solici			e [ion of non-govern		
	nd email solicitation	าร	_		ion of governmen	_	
c Phone sol			g [Special	fundraising events	3	
d ∐ In-person							
2a Did the organ	ization have a writt	ten or oral agre	ement with	any individ	dual (including offi	cers, directors, trus	tees,
						fundraising services	
b If "Yes," list the	ne 10 nignest paid I at least \$5,000 by	individuals or e	entities (fun	draisers) pi	ursuant to agreem	ents under which th	ne fundraiser is to b
oompendated	at least 45,000 by	irie Organizatio	л.				
						434	
(i) Name and addre or entity (fu		(īi) Activity	custody o	draiser have or control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
4			Yes	No			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							**
Total							
3 List all states i	n which the organ	ization is regist	tered or lice	ensed to so	olicit contributions	or has been notifie	ed it is exempt from
registration or	ilicerising.						
	***************************************	***************	***********		***************		
	*******************	***************	***********				
		*************					***************************************
			**********			***************************************	

				******	***************************************		

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

		5				
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			BOOK SALE	SECTA SEALS TEST	None	(add col. (a) through col. (c))
Φ			(event type)	(event type)	(total number)	coi. (c)
Revenue	1	Gross receipts	29,872.	95,545.		125,417.
Œ	2	Less: Contributions				
	3	Gross income (line 1				
		minus line 2)	29,872	95,545.		125,417.
				1		
	4	Cash prizes 🖫 🖫				
	5	Noncash prizes				
sesue	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
Direc	8	Entertainment				
	9	Other direct expenses				
	10 11	Direct expense summary. Ac Net income summary. Subtra	dd lines 4 through 9 in c	column (d)	grang a a a g	125,417.
Pa	₁t	Gaming. Complete if th \$15,000 on Form 990-E	e organization answe	ered "Yes" on Form	990, Part IV, line 19, o	
Φ				(b) Pull tabs/instant		(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Š						
		Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
_	5	Other direct expenses				
	6	Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No	
	7	Direct expense summary. Ad	ld lines 2 through 5 in c	olumn (d)		
	8	Net gaming income summar	y. Subtract line 7 from li	ine 1, column (d) .		
_	_					
9 ;	a Ist	nter the state(s) in which the or the organization licensed to co "No." explain:	onduct gaming activities	s in each of these states		Yes No
	• ••	"No," explain:		***************************************	***************************************	
	8800	***************************************				
10	We	ere any of the organization's g	aming licenses revoked			
1	o If "	"Yes," explain:				
	****				************************	

Schedu	ule G (Form 990) 2023		Page 3
11	Does the organization conduct gaming activities with nonmembers?	☐ Yes	
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	☐ Yes	□No
13	Indicate the percentage of gaming activity conducted in:	_	
а	The organization's facility		%
b	An outside facility		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		**********
	Address		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	☐ Yes	☐ No
b	If "Yes," enter the amount of gaming revenue received by the organization \$ and the		
	amount of gaming revenue retained by the third party \$		
С	If "Yes," enter name and address of the third party:		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation \$		
	Description of services provided	***********	
	□ Director/officer □ Employee □ Independent contractor		
17	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	□ v	□ N-
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year	☐ Yes	□ NO
Part l	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (ii Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additions See instructions.	ii) and (v al inform	r); and nation.

******		*********	•
******		***********	
******		********	

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Schedule G (Form 990) 2023

SCHEDULE O (Form 990)

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.

OMB No. 1545-0047

2023

Open to Public

Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection

Employer identification number

JAMES PRENDERGAST LIBRARY ASSOCIATION	16-0840340
Pt VI, Line 12c: Enforcement of Conflicts Policy. The Association	requires all
board members and associates to annually sign a conflict of inter	est form and
to disclose any possible interests that could give rise to confli	cts.
Pt VI, Line 19: Governing Documents Disclosure Explanation. The g	overning documents,
tax filings, annual audited or reviewed financial statements, and	conflict of
interest policy are available upon request by contacting the Libr	ary Association
Pt VI, Line 11b: A copy of the Form 990 is provided to all curren	t board of
trustees via email to review.	

	······································

SCHEDULE R (Form 990)

Department of the Treasury Name of the organization Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

JAMES PRENDERGAST LIBRARY ASSOCIATION

Part

2023

OMB No. 1545-0047

Open to Public Inspection

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

Employer identification number 16-0840340

(g) Section 512(b)(13) controlled entity? Schedule R (Form 990) 2023 ž (f) Direct controlling × Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had Yes (f)
Direct controlling
entity (e) End-of-year assets N/A (e)
Public charity status
(if section 501(c)(3)) 170(b)(1)(A)(vi) (d) Total income (d) Exempt Code section (c)
Legal domicile (state
or foreign country) 501(c)(3) Cat. No. 50135Y (c) Legal domicile (state or foreign country) (b) Primary activity REV 05/09/24 PRO ΝŽ AIDING MEMBER LIBRARIES one or more related tax-exempt organizations during the tax year. (b) Primary activity For Paperwork Reduction Act Notice, see the Instructions for Form 990. BAA (1) CHAUTAUQUA- CATTARAUGUS LIBRARY SYSTEM 16-0849330 106 W FIFTH STREET JAMESTOWN NY 14701 (a) Name, address, and EIN (if applicable) of disregarded entity (a)Name, address, and EIN of related organization (2) Part III (7) ල Ξ Ñ ල 4 Ō 9 € 9 9

