Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2014

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.
 Information about Form 990 and its instructions is at www.irs.gov/form990.

Α	For the 2	014 calendar year, or tax year beginning 07/01 , 2014, and e	ending	06/30	, 20 15						
В	Check if a	oplicable: C Name of organization PUBLIC LIBRARY ASSOCIATION OF ANNAPOLIS	AND A A CO II	D Employ	er identification number						
	Address c	nange Doing business as			52-6001871						
	Name cha	Number and street (or P.O. box if mail is not delivered to street address) Roc	m/suite	E Telepho	ne number						
П	Initial retur				410-222-7371						
П	Final return	Other states and state and states are states and states and states are states are states and states are states									
П	Amended			G Gross re	G Gross receipts \$ 23,852,411						
\Box		n pending F Name and address of principal officer: Scott Sedmak	H(a) Is this a	a group return for							
	пррпоапо	5 Harry S Truman Pkwy, Annapolis, MD 21401	1	•	s included? Yes No						
_	Tax-exem		- '		ee instructions)						
<u>'</u>	Website:			up exemption							
_		ganization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of fo			of legal domicile: MD						
_	art I	Summary	omation. 173) W Otate	or legal dornicile. VID						
		Briefly describe the organization's mission or most significant activities: Pr	roviolon of nub	io libroru o	amilian to the recidents						
ø	l .		rovision of publ	ic library s	ervice to the residents						
ŭ		of Anne Arundel County, MD									
rra		Nearly this have North if the agree is at an all a country and the agree at an analysis and the second in the seco									
ove		Check this box \(\subseteq \subseteq \) if the organization discontinued its operations or dispose the property of the group of the gr		1							
Ğ		lumber of voting members of the governing body (Part VI, line 1a)			20						
S S	l .	lumber of independent voting members of the governing body (Part VI, line	•		20						
iţi	l .	otal number of individuals employed in calendar year 2014 (Part V, line 2a)			465						
Activities & Governance		otal number of volunteers (estimate if necessary)		. 6	408						
⋖	l .	(-), (-),			31,720						
	d N	let unrelated business taxable income from Form 990-T, line 34		. 7b	5,450						
Revenue			Prior		Current Year						
		Contributions and grants (Part VIII, line 1h)		21,009,184	22,969,058						
		Program service revenue (Part VIII, line 2g)		820,260	858,436						
		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		4	2						
_	l .	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	9,663	10,146							
		otal revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12	·	21,839,111	23,837,642						
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0	0						
	l .	Benefits paid to or for members (Part IX, column (A), line 4)		0	0						
8		calaries, other compensation, employee benefits (Part IX, column (A), lines 5-10		16,953,309	18,140,746						
Expenses	16 a F	Professional fundraising fees (Part IX, column (A), line 11e)		0	0						
xbe	b T	otal fundraising expenses (Part IX, column (D), line 25) 158,73	3								
Ш	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		6,383,491	6,595,101						
	18 T	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	-	23,336,800	24,735,847						
		Revenue less expenses. Subtract line 18 from line 12		-1,497,689	-898,205						
Net Assets or Fund Balances			Beginning of	Current Year	End of Year						
sets	20 T	otal assets (Part X, line 16)		11,257,688	13,247,948						
t Asi	21 T	otal liabilities (Part X, line 26)		17,482,155	22,412,288						
캶	22 N	let assets or fund balances. Subtract line 21 from line 20		-6,224,467	-9,164,340						
Pa	art II	Signature Block									
Un	der penalti	es of perjury, I declare that I have examined this return, including accompanying schedules and	statements, and to	the best of i	my knowledge and belief, it is						
tru	e, correct,	and complete. Declaration of preparer (other than officer) is based on all information of which pre	eparer has any kno	wledge.							
Sig	gn	Signature of officer	i	Date							
He	re	Scott Sedmak, Chief Financial Officer									
		Type or print name and title									
Pa	id	Print/Type preparer's name Preparer's signature	Date	Check	if PTIN						
				self-em							
	eparer	Firm's name	F	rm's EIN ▶							
US	e Only	Firm's address ►		hone no.							
Ma	y the IRS	G discuss this return with the preparer shown above? (see instructions) .									

