Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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.

Α	For the 2	co i 8 caien	dar year, or tax year begin	ning	, 2018,	and ending	9	,	•			
В	Check if app	olicable:	С				D En	ployer identi	fication number			
	Addres	s change	RACHEL KOHL COMM	UNITY LIBRARY	INC		2	23-2127296				
		change	687 SMITHBRIDGE		1110			lephone numb				
	Initial r	-	GLEN MILLS, PA 1				6	10-358-	-3115			
			•				0	10-336	-3443			
		urn/terminated							5 504 006			
	-	led return	F	1 70		T ₁	H(a) Is this a group	oss receipts				
	Applica	ation pending		I officer:					H H			
			Same As C Above		T T	<u> </u>	H(b) Are all subording If "No," attach	a list. (see ins	1? Yes No			
<u> </u>		npt status:	X 501(c)(3) 501(c) () ◀ (insert no.)	4947(a)(1) or	527						
J	Websit	e: ► N/	'A				H(c) Group exempti					
K		organization:	X Corporation Trust	Association Other ►	LY	ear of formation	on:	M State of le	egal domicile: PA			
Pa	rt I	Summar	ý									
	1 Bri	efly descri	be the organization's missi	ion or most significan	activities: Se	<u>e Sched</u>	ule_0					
ö												
Activities & Governance												
E.												
Š	2 Ch	eck this bo		n discontinued its ope					sets.			
∾ প	3 Nu 4 Nu		oting members of the gover dependent voting members						9			
es	5 Tot		r of individuals employed in						0			
Ħ	6 Tot		r of volunteers (estimate if						0			
Ċ	7a Tot		ed business revenue from I	• • • • • • • • • • • • • • • • • • • •					0.			
-			d business taxable income						0.			
							Prior Y		Current Year			
	8 Co	ntributions	and grants (Part VIII, line	1h)				3,923.	493,255.			
ıne			vice revenue (Part VIII, line	•				0,803.	29,931.			
Revenue			ncome (Part VIII, column (A					37.	53.			
æ			e (Part VIII, column (A), lir	·				1,311.	10,847.			
	12 To	tal revenue	e – add lines 8 through 11	(must equal Part VIII	, column (A), lii	ne 12)		0,074.	534,086.			
	13 Gra	ants and s	imilar amounts paid (Part I	X, column (A), lines 1	-3)				<u>, </u>			
	14 Be	nefits paid	I to or for members (Part I)	X, column (A), line 4)								
	15 Sa	laries, oth	er compensation, employee	5-10)	220	709.	242,536.					
ses	16a Pro		fundraising fees (Part IX, o	-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	212,000.						
Expenses	la Tal											
ᄶ	b 101		sing expenses (Part IX, col	_		3,711.	_					
	17 Ott	•	ses (Part IX, column (A), lin	•				7,317.	128,552.			
			es. Add lines 13-17 (must	•				3,026.	371,088.			
		venue less	s expenses. Subtract line 1	8 from line 12			-58	3,952.	162,998.			
3 or							Beginning of Cu		End of Year			
sets alar	20 Tot		(Part X, line 16)					5,718.	496,502.			
Net Assets Fund Balanc	21 Tot	tal liabilitie	es (Part X, line 26)				250	5,304.	224,090.			
ξĒ	22 Ne	t assets or	r fund balances. Subtract li	ne 21 from line 20			109	9,414.	272,412.			
Pa	rt II	Signatur	re Block									
Unde	er penalties	of perjury, I de	eclare that I have examined this retu arer (other than officer) is based on	urn, including accompanying	schedules and stater	ments, and to t	he best of my knowl	edge and belie	ef, it is true, correct, and			
COM	piete. Deciar	ation of prepa	arer (other than officer) is based on	all illiormation of which prepa	arer nas any knowied	uge.						
		<u></u>										
Siç	gn	Signatu	ure of officer				Date					
He	re		NIFER PANARO				Treasure	r				
			r print name and title									
		Print/Type p	oreparer's name	Preparer's signature		Date	Check	if	PTIN			
Pa	id	Michael	J O'Doherty, CPA	Michael J O'Dohe	erty, CPA		self-em	ployed	P00160409			
Pre	eparer	Firm's name	e ► MICHAEL J. O'DOR									
Us	e Only	Firm's addre					Firm's	EIN ► 23-	2730769			
			SPRINGFIELD, PA				Phone		604-4700			
May	the IRS	discuss th	nis return with the preparer		nstructions)		1	(010)	X Yes No			

TEEA0102L 08/03/18

4d Other program services (Describe in Schedule O.)
(Expenses \$ including gr

BAA

(Expenses \$ including grants of \$

4e Total program service expenses ► 328, 978.

