Form 990

## **Return of Organization Exempt From Income Tax**

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

2018

Open to Rublic

 Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990 for instructions and the latest information. For the 2018 calendar year, or tax year beginning 2018, and ending 6/30 , 2019 D Employer identification number Check if applicable RIVERHEAD FREE LIBRARY ASSOCIATION 11-1897225 Address change 330 COURT ST Telephone number Name change RIVERHEAD, NY 11901 631-727-3228 Initial return Final ceturn/terminated G Gross receipts \$ 4,045,633. Amended return H(a) Is this a group return for subordinates? F Name and address of principal officer Yes X No Application pending H(b) Are all subordinates included?

If "No," attach a list (see instructions) Same As C Above 527/01 4947(a)(1) or Tax-exempt status X 501(c)(3) 501(c) ( ) < (insert no ) Website: ► riverheadlibrary.org H(c) Group exemption number Form of organization X Corporation Other > L Year of formation 1896 M State of legal domicile NY Trust Association Partil Summary Briefly describe the organization's mission or most significant activities TO PROVIDE LIBRARY SERVICES, MATERIALS AND PROGRAMS TO THE COMMUNITY RECEIVED or disposed of more than 25% of its net assets Check this box ► If the organization discontinued its operations Number of voting members of the governing body (Part VI, line a) DEC 3 (Number of independent voting members of the governing body (Part VI, line 1b) 9 4 Total number of individuals employed in calendar year 2018 (Part V, Line 2a) EN, UT 5 104 Total number of volunteers (estimate if necessary) 6 9 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 38 7h n **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 3,776,413 3,988,261. 42,137. Program service revenue (Part VIII, line 2g) 49,028 15,235. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 7,865 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 3,833,306 4,045,633. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 13 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) 2,702,523 3,060,740. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,093,889. 1,078,089 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 3,780,612. 4,154,629. Revenue less expenses Subtract line 18 from line 12 52,694. -108,996. 19 **End of Year Beginning of Current Year** Total assets (Part X, line 16) 6,090,397 6,342,841 20 21 Total liabilities (Part X, line 26) 3,876,488. 4,237,928. Net assets or fund balances Subtract line 21 from line 20 2,213,909 2,104,913 Partill Signature Block Under penalties of perjury, I declare that complete Declaration of preparer (other) have exampled this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and in office his based on all information of which preparer has any knowledge Signature of office Sign M UNZEL Here Type or print name and title Print/Type preparer's name Check self-employed P00296210 Paid Albert Coster, CPA ► Baldessari & Coster, Preparer Use Only Firm's address 84 Covert Ave Firm's EIN ► 11-3518786 (516) 326-2582 Stewart Manor, NY 11530 Phone no

May the IRS discuss this return with the preparer shown above? (see instructions)

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

TEEA0101L 08/20/18

Form-990 (2018)

No

X Yes

Form	1 990 (2018) RIVERHEAD FREE LIBRARY ASSOCIATION	11-18972	225 Page	2
Pạr				_
	Check if Schedule O contains a response or note to any line in this Part III			Ш
1	Briefly describe the organization's mission:			
	TO PROVIDE LIBRARY SERVICES, MATERIALS AND PROGRAMS TO THE COMMUN	ITY.		
			- <b></b>	
			<b></b>	
	Did the organization undertake any significant program services during the year which were not listed on the prior	r		—
_	Form 990 or 990-EZ?	·	Yes X No	`
	If "Yes," describe these new services on Schedule O	L	, 165 <u>M</u>	•
2	Did the organization cease conducting, or make significant changes in how it conducts, any program ser	uces?	Yes X No	
3		vices:	les V	,
	If "Yes," describe these changes on Schedule O			
4	Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations	ces, as measi s to others, the	e total expenses.	
	and revenue, if any, for each program service reported		, (o.a., opo)	
4 a	a (Code ) (Expenses \$ 3,680,587. including grants of \$ ) (Re	evenue \$		<u> </u>
	TO SERVE PATRONS IN ALL ASPECTS OF EDUCATIONAL RESOURCES SUCH AS		BOOKS	-′
	DVD'S, COMPACT DISCS, VIDEOS AND COMPUTER SERVICES IN THE LOCAL C			
	DAD 3' COME PCT DISCS' AIDEOS WID COME OTEV SEVATORS IN THE POCKE C	~: TITT.		
	·			
4 b	(Code: ) (Expenses \$ including grants of \$ ) (Re	evenue \$		)
				-
		<del>-</del>		
			<b>-</b> - <b></b>	
4 c	c (Code ) (Expenses \$ including grants of \$) (Re	evenue \$		_)
				-
			<b>-</b> -	
			- <b></b>	
			<del></del>	
			<b></b>	
			- <b></b>	
4 d	Other program services (Describe in Schedule O)			
	(Expenses \$ including grants of \$ ) (Revenue \$		)	
4 e	Total program service expenses ► 3,680,587.			
BAA	TEEA0102L 08/03/18		Form <b>990</b> (20)	18)

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	Х	
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			, ,,,;
ā	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	
ł	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
•	: 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	
•	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
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	In Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	х	
t	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	12 b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
t	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
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	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		Х
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		Х
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		Х
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х

# Form 990 (2018) RIVERHEAD FREE LIBRARY ASSOCIATION [Partitly] 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? If 'Yes,' complete Schedule J	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				
1	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								
1	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	·	X				
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III							
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 A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X				
١	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	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		х				
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X				
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M							
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X				
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		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				
-	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		ļ				
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		x				
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI							
	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							
Pā	Partive Statements Regarding Other IRS Filings and Tax Compliance							
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No				
1	a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		162	140				
	b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b							
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c						