Schedule R (Form 990) 2023

(i) Section 512(b)(13) controlled (k) Percentage ž entity? Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year. Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. Yes (i) General or managing partner? ŝ (h) Percentage ownership Yes (i)
Code V—UBI
amount In box 20
of Schedule K-1
(Form 1065) (g) Share of end-of-year assets (h) Dispropartionate allocations? Share of total Yes (g) Share of end-of-(e)
Type of entity
(C corp, S corp, or trust) (f) Share of total income (d)
Direct controlling entity (e)
Predominant
Income (related,
unrelated,
excluded from
tax under
sections 512—514) REV 05/09/24 PRO (c)
Legal domicile
(state or foreign country) (d) Direct controlling entity (b) Primary activity (c) Legal domicile (state or foreign country) (b) Primary activity (a) Name, address, and EiN of related organization (a) Name, address, and EIN of related organization Part III Part IV 2 BAA Ξ 9 4 9 E 9 2 ල 4 <u>©</u> 9 Ξ 2

Schedule R (Form 990) 2023

Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Part V

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.	r more related orga	nizations listed in Par	ts II–IV?	Yes	
Gift, grant, or capital contribution to related organization(s)	· · ·		数 5 数 5 数 5	<u> </u>	< ×
Gift, grant, or capital contribution from related organization(s)				× 2 ×	:
Loans or loan guarantees to or for related organization(s) Loans or loan quarantees by related organization(s)				19	x
Dividends from related organization(s)		# # # # #	50 50 50 50 50 50 50	<u>•</u>	×
Sale of assets to related organization(s)		[15] [15] [20] [20] [21] [21]	#X #	= ,	×
Purchase of assets from related organization(s)			8) 8) 8) 62 83	6L -	× :
Exchange of assets with related organization(s)			# # # # # # # # # # # # # # # # # # #	<u>ا</u> تا تا	×
Lease of facilities, equipment, or other assets to related organization(s)				×= ==	<
Lease of facilities, equipment, or other assets from related organization(s)	25 (4 (5) (5) (6) (6) (7) (7) (7) (8)	6 A A A A A A A A A A A A A A A A A A A	5 00 6 0 8 18 8 18 8 18		×
Performance of services or membership or fundraising solicitations for related organization(s)	34 35 36 36 36			×	
renormance or services of membership of fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	38 1 38 1 38 1 38 1 38 1	13		13 13 14	×
Sharing of paid employees with related organization(s)		· · · · · · · · · · · · · · · · · · ·	* 4 * 4 * 4 * 4	- 0	×
Reimbursement paid to related organization(s) for expenses Reimbursement paid by related organization(s) for expenses	**	3 3 3 3 3	154 154 154 156 154	т .	
Other transfer of cash or property to related organization(s)				-	×
Other transfer of cash or property from related organization(s) If the answer to any of the above is "Yes." see the instructions for information on who must a	in the state of th			18	x
de la composition della composition de la composition de la composition della compos	piere tris line, incli	ding covered relation	nships and transactio	n threshold	g.
(a) Name of related organization	(b) Transaction type (a – s)	(c) Amount involved	(d) Method of determining amount involved	amount Involv	pen
REV 05/09/24 PRO			Schedule R (Form 990) 2023	(Form 990)	2023

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

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Name, address, and EiN of entity	Frimary activity	Legal domicile (state or foreign country)	(a) Predominant income (related, unrelated, excluded from tax under	(e) Are all partners section 501(c)(3) organizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	tionate ons? a	(i) Code V—UBI amount In box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
£			sections 512-514)	Yes			Yes	2		Yes	2	
117												
(2)												
(3)								-				
(4)												
(5)												
(9)												
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Schedule R (F	Form 990) 2023
Part VII	Supplemental Information Provide additional information for responses to questions on Schedule R. See instructions.

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Schedule R (Form 990) 2023

Form 8879-TE

IRS E-file Signature Authorization for a Tax Exempt Entity

OMB	No.	1545-0047

For calendar year 2023, or fiscal year beginning

, 2023, and ending Do not send to the IRS. Keep for your records. Department of the Treasury Go to www.irs.gov/Form8879TE for the latest information. Internal Revenue Service Name of filer EIN or SSN JAMES PRENDERGAST LIBRARY ASSOCIATION 16-0840340 Name and title of officer or person subject to tax ANNE E GREENE, EXECUTIVE DIRECTOR Type of Return and Return Information Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I. 1a Form 990 check here . X b Total revenue, if any (Form 990, Part VIII, column (A), line 12) . 2a Form 990-EZ check here Total revenue, if any (Form 990-EZ, line 9) b **b** Total tax (Form 1120-POL, line 22) 3a Form 1120-POL check here Form 990-PF check here 4a b Tax based on investment income (Form 990-PF, Part V, line 5) 4h 5a Form 8868 check here . 6a **b Total tax** (Form 990-T, Part III, line 4) Form 990-T check here 6b 7a Form 4720 check here **b Total tax** (Form 4720, Part III, line 1) 7b 8a Form 5227 check here . b FMV of assets at end of tax year (Form 5227, Item D) . . . Form 5330 check here . 9a **b** Tax due (Form 5330, Part II, line 19) 9b Form 8038-CP check here . . . 10a b Amount of credit payment requested (Form 8038-CP, Part III, line 22) Declaration and Signature Authorization of Officer or Person Subject to Tax Under penalties of perjury, I declare that 🗵 I am an officer of the above entity or 🔲 I am a person subject to tax with respect to (name of entity) , (EIN) and that I have examined a copy of the 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only ☑ I authorize BAHGAT & LAURITO-BAHGAT, CPAs, P.C. to enter my PIN as my signature ERO firm name Enter five numbers, but do not enter all zeros on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Signature of officer or person subject to tax Date 07/31/2024 Part III Certification and Authentication ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. 1 0 I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. ERO's signature Date 08/07/2024 ERO Must Retain This Form — See Instructions