) (Revenue \$

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Χ
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		Х
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		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
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? If 'Yes,' complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i> .	11 a	Х	
k	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.	11 b		Х
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.	11 c		Х
C	I 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.	11 d		Х
e	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
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	11 f		Х
12 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		Х
k	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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Χ
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
Ł	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV.	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If 'Yes,' complete Schedule F, Parts III and IV</i>	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		X
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	19 20a		X
	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		-
	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			Х
	domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Λ

Form 990 (2018) RACHEL KOHL COMMUNITY LIBRARY, INC Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23		X
24	a 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	24a		Х
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
!	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I.	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III.</i>	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
ı	b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>	28b		Х
	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an			
	officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
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.	34		Х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
I	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	36		Х
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? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	Х	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			<u> </u>
1	Enter the number reported in Pay 2 of Form 1006. Enter 0, if not englished		Yes	No
	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
'	(gambling) winnings to prize winners?	1 c		
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Form 990 (2018) RACHEL KOHL COMMUNITY LIBRARY, INC

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2	a 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			
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3 8	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
	b If 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule O.</i>	3 b		
	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
1	b If 'Yes,' enter the name of the foreign country: ►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5 8	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
ı	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
(c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6	a 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?	6 a		Х
	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and			
•	services provided to the payor?	7 a		X
	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
•	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
	d If 'Yes,' indicate the number of Forms 8282 filed during the year	70		21
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899			
	as required?	7 g		
ı	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
	organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:			
	a 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 10 b Section 501(c)(12) organizations. Enter:			
	a Gross income from members or shareholders			
	b Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers.			
	a Is the organization licensed to issue qualified health plans in more than one state?	13a		
•	Note. See the instructions for additional information the organization must report on Schedule O.	154		
I	b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	c Enter the amount of reserves on hand			
	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		
	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		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If 'Yes,' complete Form 4720, Schedule O.			

Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1 a 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 in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent . . . 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Χ Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?..... 5 Χ Did the organization have members or stockholders?..... 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?..... 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 a Χ a The governing body?.... **b** Each committee with authority to act on behalf of the governing body?..... 8 b 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O..... 9 Χ Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... 10 a Χ b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b to conflicts?.... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done 12 c 13 Did the organization have a written whistleblower policy?..... 13 Χ Χ **14** Did the organization have a written document retention and destruction policy?..... 14 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? Χ a The organization's CEO, Executive Director, or top management official...... 15 a **b** Other officers or key employees of the organization..... 15 b X If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?..... Χ 16 a 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?... 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > None Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Own website Another's website Other (explain in Schedule O) Describe in Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records

GLEN MILLS PA 19342 610-358-3445

TREASURER 687 SMITHBRIDGE RD

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

				(C))					
(A) Name and Title	(B) Average hours	Position (do than one box is both an directo		an o	officer	and a ee)		(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) BRIAN DOHERTY	0									_
BOARD MEMBER	0	Х						0.	0.	0.
(2) GREGORY CHESTNUT	0									
BOARD MEMBER	0	Χ						0.	0.	0.
(3) ROBERT HAYES	00									
President	0	Χ						0.	0.	0.
(4) RANDY EHMAN	00]								
BOARD MEMBER	0	Χ						0.	0.	0.
(5) JENNIFER PANARO	00]								
Treasurer	0	Χ						0.	0.	0.
(6) MARY ALICE PEELING	00]								
BOARD MEMBER	0	Х						0.	0.	0.
(7) JEAN MACKENZIE	0									
Secretary	0	Х						0.	0.	0.
(8) BRENDA ORSO	0									
BOARD MEMBER	0	Χ						0.	0.	0.
(9) SALEEM SHAIK	0									
BOARD MEMBER	0	Χ						0.	0.	0.
(10)										
(11)										
(12)										
(13)										
(14)										

Part VII Section A. Officers, Directors, Tru	ustees,	Key	Em	ıplo	oye	es,	and	d Highest Con	pensated Em	ployees	5 (continu	ued)
	(B)			•	C)							
(A) Name and title	Average hours per week	box	, unle	check ess pe	erson	e than is botl or/trus	h an tee)	(D) Reportable compensation from	(E) Reportable compensation from	amo	(F) stimated unt of other	
	(list any hours	Indiv	Instit	Officer	Key	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	f	npensation rom the ganization	
	for related organiza	Individual trustee or director	nstitutional trustee	Q.	Key employee	est con	ক্				id related anizations	•
	- tions below dotted	truste	enut II		yee	mpen						
	line)	ŏ	tee			sated						
<u>(15)</u>												
<u>(16)</u>												
(17)												
<u>(18)</u>												
<u>(19)</u>												
(20)												
(21)												
(22)												
(23)												
(24)												
(25)												
1 b Sub-total							>	0.	0	•		0.
c Total from continuation sheets to Part VII, Secti							>	0.	0			0.
d Total (add lines 1b and 1c)							ved	0. more than \$100.00	0 00 of reportable con		n	0.
from the organization • 0	. 10 111000 1	iotou	abo	• 0)	******	10001	·ou	more than \$100,00	or repertable con	iporioatio		
											Yes	No
3 Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for such										3		Χ
4 For any individual listed on line 1a, is the sum of	f reportab	le co	mpe	ensa	ation	and	oth	er compensation	from			
the organization and related organizations greate such individual	er than \$1	50,00	00?	If '	∕es,	' con	ıple	te Schedule J for		4		Χ
5 Did any person listed on line 1a receive or accru for services rendered to the organization? If 'Yes	e comper s,' comple	satio te So	n fro	om Iule	any <i>J fo</i>	unre r suc	late ch p	ed organization or erson	individual	5		Χ
Section B. Independent Contractors 1 Complete this table for your five highest compen	sated ind	enen	dent	coi	ntra	ctors	tha	it received more t	han \$100,000 of			
compensation from the organization. Report compen	sation for	the c	alen	dar	year	endi	ng v	vith or within the or	ganization's tax ye			
(A) Name and business address						Description (of services	Compe	C) ensation	1		
2 Total number of independent contractors (including t	out not lim	ited to	o tha	se I	isted	d abo	ve)	who received more	than			
\$100,000 of compensation from the organization				1			-/					