Form 990 (2018) RIVERHEAD FREE LIBRARY ASSOCIATION

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

			Yes	No				
2 8	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-							
	ments, filed for the calendar year ending with or within the year covered by this return 104	2 b	<u>x</u>					
ı	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20						
2.	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X				
	o If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	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							
7.	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		X				
ŀ	o 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)								
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a	ļ	X				
	o Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? of the standard of the companization of the Form 8886-T?	5 b						
	•	<del>                                     </del>						
<b>6 a</b> 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?								
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?								
	Organizations that may receive deductible contributions under section 170(c).							
á	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				
ı	o If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	-					
(	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			v				
	Form 8282?  If 'Yes,' indicate the number of Forms 8282 filed during the year  7 d	7с	ļ	Х				
	d If 'Yes,' indicate the number of Forms 8282 filed during the year  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		<del></del>	X				
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X				
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899		-					
	as required?							
	n 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.  3 Did the sponsoring organization make any taxable distributions under section 4966?	9 a						
	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							
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b							
11	Section 501(c)(12) organizations. Enter:							
ä	a Gross income from members or shareholders							
I	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.).							
12:	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.	i						
á	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							
I	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							
	Enter the amount of reserves on hand							
	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X				
	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule Q	14b		1				
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or							
, ,	excess parachute payment(s) during the year?	15		X				
	If 'Yes,' see instructions and file Form 4720, Schedule N							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	<u> </u>	X				
	If 'Yes,' complete Form 4720, Schedule O		000	(2010)				
BAA	TEEA0105L 12/31/18	rom	・コゴリ	(2018)				

Form 990 (2018) RIVERHEAD FREE LIBRARY ASSOCIATION 11-1897225 Page 6 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. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 9 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 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 1 h 9 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 6 Did the organization have members or stockholders? 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more X members of the governing body? 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? 8 a X **b** Each committee with authority to act on behalf of the governing body? 8 b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the 9 organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Х 10 a Did the organization have local chapters, branches, or affiliates? b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b operations are consistent with the organization's exempt purposes? X 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Х 12 b 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

See Schedule O Х Schedule O how this was done 120 X 13 13 Did the organization have a written whistleblower policy? 14 X 14 Did the organization have a written document retention and destruction policy? 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? Х a The organization's CEO, Executive Director, or top management official See Schedule O 15 a X b Other officers or key employees of the organization 15<sub>b</sub> 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? 16 a  ${f b}$  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 16b organization's exempt status with respect to such arrangements? Section C. Disclosure 17 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 Upon request Other (explain in Schedule O) Another's website Describe in Schedule O 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

RIVERHEAD FREE LIBRARY 330 COURT ST

RIVERHEAD NY 11901 631-727-3228

## Part VIII 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	thar	one b both a	iοx, ι	unles ficer truste		on	(D) Reportable compensation from	<b>(E)</b> Reportable compensation from	<b>(F)</b> 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) JANET O'HARE	2	X						0.	0.	0.
Trustee	0		-			-	$\dashv$	0.	<u> </u>	<u>U.</u>
(2) JOHN MUNZEL Vice President	2	X		x				0.	0.	0.
(3) EILEEN MACKEY	2									
Secretary	0	X		Х				0.	0.	0.
(4) SUSAN M. BERGMANN	2	. ,						0		•
Trustee	0	Х	$\vdash$	-			$\dashv$	0.	0.	0.
	2	Х						0.	0.	0.
(6) SMITH LUWANA	2	~			_	<del></del>				
Trustee		Х	1					0.	0.	0.
7) LOUISE C. WILKINSON	2	<u> </u>	$\vdash$	T						
Trustee	0-	X						0.	0.	0.
(8) REV. JANET WRIGHT	2									
Trustee	0	Х						0.	0.	0.
_(9)_ JOHN_S RIENZO JR	2	X		$_{\rm x}$				0.	0.	0.
Treasurer (10) KERRIE A MCMULLEN-SMITH	35	^	+	<del>^  </del>				0.	0.	
DIRECTOR	-35-	1			х			91,680.	0.	0.
(11)								/		
(12)			$\dashv$							<u></u>
(13)										
(14)										

(A) Name and title	(B)  Average hours per week (list any	(do box offic	not o	Pos check ess pe	sition more erson direct	e than is bol	one th an stee)	(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other
	hours for related organiza tions below dotted line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	(M2) NOSS MISSO	(WEIISS IIIISS)	organization and related organizations
<u>(15)</u>		-								
(16)										
(17)										
(18)		-								
(19)										
(20)										
(21)							-			
(22)					-	-				
(23)				_						
(24)										
(25)										
1 b Sub-total		ļ		<b></b>		-	<b>-</b>	91,680.	0	. 0.
c Total from continuation sheets to Part VII, Secti	on A .						<b>•</b>	0.	0	. 0.
d Total (add lines 1b and 1c)							<b>&gt;</b>	91,680.	0	
2 Total number of individuals (including but not limited from the organization ► 0	to those I	sted	abo	ve) v	who	recei	ved	more than \$100,00	00 of reportable con	npensation
nom the organization								<del></del>		Yes No
3 Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for such	tor, or tru h ındıvıdu	stee, al	, key	y em	olqr	yee,	or h	nighest compensa	ted employee	3 X
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	f reportab er than \$1	le co 50,0	mpe 00?	ensa If '\	ition es,	and con	oth nple	er compensation te Schedule J for	from	4 X
5 Did any person listed on line 1a receive or accrufor services rendered to the organization? If 'Yes	e comper s,' comple	satio	n fr	om dule	any <i>J f</i> c	unre	elate ch p	ed organization or erson	ındıvıdual	5 X
Section B. Independent Contractors										
Complete this table for your five highest compensation from the organization. Report compensation.	sated indi sation for	epen the c	den alen	t co dar j	ntra year	ctors endi	tha ng v	at received more t with or within the or	han \$100,000 of ganization's tax yea	ar
(A) Name and business add	ress							Description	of services	(C) Compensation
							•			
2 Total number of independent contractors (including t		ted to	o the	se I	ıste	d abo	ve)	who received more	than	
\$100,000 of compensation from the organization	<b>-</b> 0								'	