Part	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:		· · · · <u>·</u> ⊔
•	Drawisian of public library consists to the recidents of Anna Ayundal County MD		
	Trovision of public library sorvice to the residents of runner wanted county, ind		
2	Did the organization undertake any significant program services during the year wh		е
	prior Form 990 or 990-EZ?		🗌 Yes 🛮 🗹 No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it		n
	services?		☐ Yes ☑ No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three		
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the	amount of grants and all	ocations to others
	the total expenses, and revenue, if any, for each program service reported.		
	(0.1	\	
4a	(Code: 9,986,695 including grants of \$) (Revenue \$	658,713)
	Circulated 4,957,017 items to the public		
4b	(Code:) (Expenses \$ 3,994,678 including grants of \$) (Revenue \$	71,939)
	Answered 406,658 reference inquiries either in person or via telephone or email		·
4c	(Code: 2,996,008 including grants of \$) (Revenue \$	<u>o</u>)
	Presented 5,032 programs and performances to 180,077 customers		
4d	Other program services (Describe in Schedule O.) See Schedule O, Statement 2		
Tu	(Expenses \$ 2,996,009 including grants of \$ 0) (Revenue \$	127,784)	
4e	Total program service expenses ► 19,973,390	121,104)	
	TOTAL PROGRAM SERVICE EXPENSES F		

Part	V Checklist of Required Schedules			
			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	V	+
2 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2	~	+
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		~
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	,	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		,
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		,
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		_
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a	-		+
9	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		,
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
11	endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		V
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	~	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		,
С	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	11c		,
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	,	
е	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e	~	1
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		,
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII			~
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If</i> "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12a	~	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b		V
14 a		14a		V
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			†
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		,
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		,
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		,
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I (see instructions)	17		,
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		,
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			_
20 a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	19 20a		V
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		+

Part	V Checklist of Required Schedules (continued)			
			Yes	No
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		~
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		~
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	00	_	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	23 24a		<i>'</i>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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? <i>If "Yes," complete Schedule L, Part I</i>	24d 25a		~
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		,
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		,
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	27		~
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		v v
С	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? <i>If "Yes," complete Schedule L, Part IV</i>	28c		~
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30	V	~
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
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		~
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? <i>If</i> "Yes," <i>complete Schedule R, Part I</i>	33		~
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		~
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		/
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	35b 36		~
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R,</i>	30		
38	Part VI	37		~
	19? Note. All Form 990 filers are required to complete Schedule O	38	~	

	00 (2014)			Page :
Part				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	. L
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0		res	INO
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	1	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 465			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	~	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	~	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			_
	account)?	4a		-
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7.		
a	If "Yes," indicate the number of Forms 8282 filed during the year	7с		
d e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		
g g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
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 . [10b]			
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
a b	Gross income from members or shareholders			
~	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year? .

14a

14b

13b

13c

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Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Nο 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a 20 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. Enter the number of voting members included in line 1a, above, who are independent 1b 20 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 ~ 3 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a ~ 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Nο **10a** Did the organization have local chapters, branches, or affiliates? 10a 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 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? *If "No," go to line 13* 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b 1 Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c ~ 13 13 ~ 1 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 1 15a 15b 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 16a / b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website ✓ Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: Scott A Sedmak, (410)222-7236

Part VI

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

Check this box if neither the organization no	r any relate	d org	aniz	atic	n c	ompe	ensa	ted any currer	t officer, directo	r, or trustee.
(C)										
(A)	(B)	(-1			ition	. 41		(D)	(E)	(F)
Name and Title	Average	`	(do not chec box, unless p					Reportable	Reportable	Estimated
	hours per week (list any	officer and a director/truste			tee)	compensation from	compensation from related	amount of other		
	hours for	or c	Inst	Officer	Key	Hig	Former	the	organizations	compensation
	related organizations	Individual trustee or director	Institutional trustee	cer	Key employee	hest	mer	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	l tor	onal		ploy	con		(**-2/1099-141100)		and related
	line)	uste	trus		ee	pen				organizations
		O O	tee			Highest compensated employee				
Joseph E Bles	1									
Trustee	0	~						0	0	0
Jacqueline Seamon	1									
Trustee	0	~						0	0	0
JanElaine Smith	1									
Trustee	0	~						0	0	0
Emily Penny Evans	1									
Director	0	~						0	0	0
Bert L Rice	1									
Trustee	0	~						0	0	0
Fred Stielow	1									
Trustee	0	~						0	0	0
Simmona Simmons	1									
Trustee	0	~						0	0	0
Rosalie Gaither	0									
Trustee	0	~						0	0	0
Thomas E Riggin	1									
Trustee	0	~						0	0	0
Gerald P Starr	1									
Director	0	~						0	0	0
Joan Beck	1									
Trustee	0	~						0	0	0
Sandra Solomon	1									
Director	0	~						0	0	0
Joyce C Miller	1	1								
Trustee	0	~						0	0	0
Donald E Roland	1	1								
Director	0	~						0	0	0