	Check if Schedule O contains a response or note to any	line in this Part V	III		
		(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 and Other Similar Amounts	1a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contributions included in lines 1a-1f: \$				
Col	h Total. Add lines 1a-1f	493,255.			
Program Service Revenue	Business Code 2 a FINES AND OTHER REVENUE b	29,931.	29,931.		
šerv	d				
rogram 9	e f All other program service revenue g Total. Add lines 2a-2f▶	29,931.			
н	3 Investment income (including dividends, interest and	29,931.			
	other similar amounts)	53.	53.		
	(i) Real (ii) Personal 6 a Gross rents				
	d Net rental income or (loss) ▶	10,847.			10,847.
	7 a Gross amount from sales of assets other than inventory b Less: cost or other basis				
	and sales expenses				
Other Revenue	8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18				
ıer	b Less: direct expenses b				
즁	c Net income or (loss) from fundraising events				
	9 a Gross income from gaming activities. See Part IV, line 19a				
	b Less: direct expensesb c Net income or (loss) from gaming activities▶				
	10a Gross sales of inventory, less returns				
	and allowances				
	c Net income or (loss) from sales of inventory ▶				
	Miscellaneous Revenue Business Code				
	11a 				
	b				
	d All other revenue				
	e Total. Add lines 11a-11d				
	12 Total revenue. See instructions.	534.086.	29.984	0.	10.847

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Do i 6b,	not include amounts reported on lines 7b, 8b, 9b, 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.		ехрепзез	general expenses	ехрепзез
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3					
4 5	Benefits paid to or for members	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	220,805.	198,724.	22,081.	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	,	,	,	
9	Other employee benefits				
10	Payroll taxes	21,731.	19,557.	2,174.	
11	Fees for services (non-employees):				
	Management				
	Legal				
	: Accounting	2,750.		2,750.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
g	Investment management fees				
13	Office expenses	1,615.	1,453.	162.	
14	Information technology				
15	Royalties				
16	Occupancy	24,812.	22,330.	2,482.	
17	Travel	,	•	,	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	9,570.	8,613.	957.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	9,310.	9,310.		
23	Insurance	7,880.	7,092.	788.	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	PURCHASES FOR CIRCULATING LIB	27,335.	27,335.		
	UTILITIES	14,974.	13,476.	1,498.	
C		7,529.	6,776.	753.	
C	LIBRARY PROGRAMS	7,003.	7,003.		
	All other expenses	15,774.	7,309.	4,754.	3,711.
25	Total functional expenses. Add lines 1 through 24e	371,088.	328,978.	38,399.	3,711.
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)				