	990 (2018) RIVERHEAD FREE LIB	RARY ASSOCIA	TION		11-1897225	Page 9
rai	Check if Schedule O contains a resp	onse or note to any	/ line in this Part VI	Ш .		П
			<b>(A)</b> 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	1 a Federated campaigns 1 b Membership dues 1 b c Fundraising events. 1 c d Related organizations 1 d e Government grants (contributions) 1 e f All other contributions, gifts, grants, and similar amounts not included above 1 f g Noncash contributions included in lines 1a-1f. \$	3,960,240.				
Cor	h Total. Add lines 1a-1f	<b>•</b>	3,988,261.			
Program Service Revenue	2a PROGRAM REVENUE  b FINES & FEES  c MISCELLANEOUS INCOME  d  e  f All other program service revenue  g Total. Add lines 2a-2f	Business Code	20,756. 16,746. 4,635. 42,137.	20,756. 16,746. 4,635.		
	<ul> <li>3 Investment income (including dividends other similar amounts)</li> <li>4 Income from investment of tax-exempt</li> <li>5 Royalties</li> </ul>	•	15,235.			15,235.
	6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss)	(ii) Personal				
	7 a Gross amount from sales of assets other than inventory  b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)	(ii) Other				
/enne	8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c)					

8 a Gross income from fundraising events
(not including \$
of contributions reported on line 1c)
See Part IV, line 18
b Less direct expenses
c Net income or (loss) from fundraising events

9 a Gross income from gaming activities
See Part IV, line 19
a

b Less. direct expenses
c Net income or (loss) from gaming activities

10 a Gross sales of inventory, less returns and allowances
b Less cost of goods sold
b

c Net income or (loss) from sales of inventory

Miscellaneous Revenue Business Code

11 a

d All other revenue
e Total. Add lines 11a-11d

12 Total revenue. See instructions

4,045,633 TEEA0109L 08/03/18 42,137

15, 235. Form **990** (2018)

0

BAA

## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (D) Do not include amounts reported on lines Total expenses Program service Management and Fundraising 6b, 7b, 8b, 9b, and 10b of Part VIII. **expenses** general expenses expenses Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and for-eign individuals. See Part IV, lines 15 and 16. Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 94,000 0 94,000 0. 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 Other salaries and wages 957,437 781. 268 176,169 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 277,608 252,623 24,985 Other employee benefits 578,804 526,712 52,092 10 Payroll taxes 152,891 139,131 13,760 11 Fees for services (non-employees) a Management **b** Legal 12,596 12,596 c Accounting 12,996 12,996 **d** Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 36,871 36,871 Advertising and promotion 47,274 4,255 Office expenses 43,019 13 14 Information technology Royalties 15 193,914 19,178 16 Occupancy 213,092 17 Payments of travel or entertainment expenses for any federal, state, or local public officials 9,732 Conferences, conventions, and meetings 10,695 963 Interest Payments to affiliates 21 Depreciation, depletion, and amortization 169,934 154,640 15,294 23 Insurance 48,183 43,847. 4,336 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) 367,365 367,365 a LIBRARY MATERIALS & PROGRAMS b SCLS SERVICE PLAN \_\_\_ 48,459 48,459 31,535 28,697 2,838 c Printing and Publications d AUTOMATION 27.579 27,579 3,709 67,310. 63,601. e All other expenses 4,154,629 3,680,587 474,042 0. 25 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► I if following SOP 98-2 (ASC 958-720)

Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year (B) End of year 1 1 Cash - non-interest-bearing 101,287 528,630. 2 2 Savings and temporary cash investments 2,612,020 2,314,501. 3 3 Pledges and grants receivable, net Accounts receivable, net 165,879 4 134,860. Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 7 Notes and loans receivable, net Inventories for sale or use 8 9 Prepaid expenses and deferred charges 14,544 26,530 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 7,559,935 10b 10 c b Less accumulated depreciation 4,683,961 2,804,997 2,875,974. 11 11 Investments - publicly traded securities. 12 Investments - other securities See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 14 14 Intangible assets 15 15 Other assets See Part IV, line 11 391,670. 462,346. 16 6,342,841. 16 Total assets. Add lines 1 through 15 (must equal line 34) 6,090,397 Accounts payable and accrued expenses 56,265 17 204,696. 17 18 18 Grants payable 19 Deferred revenue 19 Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 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. 3,820,223 25 4,033,232. Total liabilities. Add lines 17 through 25 3,876,488 26 4,237,928. X and complete Organizations that follow SFAS 117 (ASC 958), check here ▶ or Fund Balances lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets -591,088 -771,061. 28 Temporarily restricted net assets 2,804,997 2,875,974. 28 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 2,213,909. 33 2,104,913. Total liabilities and net assets/fund balances 6,090,397 34 6,342,841. 34

BAA

Part X

**Balance Sheet** 

TEEA0111L 08/03/18

Form **990** (2018)

Forn	n 990 (2018) RIVERHEAD FREE LIBRARY ASSOCIATION 11	L-1897225	Р	age 12				
Pa	Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI							
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,045,	633.				
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,154,	629.				
3	3 Revenue less expenses. Subtract line 2 from line 1							
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).							
5	Net unrealized gains (losses) on investments	5						
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 in Schedule O)	9		0.				
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,104,	913.				
Pa	ttXIII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII	_		$\Box$				
1	Accounting method used to prepare the Form 990: Cash X Accrual Other  If the organization changed its method of accounting from a prior year or checked 'Other,' explain		Yes	No				
	in Schedule O.							
2 8	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	X				
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both  Separate basis  Consolidated basis  Both consolidated and separate basis								
	Were the organization's financial statements audited by an independent accountant?		2b X	<u> </u>				
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, or both  X Separate basis Consolidated basis Both consolidated and separate basis	arate						
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?								
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.								
	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3 a	X				
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required a	iudit						