Par	Section A. Officers, Directors, Trust	tees, Key E	mplo	yees			lighe	st C	Compensated E	mployees (cd	ntinu	ed)		
	(A) Name and title	(B) Average hours per week (list any	box, office	Position (do not check more tha box, unless person is b officer and a director/tr				n an tee)	(D) Reportable compensation from	(E) Reportable compensation from related	rom	Estir	(F) mated ount of ther	
		hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS		compe fron organ and r	ensation n the nization related izations	1
Barba	ara Maxwell	1												
Trust		0	·						0		0			0
	ırd Werking	1	_											•
Trust	ee on Wible	0	· ·						0		0			0
Trust		1 0	·						0		0			0
	er S B Childs	0												- 0
Coun		0	·						0		0			0
Joan	Wibbe	0												
Trust	ee	0	~						0		0			0
Barre	tt L McKown	1												
Vice (Chairman	0			~				0		0			0
Jame	s Harle	1												
Secre	<u> </u>	0			~				0		0			0
	Il Worthington	1	-		,									0
Chairman Ellan Thorson		1							0		0			0
Ellan Thorson Treasurer		0	-		1				0		0			0
	oton M Auld	38												
	Executive Officer	0	1		~				155,034		0		4	1,800
Scott	A Sedmak	38												
Chief	Financial Officer	0			~				96,253		0		3!	5,800
1b	Sub-total							ightharpoons	251,287		0		7	7,600
С	Total from continuation sheets to Part	•												
d	Total (add lines 1b and 1c)							<u> </u>	251,287		0		7	7,600
2	Total number of individuals (including but reportable compensation from the organi			iose	e list	ted	above	e) w	/ho received m	ore than \$100),000	of		
													Yes	No
3	Did the organization list any former of							emp	oloyee, or high	est compens	sated			
	employee on line 1a? If "Yes," complete							•			•	3		~
4	For any individual listed on line 1a, is the													
	organization and related organizations individual	greater th	an p	150,	,UUC) ()	re	S,	complete Sch	ledule J Tor	Sucri	4	~	
5	Did any person listed on line 1a receive of	or accrue co	ompe	nsat	tion	fro	n anv	. un	 related organiz	ation or indiv	idual			
Ū	for services rendered to the organization											5		~
Section	on B. Independent Contractors													
1	Complete this table for your five highest compensation from the organization. Repyear.													ax
	(A) Name and business add	Iress							(B) Description of s	ervices	((C) Compensa	ation	
Sirsi	Corporation, PO Box 2153 D, Birmingham, AL							Co	mputer Mainten			•		7,635
	age Learning, 27500 Drake Rd, Farmington H		 31					_	tabase Subscri					9,230
2	Total number of independent contractor received more than \$100,000 of compens							o th	nose listed abo	ove) who				

Part VIII Statement of Revenue

		Check if Schedule O contains a resp	onse or note to	any line in this	Part VIII		🔲
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts ts	1a	Federated campaigns 1a	0				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b	0				
And A	С	Fundraising events 1c	0				
ar /	d	Related organizations 1d	0				
s, G	е	Government grants (contributions) 1e	22,863,664				
r Si	f	All other contributions, gifts, grants,					
the the		and similar amounts not included above 1f	105,394				
달의	g	Noncash contributions included in lines 1a-1f: \$	103,377				
a C	h	Total. Add lines 1a-1f	🕨	22,969,058			
a e			Business Code				
še	2a	Fines for Overdue Materials	900099	403,639	403,639	0	0
8	b	Lost Materials Recoverd via Collection	900099	145,442	145,442	0	0
Š	С	Sale of Materials Removed from Collect	453310	66,574	66,574	0	0
Se	d	Computer Printing Charges	561439	127,784	127,784	0	0
ra II	е	Payment for Lost Materials	900099	43,058	43,058	0	0
Program Service Revenue	f	All other program service revenue.		71,939	27,458	31,720	12,761
	<u>g</u> 	Total. Add lines 2a–2f		858,436			
	3	and other similar amounts)					2
	4	Income from investment of tax-exempt bo	+	0	0	0	2
	5	Royalties		0	0	0	0
	3	(i) Real	(ii) Personal	0	0	0	0
	6a	Gross rents	.,				
	b	Less: rental expenses					
	c	Rental income or (loss) 0	0				
	d	N	▶				
	7a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory					
	b	Less: cost or other basis and sales expenses .					
	С	Gain or (loss) 0	0				
	d	Net gain or (loss)	▶				
enne	8a	Gross income from fundraising events (not including \$ 0					
Other Revenu		of contributions reported on line 1c). See Part IV, line 18 a	10,326				
ţ	h	Less: direct expenses b	5,136				
0		Net income or (loss) from fundraising		5,190		0	5,190
		Gross income from gaming activities. See Part IV, line 19 a	-	3/113		-	2,733
	L						
		Less: direct expenses b Net income or (loss) from gaming active	/ities ▶				
		Gross sales of inventory, less	/ities •				
	100	returns and allowances a	11,349				
	b	Less: cost of goods sold b	9,633				
	c	Net income or (loss) from sales of inve		1,716	1,716	0	0
ŀ		Miscellaneous Revenue	Business Code	.,.10	.,. 10		
	11a	Vendor Refunds and Minor Receipts	900099	3,240	3,240	0	0
	b						
	С						
	d	All other revenue		0	0	0	0
	е	Total. Add lines 11a–11d		3,240			
	12	Total revenue. See instructions	▶	23,837,642	818,911	31,720	17,953