Part X Balance Sheet

2 Savings and temporary cash investments. 2 3			Check if Schedule O contains a response or note to	any line	in this Part X			
2 Savings and temporary cash investments. 2 3						(A) Beginning of year		(B) End of year
3 Piedges and grants receivable, net		1	Cash – non-interest-bearing			64,228.	1	214,393.
4 Accounts receivable, net 4		2					2	
S Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L S		3	Pledges and grants receivable, net				3	
trustees, key employees, and highest compensated employees. Complete Part In of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958()(1), persons described in section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L. 7 Notes and loans receivable, net. 8 Inventories for sale or use. 9 Prepaid expenses and deferred charges. 10a Land, buildings, and equipment: cost or other basis. Complete Part II of Schedule D. 11 Investments — publicly traded securities. 12 Investments — publicly traded securities. 13 Investments — publicly traded securities. 15 Other assets. See Part IV, line 11. 16 Total assets. Add lines 1 through 15 (must equal line 34). 17 Accounts payable and accrued expenses. 18 Grants payable. 19 Deferred revenue. 20 Tax-exempt bond liabilities. 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 22 Loans and other payables to current and former officers, directors, trustees. key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D. 22 Loans and other payables to current and former officers, directors, trustees. key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D. 22 Loans and other payables to current and former officers, directors, trustees. key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D. 25 Total liabilities. Add lines 17 through 29. 26 Total liabilities and liability. Complete Part IV of Schedule D. 27 Total complete Part IV of Schedule D. 28 Secured mortsages and notes payable to unrelated third parties. 29 Complete Part IV of Schedule D. 20 Total liabilities. Add lines 17 through 29. 21 Unrestricted net assets. 22 Permonarity restricted net assets. 23 Total net assets or fund bilance or fundous 43. 24 Unrestricted net assets. 25 Other liabilities Add lines 17 through 29. 26 Total liabili		4	Accounts receivable, net				4	
1		5	trustees, key employees, and highest compensated er	s. Complete I		5		
7 Notes and loans receivable, net. 7 8 Inventories for sale or use. 8 9 Prepaid expenses and deferred charges. 9 9		6	Loans and other receivables from other disqualified pe	s defined under				
8 Inventories for sale or use. 8 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 9 10a 363,000.	S	7					7	
10a	set	8			<u> </u>		8	
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D. 10b 81,442. 290,868. 10c 281,558 11 Investments – publicly traded securities. 11 12 Investments – other securities. See Part IV, line 11. 12 Investments – other securities. See Part IV, line 11. 12 13 Investments – program-related. See Part IV, line 11. 13 14 Intangible assets. 14 15 Other assets. See Part IV, line 11. 10,622. 15 551 551 16 Total assets. Add lines 1 through 15 (must equal line 34). 365,718. 16 496,502 17 Accounts payable and accrued expenses. 17 18 Grants payable and accrued expenses. 18 18 19 Perred revenue. 19 20 21 22 Escrow or custodial account liabilities. 20 21 22 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 22 23 Secured mortgages and notes payable to unrelated third parties. 256,304. 23 224,090 25 25 25 304. 26 224,090 27 28 29 29 29 29 29 29 29	As	9	Prepaid expenses and deferred charges				9	
b Less: accumulated depreciation.		10 a	· · · · · · · · · · · · · · · · · · ·	1				
11 Investments — publicly traded securities.						200 060	10.0	201 550
12 Investments — other securities. See Part IV, line 11.			· · · · · · · · · · · · · · · · · · ·			230,000.		201,330.
13 Investments — program-related. See Part IV, line 11.			•		_			
14			•					
15 Other assets. See Part IV, line 11. 10,622. 15 551 16 Total assets. Add lines 1 through 15 (must equal line 34). 365,718. 16 496,502 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties. 24 24 Unsecured notes and loans payable to unrelated third parties. 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 26 Total liabilities. Add lines 17 through 25. 256, 304. 26 224,090 27 Unrestricted net assets. 256, 304. 26 224,090 28 Temporarily restricted net assets. 29 29 Permanently restricted net assets. 29 20 Tax-exempt bond liabilities. 20 21								
16 Total assets. Add lines 1 through 15 (must equal line 34). 365,718. 16 496,502 17 Accounts payable and accrued expenses. 17 18 Grants payable 18 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities. 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L. 22 23 Secured mortgages and notes payable to unrelated third parties. 25 256,304. 23 224,090 24 Unsecured notes and loans payable to unrelated third parties, and other liabilities (including federal income tax, payables to related third parties, and other liabilities. Add lines 17 through 25. 256,304. 26 224,090 25 Total liabilities. Add lines 17 through 25. 256,304. 26 224,090 26 Total liabilities. Add lines 17 through 25. 256,304. 26 224,090 27 Unrestricted net assets. 28 29 272,412 28 Temporarily restricted net assets. 29 29 29 Permanently restricted net assets. 29 29 29 29 Permanently restricted net assets. 29 29 20 20 20 20 20 20					<u> </u>	10 622		E E 1
17 Accounts payable and accrued expenses 17 18 18 Grants payable 18 19 Deferred revenue 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. 22 Complete Part II of Schedule L. 23 Secured mortgages and notes payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities included on lines 17-24). Complete Part X of Schedule D. 25 25 256, 304. 26 224, 090 25 25 256, 304. 26 224, 090 25 25 256, 304. 26 224, 090 27 272, 412 28 Temporarily restricted net assets 109, 414. 27 272, 412 27 272, 412 28 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 109, 414. 33 272, 412 272, 412 272, 412 272, 412 272, 412 272, 412 272, 412 272, 412 272, 412 272, 412 272, 412 272, 412 273, 412 274, 4								