TEEA0112L 08/03/18

Form 990 (2018)

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

BAA

## **SCHEDULE A** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

## **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

Employer identification number

2018

Open to Public Inspection

	<u>ERHEAD FREE LIBRARY A</u>					11-189722				
	Reason for Public Cha						tions.			
The o	organization is not a private found	lation because it is: (	For lines 1 through 12,	check or	nly one	box )				
1	A church, convention of church	es, or association of cl	nurches described in <b>sec</b> t	tion 170(l	b)(1)(A)(	i)	7			
2	A school described in section 1	70(b)(1)(A)(ii). (Attach	Schedule E (Form 990 or	990-EZ)	)	(	) l			
3	A hospital or a cooperative h	ospital service organ	ızatıon described in <b>se</b> d	ction 170	(b)(1)(A	λχiii).				
4	A medical research organiza	tion operated in conju	unction with a hospital o	describe	d in sec	tion 170(b)(1)(A)(iii) E	nter the hospital's			
	name, city, and state									
5	An organization operated for section 170(b)(1)(A)(iv). (Co	the benefit of a colle mplete Part II)	ge or university owned	or opera	ated by	a governmental unit de	escribed in			
6	A federal, state, or local gove	ernment or governme	intal unit described in s	ection 1	<b>70(b)(</b> 1)	(A)(v).				
7	An organization that normally r in section 170(b)(1)(A)(vi).	eceives a substantial p Complete Part II.)	eart of its support from a	governme	ental uni	t or from the general put	olic described			
8	A community trust described	ın section 170(b)(1)(	A)(vi). (Complete Part I	1.)						
9	An agricultural research organi or university or a non-land-gran university									
10										
11	An organization organized ar	nd operated exclusive	ly to test for public safe	ety. See	section	1 509(a)(4).				
12	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g									
а	Type I. A supporting organization organization (s) the power to recomplete Part IV, Sections A	gularly appoint or elect	d, or controlled by its sup a majority of the director	ported or rs or trus	rganizati tees of t	on(s), typically by giving he supporting organization	the supported on <b>You must</b>			
Ь	Type II. A supporting organiz management of the supporting must complete Part IV, Secti	organization vested in	ontrolled in connection the same persons that c	with its ontrol or	support manage	ed organization(s), by the supported organization	having control or on(s) <b>You</b>			
c	Type III functionally integrated. organization(s) (see instruction)	A supporting organizations) You must comp	ion operated in connection olete Part IV, Sections	n with, an	nd function	onally integrated with, its	supported			
d	Type III non-functionally integritunctionally integrated. The constructions) You must compare the constructions of the construction of the con	rganization generally	must satisfy a distribu	tion requ	with its s Jiremen	supported organization(s) t and an attentiveness	that is not requirement (see			
е		ation received a writt	en determination from	the IRS	that it is	a Type I, Type II, Typ	e III functionally			
f	Enter the number of supported		,, 5 5							
g	Provide the following information	n about the supported	d organization(s)							
(	(i) Name of supported organization	(ii) EIN	(III) Type of organization (described on lines 1-10 above (see instructions))	(iv) is organizati in your go docum	on listed	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
				Yes	No					
<u>(A)</u>						-				
(B)										
(C)	(C)									
(D)										
(E)										
Total		4								

Page 2

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

(Complete of	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
	in fails to qualify under the tests listed below inli	

Section A. Public Support								
begi	ndar year (or fiscal year nning in) ►	(a) 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	(f) Total	
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')	33,570.	24,217.	24,682.	90,943.	94,778.	268,190.	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	3,352,213.	3,466,541.	3,563,615.	3,685,470.	3,893,483.	17,961,322.	
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.	
4	Total. Add lines 1 through 3	3,385,783.	3,490,758.	3,588,297.	3,776,413.	3,988,261.	18,229,512.	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0.	
6	Public support. Subtract line 5 from line 4						18,229,512.	
Sec	tion B. Total Support							
Cale: begi	ndar year (or fiscal year nning in) ►	(a) 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	(f) Total	
7	Amounts from line 4	3,385,783.	3,490,758.	3,588,297.	3,776,413.	3,988,261.	18,229,512.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1,925.	1,416.	1,640.	7,865.	15,235.	28,081.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	2,426.	10,325.		9,560.	4,635.	26,946.	
	Total support. Add lines 7 through 10						18,284,539.	
12	Gross receipts from related activ	vities, etc. (see in:	structions)			12	0.	
13	First five years. If the Form 990 is organization, check this box and		n's first, second, th	ird, fourth, or fifth	tax year as a section	on 501(c)(3)	▶ 🗌	
	tion C. Computation of Pu	<u> </u>						
-	Public support percentage for 20	•	• •	ne 11, column (f))	l	14	99.70%	
	Public support percentage from				14 00 5 7	15	99.77 %	
	<b>33-1/3% support test—2018.</b> If t and <b>stop here</b> . The organization	qualifies as a pul	blicly supported o	rganization			► X	
b	33-1/3% support test—2017. If the and stop here. The organization	ne organization did i qualifies as a pu	d not check a box blicly supported o	on line 13 or 16a organization	a, and line 15 is 3	3-1/3% or more, o	check this box	
1 <b>7</b> a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts'	meets the 'facts-a	and-circumstance	s' test, check this	box and stop he	r <b>e.</b> Explain in Parl	VI how	
	10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances'	and-circumstance test. The organiza	s' test, check this ation qualifies as	box and <b>stop he</b> r a publicly support	re. Explain in Part ed organization	VI how the ►	
	Private foundation. If the organi	zation did not che	eck a box on line	13, 16a, 16b, 17a		<del></del>		
RΔΔ					Scl	hadula A (Form 9)	90 or 990-F7) 2018	