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must con				
	Check if Schedule O contains a respon				
	t include amounts reported on lines 6b, 7b, , 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	0	0		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0	0		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors,				
_	trustees, and key employees	335,883	0	326,292	9,591
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	200.05/		202.254	
7		220,356	0	220,356	0 400
7 8	Other salaries and wages	11,735,701	9,941,104	1,704,189	90,408
Ü	section 401(k) and 403(b) employer contributions)	1,876,146	1,585,648	271,825	18,673
9	Other employee benefits	3,073,689	2,603,797	457,464	12,428
10	Payroll taxes	898,971	761,924	130,616	6,431
11	Fees for services (non-employees):	070,771	701,724	100,010	0,401
а	Management	0	0	0	0
b	Legal	6,711	0	6,711	0
С	Accounting	0	0	0	0
d	Lobbying	2,100	0	2,100	0
е	Professional fundraising services. See Part IV, line 17	0			0
f	Investment management fees	0	0	0	0
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	209,422	44,256	165,166	0
12	Advertising and promotion	9,390	0	9,390	0
13	Office expenses	638,989	286,239	352,750	0
14	Information technology	429,257	404,651	23,064	1,542
15 16	Royalties	281,769	120 440	143 100	0
17	Travel	160,638	138,660	143,109 160,638	0
18	Payments of travel or entertainment expenses	100,038	U	100,038	0
	for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings .	32,740	0	32,740	0
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization .	1,477,052	1,410,138	66,914	0
23	Insurance	110,621	0	110,621	0
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.)				
_		1 100 01/	4.400.047		
a	Loss on disposal of capital assets	1,192,916	1,192,916	0	10.//0
b C	Addition of Long-Term Liabilities	1,974,606	1,575,708	379,238	19,660
d					
e	All other expenses	68,890	28,349	40,541	0
25	Total functional expenses. Add lines 1 through 24e	24,735,847	19,973,390	4,603,724	158,733
26	Joint costs. Complete this line only if the	2.,.00,011	,	.,550,121	100,100
	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

		Check if Schedule O contains a response or note to any line in this Pa	art X		🗆
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	11,425	1	11,396
	2	Savings and temporary cash investments	3,809	2	3,811
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	9,155	4	10,814
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L	0	5	0
ts	6	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	0	6	0
Assets	7	Notes and loans receivable, net	0	7	0
As	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	0	9	815,096
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a 18,001,295			
	b	Less: accumulated depreciation 10b 7,573,064	9,945,092		10,428,231
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	1,288,207		1,978,600
	16	Total assets. Add lines 1 through 15 (must equal line 34)	11,257,688		13,247,948
	17	Accounts payable and accrued expenses	726,610	17	825,373
	18	Grants payable	0	18	
	19	Deferred revenue	0	19	
	20	Tax-exempt bond liabilities	0	20 21	
,	21	Escrow or custodial account liability. Complete Part IV of Schedule D. Loans and other payables to current and former officers, directors,	0	21	
Liabilities	22	trustees, key employees, highest compensated employees, and			
jab		disqualified persons. Complete Part II of Schedule L	0	22	
_	23	Secured mortgages and notes payable to unrelated third parties	0	23	
	24	Unsecured notes and loans payable to unrelated third parties	0	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	16,755,545	0.5	21,586,915
	06	Total liabilities. Add lines 17 through 25	47 400 455	25	00.440.000
	26	Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and	17,482,155	26	22,412,288
es		complete lines 27 through 29, and lines 33 and 34.			
anc E	27	Unrestricted net assets		27	
ale	28	Temporarily restricted net assets		28	
o E	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 30 through 34.			
S	30	Capital stock or trust principal, or current funds	0	30	0
set	31	Paid-in or capital surplus, or land, building, or equipment fund	0	31	0
As	32	Retained earnings, endowment, accumulated income, or other funds .	-6,224,467		-9,164,340
let et	33	Total net assets or fund balances	-6,224,467		-9,164,340
	34	Total liabilities and net assets/fund balances	11,257,688		13,247,948