18 Grants payable 18 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L. 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities. Add lines 17 through 25 25 256, 304 26 224, 090 Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34. 272, 412 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 109, 414 33 272, 412 33 Total net assets or fund balances 109, 414 33 272, 412 33 30 30 30 30 30 30 3			Accounts payable and accrued expenses		303,710.		490,302.	
19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L. 22 Secured mortgages and notes payable to unrelated third parties 25 Cother liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 256,304. 23 224,090								
21 Escrow or custodial account liability. Complete Part IV of Schedule D		19			19			
23 Secured mortgages and notes payable to unrelated third parties		20	Tax-exempt bond liabilities		20			
23 Secured mortgages and notes payable to unrelated third parties	S	21	Escrow or custodial account liability. Complete Part I'	V of Sche	edule D		21	
23 Secured mortgages and notes payable to unrelated third parties	abiliti	22	key employees highest compensated employees and	ilannaih l	fied persons		22	
24 Unsecured notes and loans payable to unrelated third parties. 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 26 Total liabilities. Add lines 17 through 25. 27 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete lines 27 through 29, and lines 33 and 34. 28 Temporarily restricted net assets. 29 Permanently restricted net assets. Organizations that do not follow SFAS 117 (ASC 958), check here ▶ 28 Permanently restricted net assets. Organizations that do not follow SFAS 117 (ASC 958), check here ▶ 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ 30 and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds. 31 Paid-in or capital surplus, or land, building, or equipment fund. 32 Retained earnings, endowment, accumulated income, or other funds. 33 Total net assets or fund balances. 24 25 25 25 25 27 272, 412 27 272, 412	_	23	•		<u> </u>	256 304		224 090
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 Total liabilities. Add lines 17 through 25				•	<u> </u>	200,004.		221,000.
Organizations that follow SFAS 117 (ASC 958), check here Incept 27 through 29, and lines 33 and 34. 27 Unrestricted net assets. 28 Temporarily restricted net assets. 29 Permanently restricted net assets. 29 Organizations that do not follow SFAS 117 (ASC 958), check here 29 Organizations that do not follow SFAS 117 (ASC 958), check here 29 and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds. 31 Paid-in or capital surplus, or land, building, or equipment fund. 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 30 109, 414. 31 272, 412		25		•	_		25	
Unrestricted net assets. Temporarily restricted net assets. Permanently restricted net assets. Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds. Paid-in or capital surplus, or land, building, or equipment fund. Retained earnings, endowment, accumulated income, or other funds. Total net assets or fund balances. 109, 414. 27 272, 412 28 29 Capital stock or trust principal, or current funds. 30 31 32 33 Total net assets or fund balances. 109, 414. 33 272, 412		26				256,304.	26	224,090.
The property of the property	ses		Organizations that follow SFAS 117 (ASC 958), check her lines 27 through 29, and lines 33 and 34.	re ►	and complete			
28 Temporarily restricted net assets. 29 Permanently restricted net assets. 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds. 31 Paid-in or capital surplus, or land, building, or equipment fund. 32 Retained earnings, endowment, accumulated income, or other funds. 33 Total net assets or fund balances. 34 Total liabilities and net assets/fund balances. 38	aŭ	27	Unrestricted net assets			109,414.	27	272,412.
Permanently restricted net assets. 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds. 30 Paid-in or capital surplus, or land, building, or equipment fund. 31 Retained earnings, endowment, accumulated income, or other funds. 32 Total net assets or fund balances. 109, 414. 33 272, 412 Total liabilities and net assets/fund balances. 365, 718. 34 496, 502	3al	28	Temporarily restricted net assets				28	
Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds. 31 Paid-in or capital surplus, or land, building, or equipment fund. 32 Retained earnings, endowment, accumulated income, or other funds. 33 Total net assets or fund balances. 34 Total liabilities and net assets/fund balances. 365,718. 38 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 31 32 32 34 35 365,718. 34 365,718.	P	29	Permanently restricted net assets				29	
30 Capital stock or trust principal, or current funds. 31 Paid-in or capital surplus, or land, building, or equipment fund. 32 Retained earnings, endowment, accumulated income, or other funds. 33 Total net assets or fund balances. 34 Total liabilities and net assets/fund balances. 365,718. 34 496,502	r Fun			eck here	· 🛮 🖠			
31 Paid-in or capital surplus, or land, building, or equipment fund	S	30	•				30	
Retained earnings, endowment, accumulated income, or other funds. Total net assets or fund balances. Total liabilities and net assets/fund balances. 32 109,414. 33 272,412 34 Total liabilities and net assets/fund balances. 365,718. 34 496,502	Set							
33 Total net assets or fund balances 109,414. 33 272,412 34 Total liabilities and net assets/fund balances 365,718. 34 496,502	Asi							
34 Total liabilities and net assets/fund balances. 365,718. 34 496,502	et				-	109.414		272.412
	Z	_			<u> </u>			496,502.