RIVERHEAD FREE LIBRARY ASSOCIATION 11-1897225 Page 3 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 to	ests listed below,	please complete	Part II)			
Sec	tion A. Public Support		<u></u>				
Calend	dar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	<b>(e)</b> 2018	(f) Total
1	Gifts, grants, contributions,	(1) = 1		· · ·	1	· · · · · · · · · · · · · · · · · · ·	
	Gifts, grants, contributions, and membership fees received (Do not include					/	
	any 'unusual grants ')						
2	Gross receipts from admissions,						<del>                                     </del>
	merchandise sold or services						
	performed, or facilities 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			1	A		
6	Total. Add lines 1 through 5						
	Amounts included on lines 1,			/			
	2, and 3 received from	<b>\</b>					
	disqualified persons		1	//			
b	Amounts included on lines 2				<b>;</b>		
	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		<u> </u>				
8	Public support. (Subtract line	,			1		
	7c from line 6 )			<u> </u>			
Sec	tion B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	<b>(ĉ)</b> 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends,	-	1				-
	payments received on securities loans,	<b>_</b>	ł'				
	rents, royalties, and income from similar sources						
h	Unrelated business taxable	<b></b>		·	1		<del> </del>
	income (less section 511						
	taxes) from businesses						
	acquired after June 30, 1975						
-	Add lines 10a and 10b						<del></del>
11	Net income from unrelated business activities not included in line 10b.	/					
	whether or not the business is						
	regularly carried on	/	ļ		1		
12	Other income. Do not include	1				<b>√</b>	
	gain or loss from the sale of capital assets (Explain in	1					
	Part VI)						l
13	Total support. (Add lines,9,						
	10c, 11, and 12)		<u> </u>				
14	First five years. If the Form 990	is for the organiz	ation's first, seco	nd, third, fourth, (	or fifth tax year as	a section 501(c)	(3)
	organization, check this box and						
Sec	tion C. Computation of Pu						<del></del>
15	Public support percentage for 20	018 (line 8, colum	n (f), divided by l	ine 13, column (f	))	135	%
16	Public support percentage from	2017 Schedule A	, Part III, line 15			16	8
Sec	tion D. Computation of Inv	estment Inco	me Percentag	e		•	1
17	Investment/income percentage f				lumn (f))	17	
	, · · · · · · · · · · · · · · · · · · ·			=	(1//	18	8
18	Investment income percentage t						1
19a	33-1/3% support tests - 2018. If						
	is not more than 33-1/3%, check			•		-	<b>"</b> —
D	33-1/3% support tests—2017. If line 18 is not more than 33-1/3%	the organization of	and stop here Th	ox on line 14 or li ne organization di	ne 19a, and line l Jalifies as a public	o is more than 3.	anization
20	Private foundation. If the organi		•			_	
20	A LINATE IOUNGATION II THE OLGANI	izacioni ulu NOL CNE	on a DOX OII IIIIE	1 <del>7</del> , 120, 01 130, (	CHECK HIS DOX ALK	, 200 monachons	· IN

11-1897225

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. Al	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 <b>Part VI</b> 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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below			
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in <b>Part VI</b> what controls the organization put in place to ensure such use	3c		
<b>4</b> 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	<b>4</b> a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		<u> </u>	
С	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 <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable) Also, provide detail in <b>Part VI</b> , 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		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	<u>`</u>	
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in <b>Part VI</b> .	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	<u>.</u>	. <u></u>
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))?  If 'Yes,' provide detail in Part VI	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI	9b		
С	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 <b>Part VI</b>	9c		
0a	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 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		لـــــا

Parl	t IV	Supporting Organizations (continued)			,
	المحال	he expensively accounted a gift or contribution from any of the following percent?		Yes	No
		he organization accepted a gift or contribution from any of the following persons?  son who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
		ning body of a supported organization?	11a		
b	A fam	nily member of a person described in (a) above?	11b		L
		% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		<u> </u>
Sect	ion E	B. Type I Supporting Organizations	-		T
1	Did th	e directors, trustees, or membership of one or more supported organizations have the power to regularly appoint		Yes	No
	or elec-	ct at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in		ļ. 	
	Part \	VI how the supported organization(s) effectively operated, supervised, or controlled the 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, ed to such powers during the tax year	1		
2	Did th	ne 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 <b>Part VI</b> how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the			
	suppo	orting organization	2		
Sect	tion (	C. Type II Supporting Organizations	-	V	N
				Yes	No
1	Were of each	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			
	suppo	orting organization was vested in the same persons that controlled or managed the supported organization(s)	1		<u> </u>
Sect	ion [	D. All Type III Supporting Organizations		<u> </u>	1
			r	Yes	No
1	Did th	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			ĺ .
	vear.	(ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organ	nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were	e 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	Rv re	ason of the relationship described in (2), 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 mes during the tax year? If 'Yes,' describe in <b>Part VI</b> the role the organization's supported organizations played			
		s regard	3		
Sect	tion E	E. Type III Functionally Integrated Supporting Organizations			
1	Check	k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	Пт	he organization satisfied the Activities Test Complete line 2 below			
ь	Πī	he organization is the parent of each of its supported organizations. Complete line 3 below.			
С	Т	the organization supported a governmental entity  Describe in <b>Part VI</b> how you supported a government entity (see in	nstruc	tions)	
2	Activi	tries Test. <i>Answer (a) and (b) below.</i>		Yes	No
		ubstantially all of the organization's activities during the tax year directly further the exempt purposes of the	<u> </u>		
	suppo organ	orted organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported inizations and explain how these activities directly furthered their exempt purposes, how the organization was			
		onsive to those supported organizations, and how the organization determined that these activities constituted tantially all of its activities	2a		
b	Did th	ne activities described in (a) constitute activities that, but for the organization's involvement, one or more of			
	the or	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			ļ
		nization's involvement	2b		
		nt of Supported Organizations Answer (a) and (b) below.			
а	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 <b>Part VI</b>.</i>	 3a		
		the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its		, . `	
D	Suppo	orted organizations? If 'Yes,' describe in <b>Part VI</b> the role played by the organization in this regard	3b		