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Part	XI 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		23,83	7,642
2	Total expenses (must equal Part IX, column (A), line 25)	2		24,73	5,847
3	Revenue less expenses. Subtract line 2 from line 1	3		-89	8,205
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		-6,22	4,467
5	Net unrealized gains (losses) on investments	5			0
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8		-2,04	1,668
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		-9,16	4,340
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				ᆫᆜ
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		-		
	If the organization changed its method of accounting from a prior year or checked "Other," exp Schedule O.	iain ii	า		
_			2a		V
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?				
	If "Yes," check a box below to indicate whether the financial statements for the year were comp reviewed on a separate basis, consolidated basis, or both:	iiea o	r		
	Separate basis Consolidated basis Both consolidated and separate basis		Ol-		
b	Were the organization's financial statements audited by an independent accountant?		2b	'	
	separate basis, consolidated basis, or both:	ı on a	^a		
С	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	orciah			
C	of the audit, review, or compilation of its financial statements and selection of an independent accour				/
	If the organization changed either its oversight process or selection process during the tax year, exp				
	Schedule O.	nani ii	1		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set f	orth ir	n		
oa	the Single Audit Act and OMB Circular A-133?		. 3a		/
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	ao the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au		3b		
	, , , , , , , , , , , , , , , , , , , ,			m 990	(2014)

SCHEDULE A (Form 990 or 990-EZ)

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.

2014

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization **Employer identification number** PUBLIC LIBRARY ASSOCIATION OF ANNAPOLIS AND A A CO INC 52-6001871 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 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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 organization that normally receives: (1) more than 331/3% 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 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . . Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-9 listed in your governing support (see other support (see document? above or IRC section instructions) instructions) (see instructions)) Yes No (A) (B) (C) (D) (E) Total

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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.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 **(e)** 2014 (f) Total grants, contributions, 1 membership fees received. (Do not include any "unusual grants.") . . . 17,662,303 18,661,815 19,338,759 22,999,074 21,009,184 99,671,135 2 revenues levied organization's benefit and either paid to or expended on its behalf . . . 0 0 0 0 0 0 The value of services or facilities furnished by a governmental unit to the organization without charge 1,500,000 1,500,000 1,500,000 1,500,000 1,500,000 7,500,000 Total. Add lines 1 through 3. . . . 4 19,162,303 20,161,815 20,838,759 22,509,184 24,499,074 107,171,135 5 The portion of total contributions by each person (other than governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) **Public support.** Subtract line 5 from line 4. 107,171,135 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total 7 Amounts from line 4 19,162,303 20,161,815 20,838,759 22,509,184 24,499,074 107,171,135 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 26 10 54 Net income from unrelated business 9 activities, whether or not the business is regularly carried on 6,368 14,478 26,432 36,298 49,670 133,246 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 1,259 2,420 2.911 2,232 3,240 12,062 **Total support.** Add lines 7 through 10 11 107,316,497 Gross receipts from related activities, etc. (see instructions) 12 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) 14 99.86 % Public support percentage from 2013 Schedule A, Part II, line 14 15 331/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this ~ 331/3% support test-2013. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

	in the organization rails to quality	under the te	SIS IISIEU DEN	ow, piease co	implete i ait	11.)	
	on A. Public Support		T	T			
	dar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees						
2	received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise						
2	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						
6	Total. Add lines 1 through 5						
7a	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						
	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6.)						
	on B. Total Support			1	I	I	I
	dar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6						
10a							
	payments received on securities loans, rents,						
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	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						
46	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
	and 12.)		 	al alabad 6 12	6:60	<u> </u>	- F04(-)(0)
14	First five years. If the Form 990 is for the	•					* / * /
Coot:	organization, check this box and stop he						
	on C. Computation of Public Suppor			10		45	0/
15	Public support percentage for 2014 (line 8						%
16 Secti	Public support percentage from 2013 School D. Computation of Investment Inc				<u> </u>	16	%
	<u> </u>			v lino 12 politi	mp (f))	17	0/
17 10	Investment income percentage for 2014 (Investment income percentage from 2013)			-		17	<u>%</u>
18	Investment income percentage from 2013 331/3% support tests—2014. If the organi						
19a	17 is not more than 33 ¹ / ₃ %, check this box						
L	33 ¹ /3% support tests—2013. If the organiz	_	_	-		_	
b	line 18 is not more than 33½%, check this b						
20	Private foundation. If the organization di	_	=				

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d 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	103	140
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b 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		
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 Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (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			
С	designated in the organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?	5b 5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) 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 (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).			
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	7		
0	If "Yes," complete Part I of Schedule L (Form 990).	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 9(a)) hold a controlling interest in any entity in which			
С	the supporting organization had an interest? If "Yes," provide detail in Part VI. Did a disqualified person (as defined in line 9(a)) 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.	9b		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f)	9с		
100	(regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	iva		
D	determine whether the organization had excess business holdings.)	10b		

Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c		
Section	on B. Type I Supporting Organizations			
_			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	•		
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations			
	<i>y</i> 11 0 0		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
_				
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
3	By reason of the relationship described in (2), did the organization's supported organizations have a	2		
Ū	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Section	on E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	netru	ctions	e).
a	The organization satisfied the Activities Test. Complete line 2 below.			-/-
a b	☐ The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
c	The organization is the parent of each of its supported organizations. Complete interes below.	ee ins	tructi	ons)
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	0-		
h	·	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>	20		
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
u	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying other Type III non-functionally integrated supporting organizations must contain the containing of the containing organization.			
Section 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) 7 Other expenses (see instructions) 	6		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section 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		
b Average monthly cash balances	1b		
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):			
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		
Section 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		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount . Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionall instructions).	y-in	tegrated Type III support	ing organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continued)	
Secti	on D - Distributions	,	,	Current Year
1	Amounts paid to supported organizations to accomplish			
2	Amounts paid to perform activity that directly furthers exe			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
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	h the organization is res	ponsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
a				
b				
c				
d				
е	From 2013			
f	Total of lines 3a through e			
<u>g</u>	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2014 distributable amount			
<u>i</u> _	Carryover from 2009 not applied (see instructions)			
j_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section			
	D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7	Excess distributions carryover to 2015. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а				
b				
С				
d	Excess from 2013			
е	Excess from 2014			

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

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

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

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

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

ianj (s	ee separate mistructions), ti	IICII			
• Se	ection 501(c)(4), (5), or (6) orga	anizations: Complete Part III.			
Name (of organization			Employer ider	ntification number
PUBL		OF ANNAPOLIS AND A A CO INC			52-6001871
Part		e organization is exempt unde			organization.
1	•	the organization's direct and indire	•	•	
2	Political expenditures .)
3	Volunteer hours				
Part		e organization is exempt unde			
1		excise tax incurred by the organiza)
2		excise tax incurred by organization			·)
3		ed a section 4955 tax, did it file For			Yes No
4a					Yes No
b	If "Yes," describe in Part				
Part		e organization is exempt unde			(c)(3).
1		ly expended by the filing organiz		•	
				· · · · · · · · · · · · · · · · · · ·	
2		filing organization's funds contrib			
_		vities			
3		expenditures. Add lines 1 and 2.			
				· ·	
4		n file Form 1120-POL for this year?			
5		ses and employer identification nur			
		ents. For each organization listed,			
		ontributions received that were properties. I fund or a political action committe			
	as a separate segregated		e (PAC). II additio	Tai space is needed, prov	The information in Fart IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds. If none, enter -0	contributions received and promptly and directly
					delivered to a separate
					political organization. If none, enter -0
					,
(1)					
(2)					
(3)					
(4)		<u> </u>			
(5)		<u> </u>			
(6)		ļ			

_	•
Page	4

Pa	rt II-A Complete if the organization section 501(h)).	n is exempt ι	ınder section 50	01(c)(3) and file	d Form 5768 (ele	ection under		
A	Check ► ☐ if the filing organization be					oup member's		
R	name, address, EIN, expenses, and share of excess lobbying expenditures). Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.							
_	Limits on Lobb			roi provisions c	(a) Filing	(b) Affiliated		
	(The term "expenditures" me)	organization's totals	group totals		
1	Total lobbying expenditures to influence		-					
Ī	b Total lobbying expenditures to influence							
	c Total lobbying expenditures (add lines 1	_						
	d Other exempt purpose expenditures .	,						
	e Total exempt purpose expenditures (add							
	f Lobbying nontaxable amount. Enter columns.							
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amount	t is:				
	Not over \$500,000		nount on line 1e.					
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000.				
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess	over \$1,000,000.				
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess or	ver \$1,500,000.				
	Over \$17,000,000	\$1,000,000.						
	g Grassroots nontaxable amount (enter 25	% of line 1f)						
	h Subtract line 1g from line 1a. If zero or le	ess, enter -0-						
	i Subtract line 1f from line 1c. If zero or les	ss, enter -0-						
	j If there is an amount other than zero reporting section 4911 tax for this year?		1h or line 1i, did	-		☐ Yes ☐ No		
	(Some organizations that made a sec	ction 501(h) ele	Period Under sec ection do not have ructions for lines	e to complete all	of the five colum	ns below.		
	Lobbying	Expenditures	During 4-Year Av	veraging Period	1			
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total		
2	a Lobbying nontaxable amount							
	b Lobbying ceiling amount (150% of line 2a, column (e))							
	c Total lobbying expenditures							
	d Grassroots nontaxable amount							
	e Grassroots ceiling amount (150% of line 2d, column (e))							
	f Grassroots lobbying expenditures							