b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits......

Χ

3 a

3 b

Audit Act and OMB Circular A-133?.....

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number RACHEL KOHL COMMUNITY LIBRARY, INC 23-2127296 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in 12 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.** Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations **q** Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (iv) Is the organization listed (vi) Amount of other support (see instructions) support (see instructions) in your governing document? No (A) (B) (C) (D) (E) Total

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

1 Gifts, grar members' include ar 2 Tax revo organizate either pon its book of the portion of t										
membersi include ar Tax reviorganiza either pon its brown organiza de Total. A Total A Total A Total A Public s from lin Section B.		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total			
organization organ	ants, contributions, and ship fees received. (Do not any 'unusual grants.')	355,381.	348,606.	429,265.	381,561.	478,731.	1,993,544.			
facilities governm organiza Total. A The por contribu (other tit unit or proganizathat excesshown of the contribution of the	venues levied for the zation's benefit and paid to or expended behalf						0.			
5 The por contribution (other the unit or porganize that excession of the contribution	alue of services or es furnished by a amental unit to the zation without charge			15,359.	13,153.	14,524.	43,036.			
from lin Section B. Calendar yea	Add lines 1 through 3 ortion of total outions by each person than a governmental publicly supported zation) included on line 1 cceeds 2% of the amount on line 11, column (f)	355,381.	348,606.	444,624.	394,714.	493,255.	2,036,580.			
Calendar yea	support. Subtract line 5 ne 4						2,036,580.			
Calendar yea	. Total Support						, ,			
beginning in	ear (or fiscal year n) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total			
7 Amount	nts from line 4	355,381.	348,606.	444,624.	394,714.	493,255.	2,036,580.			
dividend on secu royalties	income from interest, nds, payments received urities loans, rents, es, and income from sources	186.	61.	28.	37.	53.	365.			
busines not the	come from unrelated ss activities, whether or business is regularly lon		321				0.			
gain or capital a	income. Do not include r loss from the sale of assets (Explain in I.)						0.			
through	support. Add lines 7 h 10						2,036,945.			
12 Gross re	receipts from related activ	vities, etc. (see ins	tructions)			12	0.			
organiza	ve years. If the Form 990 is zation, check this box and	stop here		rd, fourth, or fifth t	ax year as a sectio	n 501(c)(3)	▶ □			
Section C.	support percentage for 20	blic Support P	ercentage							
	support percentage for 20 support percentage from						99.98%			
16a 33-1/3%	% support test—2018. If to op here. The organization	he organization di	d not check the bo	ox on line 13. and	d line 14 is 33-1/3	S% or more, check	99.97 % ≺ this box			
b 33-1/3%	% support test—2017. If the top here. The organization	ne organization did	not check a box	on line 13 or 16a	, and line 15 is 33	3-1/3% or more, o	check this box			
or more	ncts-and-circumstances to e, and if the organization ganization meets the 'facts	meets the 'facts-a	nd-circumstances	s' test, check this	box and stop her	e. Explain in Part	VI how			
or more organiza	b 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization									

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.)

Sec	tion A. Public Support	osts fisted selett,	prodes semprete :	u. (11.)						
Calend	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total			
1	Gifts, grants, contributions, and membership fees received. (Do not include any unusual grants.)	.,					7			
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 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									
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons									
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.									
С	Add lines 7a and 7b									
8	Public support. (Subtract line 7c from line 6.)									
	tion B. Total Support			4	1					
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total			
	Amounts from line 6									
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975									
	Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.									
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).									
	Total support. (Add lines 9, 10c, 11, and 12.)									
	First five years. If the Form 990 organization, check this box and	stop here	· · · · · · · · · · · · · · · · · · ·							
	tion C. Computation of Pul					, ,				
	Public support percentage for 20	•			•		%			
	Public support percentage from 2					16	0/0			
	tion D. Computation of Inv					1 1				
17	Investment income percentage for	•	• • •	-			0,0			
18	Investment income percentage fi						%			
		this box and sto	p here. The organ	ization qualifies	as a publicly supp	orted organization	▶ ∐			
	s not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization									

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was			
3a	described in section 509(a)(1) or (2). Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b)	2		
t	and (c) below. 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	3a		
c	made the determination. 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.	3b 3c		
4 a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
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		
5 <i>a</i>	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by	5a		
b	amendment to the organizing document). 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		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also 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 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))?			
ŀ	If 'Yes,' provide detail in Part VI . Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the	9a		
	supporting organization had an interest? If 'Yes,' provide detail in Part VI.	9b		
	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI .	9с		
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)? If 'Yes,' answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Par	<u>t IV</u>	Supporting Organizations (continued)			
11	∐ac tl	he organization accepted a gift or contribution from any of the following persons?		Yes	No
		son who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	gover	rning body of a supported organization?	11a		
t	A fam	nily member of a person described in (a) above?	11b		
		% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		
Sec	tion E	B. Type I Supporting Organizations		- I	
1	Did th	e directors, trustees, or membership of one or more supported organizations have the power to regularly appoint		Yes	No
'	or elect Part \ If the direct	with the supported organization's directors or trustees at all times during the tax year? If 'No,' describe in to telephone organization's directors or trustees at all times during the tax year? If 'No,' describe in the supported organization's activities. Organization had more than one supported organization, describe how the powers to appoint and/or remove tors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, and 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 o	operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the porting organization.	2		
Sec	tion (C. Type II Supporting Organizations			
				Yes	No
1	of eac	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ch of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the orting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec		D. All Type III Supporting Organizations			
-				Yes	No
1	Did thorgan	ne organization provide to each of its supported organizations, by the last day of the fifth month of the nization'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 lization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	organ	inzation's governing documents in effect on the date of notification, to the extent not previously provided.	-		
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 or	the organization maintained a close and continuous working relationship with the supported organization(s).			
3	voice	ason of the relationship described in (2), did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at			
		nes during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played s regard.	3		
Sec	tion E	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 instructions).			
	_	the organization satisfied the Activities Test. Complete line 2 below.			
	H	Ç			
	믐	he organization is the parent of each of its supported organizations. Complete line 3 below.	,	<i></i> ,	
(: ∐ ⊤	he organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	struc	tions).	
2	Activi	ties Test. Answer (a) and (b) below.		Yes	No
ā	suppo organ respo	substantially all of the organization's activities during the tax year directly further the exempt purposes of the organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported **nizations and explain how these activities directly furthered their exempt purposes, how the organization was consive to those supported organizations, and how the organization determined that these activities constituted			
	subst	antially all of its activities.	2a		
ŀ	the or	ne activities described in (a) constitute activities that, but for the organization's involvement, one or more of rganization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for rganization's position that its supported organization(s) would have engaged in these activities but for the			
		ization's involvement.	2b		
3	Parer	nt of Supported Organizations. <i>Answer (a) and (b) below.</i>			
ā	Did the each	ne organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? <i>Provide details in Part VI.</i>	3a		
ŀ		be organization exercise a substantial degree of direction over the policies, programs, and activities of each of its orted organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.	3b		