Page 6

Pai	₹ V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizati	ons	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	t on No	v 20, 1970 (explain ii complete Sections A	n Part VI) <b>See</b> 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		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion 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).		· · · · · · · · · · · · · · · · · · ·	
a	Average monthly value of securities	1a		
L	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
•	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 1-1/2% 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 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		<u> </u>
Sec	tion C – Distributable Amount	:		Current Year
_1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2 ,	*la	
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		1
6 	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally inte	grated	Type III supporting or	ganization

Schedule A (Form 990 or 990-EZ) 2018

BAA

			91225 Fage
	ipporting Organiza	ations (continuea)	
<del></del>			Current Year
	•		<del></del>
Amounts paid to perform activity that directly furthers exempt purposes on excess of income from activity	of supported organization		
	upported organizations		
and the same of th			
<del></del>			
Distributions to attentive supported organizations to which the organization <b>Part VI</b> ). See instructions	on is responsive (provide	e details	
Distributable amount for 2018 from Section C, line 6			
Line 8 amount divided by line 9 amount			
tion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
Underdistributions, if any, for years prior to 2018 (reasonable cause required — explain in Part VI) See instructions.			
Excess distributions carryover, if any, to 2018			
From 2013			
P From 2014			
From 2015			
From 2016			
From 2017			
f Total of lines 3a through e			
Applied to underdistributions of prior years			
Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
Distributions for 2018 from Section D, line 7 \$			
Applied to underdistributions of prior years			
Applied to 2018 distributable amount			
Remainder Subtract lines 4a and 4b from 4.			
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			
Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions			
Excess distributions carryover to 2019. Add lines 3j and 4c			
Breakdown of line 7			
Excess from 2014			
Excess from 2017			
Excess from 2018	_		_
	Amounts paid to supported organizations to accomplish exempt purposes of income from activity that directly furthers exempt purposes of in excess of income from activity.  Administrative expenses paid to accomplish exempt purposes of in excess of income from activity.  Administrative expenses paid to accomplish exempt purposes of sing accomplish exempt purposes of sing excess of income from activity.  Administrative expenses paid to accomplish exempt purposes of sing exempt purpose	Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations nexcess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations nexcess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations nexcess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations nexcess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations nexcess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations nexcess of supported organizations. Amounts paid to acquire exempt use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI) See instructions  Total annual distributions. Add lines 1 through 6 Distributable amount for 2018 from Section C, line 6 Line 8 amount divided by line 9 amount  (cition E — Distribution Allocations (see instructions) Distributable amount for 2018 from Section C, line 6 Underdistributions, if any, for years prior to 2018 (reasonable cause required — explain in Part VI) See instructions.  Excess distributions carryover, if any, to 2018  From 2013  From 2014 From 2015 From 2016 From 2017  f Total of lines 3a through e g Applied to underdistributions of prior years Applied to 2018 distributable amount  I Carryover from 2013 not applied (see instructions) J Remainder Subtract lines 3a, 3h, and 3i from 3f Distributions for 2018 from Section D, line 7  Papplied to underdistributions or 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  Exemaining 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  Excess from 2014 Exce	It V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)  tition D — Distributions  Amounts paid to supported organizations to accomplish exempt purposes  Amounts paid to supported organizations to accomplish exempt purposes of supported organizations, in excess of income trom activity that directly furthers exempt purposes of supported organizations, in excess of income trom activity and the complex organizations or excess of income trom activity that directly furthers exempt purposes of supported organizations.  Amounts paid to acquire exempt-use assets  Qualified set-aside amounts (pror IRS approval required)  Other distributions (describe in Part VI). See instructions  Total annual distributions. Add lines 1 through 6  Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions  Distributable amount for 2018 from Section C, line 6  Underdistributions and invided by line 9 amount  tition E — Distribution Allocations (see instructions)  Distributable amount for 2018 from Section C, line 6  Underdistributions, if any, for years prior to 2018 (reasonable cause required — explain in Part VI). See instructions.  Excess distributions carryover, if any, to 2018  From 2013  From 2013  From 2014  From 2016  From 2016  From 2016  From 2017  1 Total of lines 3a through e  Applied to underdistributions of prior years  Applied to 2018 distributable amount  1 Carryover from 2013 not applied (see instructions)  Remainder Subtract lines 3g, 3h, and 3i from 3f  Distributions for 2018 from Section D, line 7  \$ a proper do 2018 distributable amount  Remainer Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI See instructions  Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4c from line 1 For result greater than zero, explain in Part VI See instructions  Remaining underdistributions of prior years  A police to 2018 distributable amount  Excess from 20

BAA

Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018 RIVERHEAD FREE LIBRARY ASSOCIATION 11-1897225 Page 8

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.)

## Part II, Line 10 - Other Income

Nature and Source		2018	_	2017	 2016		2015		2014
Tota	\$ 1 \$	4,635. 4,635.		9,560. 9,560.	\$ 0.	<u>\$</u> \$	10,325. 10,325.	<u>\$</u> \$	2,426. 2,426.