Schedule C (Form 990 or 990-EZ) 2014

Schedu	ule C (Form 990 or 990-EZ) 2014				F	age 3
Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Form	5768		
For e	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(8	a)	(b)	
	ription of the lobbying activity.	Yes	No	Am	ount	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?	~				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	~				
С	Media advertisements?		~			
d	Mailings to members, legislators, or the public?		~			
e	Publications, or published or broadcast statements?	~	_			100
f	Grants to other organizations for lobbying purposes?	~	~		4	4.000
g	Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		~			1,200
h i	Other activities?	~				2,100
i	Total. Add lines 1c through 1i					3,400
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		~		1.	3,400
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).)(5), (or sec	tion		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? .			3		
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."				ne 3	3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
а	Current year		2a			
b	Carryover from last year		2b			
С	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb and political expenditure next year?	ying				
5	and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)		5			
Par		•	3	-		
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro	un list	t): Parl	II-A. lin	es 1	and
2 (see	e instructions); and Part II-B, line 1. Also, complete this part for any additional information.					
	dule C, Part II-B, Line 1 - 1aMembers of the Library's all-volunteer Board of Trustees appeared before sta					
	ers impacting the organization. 1b-The Chief Executive Officer and other management officials met and co tied before, federal, state, and local officials on matters affecting the organization and the public library co					
	tive Officer wrote a guest editorial for one of the local newspapers in support of funding for the Library.					fficer
	ther management officials met and corresponded with, and testified before, federal, state, and local officials					
	nization and the public library community. 1i-The organization paid \$2,100 to the Maryland Association of					
	LA) for "Advocacy Initiatives". The payment was made as part of the organization's membership dues in I					
	. The majority of these funds were used by MAPLA to hire a lobbyist to represent the Maryland public libra					with

respect to the Maryland General Assembly.

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Name o	f the organization		Employer identification number
PUBL	C LIBRARY ASSOCIATION OF ANNAPOLIS AND A A C	CO INC	52-6001871
Par	t I Organizations Maintaining Donor Adv	vised Funds or Other Similar Fun	ds or Accounts.
	Complete if the organization answered		
		(a) Donor advised funds	(b) Funds and other accounts
1 2 3 4 5	Total number at end of year	<u> </u>	
6	Did the organization inform all grantees, donors, a only for charitable purposes and not for the benefit conferring impermissible private benefit?	fit of the donor or donor advisor, or fo	nt funds can be used or any other purpose
Par	Conservation Easements.	/// H. = 000 B . N/ II =	
	Complete if the organization answered '		
2	Purpose(s) of conservation easements held by the Preservation of land for public use (e.g., recreat Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization has	tion or education)	a certified historic structure on in the form of a conservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
a			
b	Total acreage restricted by conservation easement		
c d	Number of conservation easements on a certified humber of conservation easements included in historic structure listed in the National Register .	* *	on a
3	Number of conservation easements modified, transtax year ►	sferred, released, extinguished, or tern	ninated by the organization during the
4 5	Number of states where property subject to conse Does the organization have a written policy reviolations, and enforcement of the conservation ea	garding the periodic monitoring, ins	
6	Staff and volunteer hours devoted to monitoring, in		
7	Amount of expenses incurred in monitoring, inspec ▶\$	cting, and enforcing conservation ease	ments during the year
8	Does each conservation easement reported on line and section 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of	
9	In Part XIII, describe how the organization reports of balance sheet, and include, if applicable, the text organization's accounting for conservation easements	of the footnote to the organization's finents.	ancial statements that describes the
Part	Organizations Maintaining Collection Complete if the organization answered		Other Similar Assets.
1a	If the organization elected, as permitted under SF works of art, historical treasures, or other similar public service, provide, in Part XIII, the text of the f	assets held for public exhibition, ed	lucation, or research in furtherance of
b	If the organization elected, as permitted under S works of art, historical treasures, or other similar public service, provide the following amounts relative	assets held for public exhibition, eding to these items:	lucation, or research in furtherance of
2	(i) Revenue included in Form 990, Part VIII, line 1(ii) Assets included in Form 990, Part XIf the organization received or held works of art,	, historical treasures, or other similar	assets for financial gain, provide the
	following amounts required to be reported under S		
a b	Revenue included in Form 990, Part VIII, line 1 . Assets included in Form 990, Part X		▶ \$