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (A) Prior Year Section A — Adjusted Net Income (optional) 1 1 Net short-term capital gain 2 2 Recoveries of prior-year distributions Other gross income (see instructions) 3 4 Add lines 1 through 3. 4 5 Depreciation and depletion 5 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) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B — Minimum Asset Amount (A) Prior Year (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities 1a 1b **b** Average monthly cash balances c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 4 5 5 Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by .035 6 7 Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6) 8 Section C — Distributable Amount Current Year 1 1 Adjusted net income for prior year (from Section A, line 8, Column A) 2 Enter 85% of line 1. Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions)

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temporary reduction (see instructions)

Schedule A (Form 990 or 990-EZ) 2018

Pai	₹ V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)				
Sec	Section D - Distributions				
1	Amounts paid to supported organizations to accomplish exempt purposes				
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity				
3	Administrative expenses paid to accomplish exempt purposes of supported organizations				
4	Amounts paid to acquire exempt-use assets				
5	Qualified set-aside amounts (prior IRS approval required)				
6	Other distributions (describe in Part VI). See instructions.				
7	Total annual distributions. Add lines 1 through 6.				
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.				
9	Distributable amount for 2018 from Section C, line 6				
10	Line 8 amount divided by line 9 amount				

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, 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 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			
PAA		Schodulo A (Fo	rm 990 or 990 E7) 2019

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Schedule A (Form 990 or 990-EZ) 2018

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.)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

► Attach to Form 990.

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

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Par	Organizations Maintaining Donor Complete if the organization answ	Advised Funds or Oth ered 'Yes' on Form 990	er Similar Funds), Part IV, line 6.	or Accounts.		
		(a) Donor advised	funds	(b) Funds and other accounts		
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and dono are the organization's property, subject to the organization	r advisors in writing that the rganization's exclusive legal	assets held in donor control?	advised funds Yes No		
6	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?					
Par	<u> </u>					
rai	Complete if the organization answ	ered 'Yes' on Form 990) Part IV line 7			
1	Purpose(s) of conservation easements held by the					
•	Preservation of land for public use (e.g., red	· · · · · · · · · · · · · · · · · · ·		nistorically important land area		
	Protection of natural habitat	creation of education)		certified historic structure		
	Preservation of open space		1 reservation of a c	certified filstoffe structure		
2	Complete lines 2a through 2d if the organization he	ld a qualified conservation con	tribution in the form of	a conservation easement on the		
_	last day of the tax year.	iu a quaimeu conservation con		a conservation easement on the		
				Held at the End of the Tax Year		
á	Total number of conservation easements			2a		
ŀ	Total acreage restricted by conservation easeme	ents		2 b		
(: Number of conservation easements on a certific	ed historic structure included	in (a)	2c		
(Number of conservation easements included in structure listed in the National Register	(c) acquired after 7/25/06, a	nd not on a historic	2 d		
3	Number of conservation easements modified, transft tax year ►	ferred, released, extinguished,	or terminated by the or	ganization during the		
4	Number of states where property subject to conserv	ation easement is located >				
5	Does the organization have a written policy regard	arding the periodic monitorin	g, inspection, handlin	g of violations,		
	and enforcement of the conservation easements	s it holds?	-	Yes No		
6	Staff and volunteer hours devoted to monitoring, ins	specting, handling of violations	, and enforcing conserv	vation easements during the year		
7	Amount of expenses incurred in monitoring, inspect ►\$	ting, handling of violations, and	d enforcing conservation	n easements during the year		
8	Does each conservation easement reported on and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the re	equirements of section	170(h)(4)(B)(i) Yes No		
9	In Part XIII, describe how the organization reports of include, if applicable, the text of the footnote to conservation easements.					
Par	t III Organizations Maintaining Collection Complete if the organization answ	tions of Art, Historical ered 'Yes' on Form 990	Treasures, or Oth), Part IV, line 8.	ner Similar Assets.		
1 a	If the organization elected, as permitted under sart, historical treasures, or other similar assets held in Part XIII, the text of the footnote to its finance	I for public exhibition, educatio	n, or research in furthe	statement and balance sheet works of rance of public service, provide,		
ŀ	If the organization elected, as permitted under shistorical treasures, or other similar assets held for following amounts relating to these items:	SFAS 116 (ASC 958), to repopublic exhibition, education, or	ort in its revenue state r research in furtherand	ement and balance sheet works of art, e of public service, provide the		
	(i) Revenue included on Form 990, Part VIII, lii	ne 1				
	(ii) Assets included in Form 990, Part X			·		
2	If the organization received or held works of art, his amounts required to be reported under SFAS 1			·		
	Revenue included on Form 990, Part VIII, line 1.					
	Assets included in Form 990 Part X			►\$		