## **SCHEDULE D** (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No 1545-0047

Open to Rublic Inspection

Department of the Treasury Internal Revenue Service

Name	e of the organization			Employer identification number
	RIVERHEAD FREE LIBRARY ASS	OCIATION		11-1897225
Pa	Organizations Maintaining Dono Complete if the organization ans	r Advised Funds or Other Similar F wered 'Yes' on Form 990, Part IV, II	Funds or Acc	
		(a) Donor advised funds	<b>(b)</b> Fu	unds 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 dorare the organization's property, subject to the	nor advisors in writing that the assets held in organization's exclusive legal control?	n donor advised f	funds Yes No
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefit impermissible private benefit?	rs, and donor advisors in writing that grant to of the donor or donor advisor, or for any ot	funds can be use ther purpose conf	ed only ferring Yes No
Pai	Conservation Easements. Complete if the organization ans	wered 'Yes' on Form 990, Part IV, II	ine 7.	
1		<del></del>	·	
	Preservation of land for public use (e g , r	ecreation or education) Preservation	on of a historicall	y important land area
	Protection of natural habitat	Preservation	on of a certified h	nistoric structure
	Preservation of open space	_		
2	Complete lines 2a through 2d if the organization last day of the tax year	neld a qualified conservation contribution in the		
	Total average of companyation accompany		<del></del>	eld at the End of the Tax Year
	a Total number of conservation easements. b Total acreage restricted by conservation ease:	mente	2 a 2 b	
	c Number of conservation easements on a certi		2 c	
		` '		
	d Number of conservation easements included in structure listed in the National Register		2 d	
	Number of conservation easements modified, trar tax year ▶		by the organization	rearing the
4	Number of states where property subject to conse	<u></u>	<del></del>	
5	Does the organization have a written policy re and enforcement of the conservation easement		handling of viola	ations, Yes No
6	Staff and volunteer hours devoted to monitoring,	nspecting, handling of violations, and enforcing	g conservation eas	ements during the year
7	Amount of expenses incurred in monitoring, insper  ▶ \$	cting, handling of violations, and enforcing con-	servation easemei	nts during the year
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of	f section 170(h)(4	<sup>1)(B)(i)</sup>
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote conservation easements.	conservation easements in its revenue and exto the organization's financial statements the	pense statement, at describes the	and balance sheet, and organization's accounting for
Pa	ղլլլ∎ Organizations Maintaining Colle	ctions of Art, Historical Treasures, wered 'Yes' on Form 990, Part IV, II	or Other Sim	ilar Assets.
1:	a If the organization elected, as permitted unde art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its finar	eld for public exhibition, education, or research i	in furtherance of p	t and balance sheet works of jublic service, provide,
١	b If the organization elected, as permitted unde historical treasures, or other similar assets held for following amounts relating to these items	or public exhibition, education, or research in fu	nue statement an ortherance of public	d balance sheet works of art, c service, provide the
	(i) Revenue included on Form 990, Part VIII,	line 1		<b>►</b> \$
	(ii) Assets included in Form 990, Part X			<b>►</b> \$
	If the organization received or held works of art, hamounts required to be reported under SFAS	116 (ASC 958) relating to these items	nancial gain, prov	_
	a Revenue included on Form 990, Part VIII, line	1.		<b>▶</b> \$
- 1	b Assets included in Form 990, Part X			▶\$

Schedule D (Form 990) 2018 RIVER					11-189			Page 2
Part III Organizations Maintai	ining Collectio	ns of Art, Histo	orica	Treasures, o	r Other Similar Ass	sets (c	ontinu	ied)
3 Using the organization's acquisition items (check all that apply)	, accession, and oth				re a significant use of its	collection	n	
a Public exhibition		₩		hange programs				
<b>b</b> Scholarly research		e U Other						
c Preservation for future gener								
4 Provide a description of the organiz Part XIII				-				
5 During the year, did the organiza to be sold to raise funds rather th	tion solicit or recei an to be main <u>tain</u>	ve donations of a ed as part of the o	rt, hist organiz	orical treasures, o zation's collection	or other similar assets	Yes	; [	No
Part IV Escrow and Custodia line 9, or reported an					swered 'Yes' on Fo	orm 99	0, Par	t IV,
1 a Is the organization an agent, trus on Form 990, Part X?	stee, custodian or o	other intermediary	for co	intributions or oth	er assets not included	Yes	; [	No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIII and co	implete the follow	ıng tat	ole:				
						Amoun	ıt	
c Beginning balance					1 c			
<b>d</b> Additions during the year					1 d			
e Distributions during the year					1 e			
f Ending balance					1f			
2a Did the organization include an a	mount on Form 99	0, Part X, line 21,	, for es	scrow or custodial	account liability?	Yes	. [	No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIII Check	k here if the expla	nation	has been provide	ed on Part XIII			
Part V Endowment Funds. C	omplete if the	organization ar	25.WO	red 'Ves' on Fr	orm 990 Part IV I	ne 10		
Part V   Endowment Funds. C		<del></del>		(c) Two years back			Four year	e back
1 a Beginning of year balance	(a) Current year 150,000	(b) Prior yea ). 150,0		150,00				,711.
<b>b</b> Contributions	130,000	7. 150,0	. 000	130,00	0. 134,711	+	154,	/11.
<b>b</b> Contributions .						+-		
<ul> <li>Net investment earnings, gains, and losses</li> </ul>								
d Grants or scholarships		_				<b>↓</b>		
<ul> <li>Other expenditures for facilities and programs</li> </ul>					4,711			
f Administrative expenses								
<b>g</b> End of year balance	150,000			150,00			154,	<u>,711.</u>
2 Provide the estimated percentage	e of the current ye	ar end balance (lii	ne 1g,	column (a)) held	as			
a Board designated or quasi-endowm	ent ► <u>1</u>	00.00 %						
<b>b</b> Permanent endowment ►	%							
c Temporarily restricted endowmer	nt ►	%						
The percentages on lines 2a, 2b, ar	nd 2c should equal 1	00%						
3 a Are there endowment funds not in the	he possession of the	e organization that	are hel	d and administered	for the	1	Yes	No.
organization by						2-(1)	res	No
(i) unrelated organizations						3a(i)	<del> </del>	X
(ii) related organizations			C-1	badda D2		3a(ii)	<u> </u>	X_
<b>b</b> If 'Yes' on line 3a(ii), are the rela	=					3b		<u> </u>
4 Describe in Part XIII the intended		lization's endowm	ent tui	nds See Par	t XIII			
Part VI Land, Buildings, and Complete if the organi		nd 'Yes' on For	m 99	0 Part IV line	11a See Form 9	90 Pa	rt X lı	ne 10
						,		
Description of property	(a) C	ost or other basis (investment)	(b)	Cost or other cases (other)	(c) Accumulated depreciation	(a)	Book va	aiue
1 a Land		. ,		63,412.			6.3	,412.
<b>b</b> Buildings				5,807,490.	3,204,677.	2		,813.
c Leasehold improvements				2,00,,100.	<u> </u>	<del>-</del>	·, -,-	,
d Equipment			<del>                                     </del>					