Part III Organizations Maintai	ning Colle	ctions of	Art, Histoi	ricai i reasures, oi	Other Similar Ass	sets (contin	uea)
3 Using the organization's acquisition items (check all that apply):	, accession, a	nd other rec		,	re a significant use of its	collection	
a Public exhibition			d Loan o	r exchange programs			
b Scholarly research			e Other				
c Preservation for future gener	ations						
4 Provide a description of the organiz Part XIII.							
5 During the year, did the organiza to be sold to raise funds rather the	nan to be mai	intained as	part of the or	ganization's collection	?	Yes	No
Part IV Escrow and Custodia line 9, or reported an	Arrangen amount on	nents. Co Form 99	mplete if th 0, Part X, I	ne organization and ine 21.	swered 'Yes' on Fo	orm 990, Pa	ırt IV,
1 a Is the organization an agent, trus on Form 990, Part X?	tee, custodia	n or other i	ntermediary f	or contributions or othe	er assets not included	Yes	No
b If 'Yes,' explain the arrangement in Part XIII and complete the following table:							
						Amount	
c Beginning balance					1с		
d Additions during the year					1 d		
e Distributions during the year					1 e		
f Ending balance					1f		
2 a Did the organization include an a	mount on Fo	rm 990, Pai	rt X, line 21, f	or escrow or custodial	account liability?	Yes	No
b If 'Yes,' explain the arrangement	in Part XIII.	Check here	if the explana	ation has been provide	ed on Part XIII		
Part V Endowment Funds. C	omplete if	the organ	nization and	swered 'Yes' on Fo	orm 990 Part IV li	ne 10	
Lindowine it i didd:	(a) Current		(b) Prior year	(c) Two years back			ars back
1 a Beginning of year balance	(a) carrone	Jour	(b) The year	(o) The years saon	(u) Times yours bush	(0) 1 0 41) 0 1	aro buon
b Contributions							
c Net investment earnings, gains, and losses							
d Grants or scholarships							
e Other expenditures for facilities and programs							
f Administrative expenses							
g End of year balance							
2 Provide the estimated percentage	e of the curre	nt year end	l balance (line	e 1g, column (a)) held	as:		
a Board designated or quasi-endowm	ent ►		%				
b Permanent endowment ►	%						
c Temporarily restricted endowmer	nt ►	~	i				
The percentages on lines 2a, 2b, ar	nd 2c should e	qual 100%.					
3 a Are there endowment funds not in to organization by:						Yes	No
(i) unrelated organizations						3a(i)	\perp
(ii) related organizations						3a(ii)	
b If 'Yes' on line 3a(ii), are the rela	-					3b	
4 Describe in Part XIII the intended	I uses of the	organizatio	n's endowmer	nt funds.			
Part VI Land, Buildings, and I Complete if the organi			es' on Form	n 990, Part IV, line	11a. See Form 99	90, Part X, l	line 10.
Description of property		(a) Cost or	other basis tment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book	
1 a Land			,				
b Buildings				363,000.	81,442.	281	1,558.
c Leasehold improvements							
d Equipment							
e Other							
Total. Add lines 1a through 1e. (Column	n (d) must ed	qual Form 9	990, Part X, co	olumn (B), line 10c.).		28.7	1,558.
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Schedule D (Form 990) 2018

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	hurn N/A
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	(dilli 14/11
Total revenue, gains, and other support per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	<u>'</u>
a Net unrealized gains (losses) on investments.	
b Donated services and use of facilities	
c Recoveries of prior year grants	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d.	2 e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIII.)	
c Add lines 4a and 4b.	4 c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per F	Return. N/A
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	
1 Total expenses and losses per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	•
a Donated services and use of facilities	
b Prior year adjustments.	
c Other losses.	
d Other (Describe in Part XIII.)	
u Other (Describe iii Fait Alli,)	
· · · · · · · · · · · · · · · · · · ·	2-
e Add lines 2a through 2d.	2 e
e Add lines 2a through 2d. 3 Subtract line 2e from line 1.	2 e 3
e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	
e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4 a	
e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4 b Other (Describe in Part XIII.)	3
e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4 a	

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

BAA Schedule D (Form 990) 2018

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

RACHEL KOHL COMMUNITY LIBRARY, INC

Employer identification number 23-2127296

Form 990, Part I, Line 1 - Organization Mission or Significant Activities

Rachel Kohl Community Library, Inc (the Library) is a nonprofit organization that was organized as a nonprofit organization under the laws of the Commonwealth of Pennsylvania in 1979.

Its stated purpose is to provide a Public Library the residents in the communities of Bethel Township, Chadds Ford Township, Chester Heights Borough, Concord Township and Thornbury Township.

Form 990, Part III, Line 1 - Organization Mission

Rachel Kohl Community Library, Inc (the Library) is a nonprofit organization that was organized as a nonprofit organization under the laws of the Commonwealth of Pennsylvania in 1979.

Its stated purpose is to provide a Public Library the residents in the communities of Bethel Township, Chadds Ford Township, Chester Heights Borough, Concord Township and Thornbury Township.

Form 990, Part VI, Line 11b - Form 990 Review Process

The form 990 is reviewed by the treasurer and the board president

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Documents are made available upon request