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c ).

BAA

2,875,974. Schedule D (Form 990) 2018

209,749.

1,479,284

1,689,033.

PartiVIII Investments - Other Securities.		N/A	3.223
· Complete if the organization answered	'Yes' on Form 990		990, Part X, line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cost or end-	of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			·
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(1)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12)			
<u>PartiVIIII</u> Investments – Program Related.	'Vos' on Form 000	N/A	000 Part V line 12
Complete if the organization answered  (a) Description of investment	(b) Book value	(c) Method of valuation. Cost or end	
	(b) Book value	(c) Method of Valdation. Cost of end	1-01-year market value
(1)			
(2)			
(4)			
(5)	-		
(6)			
(7)	-		
(8)			<del></del>
(9)			
(10)			
Total (Column (b) must equal Form 990, Part X, column (B) line 13)			
PartilX Other Assets.		2 David IV Ivaa 11d Caa Farra (	200 D+ V L 1E
Complete if the organization answered	res on Form 990	J, Part IV, line 11d. See Form S	(b) Book value
(1) DEFERRED OUTFLOW ON OTHER POST-EMP		<del> </del>	122,477.
(2) DEFERRED OUTFLOW ON PENSION	DOTTIBLE		339,869.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	<del></del>		
Total. (Column (b) must equal Form 990, Part X, column (E	R) line 15.)		462,346.
PartX Other Liabilities.	o) line 13 )		402,340.
Complete if the organization answered 'Yes' on Fe	orm 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 25	).
(a) Description of liability	(b) Book value		
(1) Federal income taxes		·	
(2) COMPENSATED ABSENCES	136,37		
(3) DEFERRED INFLOWS	209,39		
(4) NET PENSION LIABILITY (5) OBLIGATION FOR POST RETIREMENT BEN	371,71 IE 3,315,75		
(5) OBLIGATION FOR POST RETIREMENT BEN (6)	IE 3,313,73		
(7)			
(8)		<u> </u>	
(9)			
(10)			
(11)			
Total (Column (b) must equal Form 990, Part X, column (B) line 25)	► 4,033,23		
2. Liability for uncertain tax positions. In Part XIII, provide the text of the foctax positions under FIN 48 (ASC 740). Check here if the text of the footnote has a constitute of the footnote has a	_		s liability for uncertain

Part XI Reconciliation of Revenue per Audited Financial Statements With Reve	nue per Return.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 13	2a.	
1 Total revenue, gains, and other support per audited financial statements .	1	4,045,633.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		·
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities 2b		
c Recoveries of prior year grants 2c		
d Other (Describe in Part XIII )		
e Add lines 2a through 2d.	2 e	
3 Subtract line 2e from line 1	3	4,045,633.
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	4,045,633.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses	enses per Return	•
Complete if the organization answered 'Yes' on Form 990, Part IV, line 1		
1 Total expenses and losses per audited financial statements	1	4,154,629.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities 2a		
b Prior year adjustments 2b		
c Other losses . 2c	<u> </u>	
d Other (Describe in Part XIII )	•	
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	4,154,629.
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		
b Other (Describe in Part XIII )		
c Add lines 4a and 4b	4 c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	4 154 629

Part XIII | Supplemental Information.

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

## Part V, Line 4 - Intended Uses Of Endowment Fund

\$150,000 IS ASSIGNED TO BE SPENT ON POST EMPLOYMENT BENEFITS.

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.

OMB No 1545-0047 2018 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

RIVERHEAD FREE LIBRARY ASSOCIATION

Employer identification number

11-1897225

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

THE BOARD DESIGNATES THE RESPONSIBILITY FOR REVIEWING THE FORM 990 TO THE DIRECTOR AND THE TREASURER OF THE BOARD. THE TREASURER THEN REPORTS ORALLY TO THE REST OF THE BOARD.

Form 990. Part VI. Line 12c - Explanation of Monitoring and Enforcement of Conflicts

EACH TRUSTEE AND EMPLOYEE ANNUALLY SIGNS A STATEMENT WHICH AFFIRMS THAT THEY HAVE RECIEVED A COPY OF THE CONFLICT OF INTEREST POLICY; HAS READ THE POLICY AND HAS AGREED TO COMPLY WITH THE POLICY.

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management AN INDEPENDENT BOARD DELIBERATES THE COMPENSATION PACKAGE FOR THE LIBRARY DIRECTOR. THE FINAL OUTCOME OF THE DELIBERATION IS DOCUMENTED IN THE MINUTES.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available THE DOCUMENTS ARE AVAILABLE UPON REQUEST.