	e D (Form 990) 2014					Page 2
Part						
3	Using the organization's acquisition, according to the collection items (check all that apply):	ession, and other re	cords,	check any of th	ne following that are a	a significant use of its
а	☐ Public exhibition	C		Loan or exchang	ge programs	
b	Scholarly research	•				
С	☐ Preservation for future generations					
4	Provide a description of the organization	s collections and ex	plain I	how they further	the organization's ex	empt purpose in Par
	XIII.					
5	During the year, did the organization soli assets to be sold to raise funds rather that					
Part	V Escrow and Custodial Arrang	ements.				
	Complete if the organization an 990, Part X, line 21.	swered "Yes" to F	orm 9	90, Part IV, line	9, or reported an a	amount on Form
1a	Is the organization an agent, trustee, cu	stodian or other inte	ermed	iary for contribut	tions or other assets	not
	included on Form 990, Part X?					. 🗌 Yes 🗌 No
b	If "Yes," explain the arrangement in Part >	(III and complete the	follov	vina table:		
	gg			9		Amount
С	Beginning balance				1c	
d	Additions during the year				1d	
	Distributions during the year				1e	
e	3 ,					
f	Ending balance				1f	
2a	Did the organization include an amount of					•
b	If "Yes," explain the arrangement in Part	III. Check here if the	expla	anation has been	provided in Part XIII	🛚
Par	Endowment Funds.	1/0/ 11 5	_	.00 D . IV.	40	
	Complete if the organization an					
	<u> </u>	a) Current year (b)	Prior ye	ear (c) Two yea	rs back (d) Three years b	ack (e) Four years back
1a	Beginning of year balance					
b	Contributions					
С	Net investment earnings, gains, and losses					
d	Grants or scholarships					
е	Other expenditures for facilities and					
	programs					
f	Administrative expenses					
g	End of year balance					
2	Provide the estimated percentage of the o	current vear end bala	nce (li	ine 1g. column (a	a)) held as:	
- а	Board designated or quasi-endowment	· · · · · · · · · · · · · · · · · · ·		ino rg, colainii (c	,,,	
b		/° %				
	Temporarily restricted endowment	%				
С						
20	The percentages in lines 2a, 2b, and 2c sl Are there endowment funds not in the po		nizoti	on that are hold	and administered for	tho.
3a	organization by:	ssession of the orga	arıızatı	on that are neid	and administered for	
	•					Yes No
	(i) unrelated organizations					. 3a(i)
	(ii) related organizations					. 3a(ii)
b	If "Yes" to 3a(ii), are the related organizati					. 3b
4	Describe in Part XIII the intended uses of		idown	nent funds.		
Part	VI Land, Buildings, and Equipme	nt.				
	Complete if the organization an	swered "Yes" to F	orm 9	90, Part IV, Iine	e 11a. See Form 990	0, Part X, line 10.
	Description of property	(a) Cost or other basi	s (b)	Cost or other basis	(c) Accumulated	(d) Book value
		(investment)		(other)	depreciation	
1a	Land		0	0		0
b	Buildings		0	0		0
	Leasehold improvements		0	0		0

d Equipment

Schedule D (Form 990) 2014

1,539,422

16,461,873

0

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

(1) Financial derivatives (2) Closely-held equity is (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Column (b) must equal Form Part VIII Investment Complete (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form Annex Complete (1) Cash Due from Annex Complete (1) Cash Due from Annex Complete (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form Annex Complete (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form Annex Complete (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form Annex Complete (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form Annex Complete (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form Annex Complete (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form Annex Complete (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form Annex Complete (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form Annex Complete (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form Annex Complete (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form Annex Complete (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form Annex Complete (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form Annex Complete (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form Annex Complete (2) (3) (4) (5) (6) (7) (8) (9)	ments—Other Securities		one OOO Devel IV live	a 11h Can Farre	000 Dark V line 10
(1) Financial derivatives (2) Closely-held equity is (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Column (b) must equal Form and the complete of the com	ete if the organization ans				
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Complete line 25. 1. (a) Description (3) Accrued Liability for (4) Accrued Liability for	ıst equal Form 990, Part X, o	col. (B) line 15.)			1,978,600
Complete line 25. 1. (a) Description (2) OPEB Obligation (3) Accrued Liability for (4) Accrued Liability for	Liabilities.				1/770/000
line 25. 1. (a) Description (1) Federal income taxes (2) OPEB Obligation (3) Accrued Liability for (4) Accrued Liability for	ete if the organization ans	swered "Yes" to For	m 990, Part IV, lin	e 11e or 11f. See	Form 990, Part X,
 (1) Federal income taxes (2) OPEB Obligation (3) Accrued Liability for (4) Accrued Liability for 	.		,		,
(2) OPEB Obligation (3) Accrued Liability for (4) Accrued Liability for	scription of liability	(b) Book value			
(3) Accrued Liability for (4) Accrued Liability for	S		0		
(4) Accrued Liability for		17,8	56,777		
	or Pension Benefits		40,520		
(5)	for Compensated Absences	78	89,618		
(5)					
(6)					
(7)					
(8)					
(9)					
	l Form 990, Part X, col. (B) line 25.) ▶	1-	86,915		
	tax positions. In Part XIII, provor uncertain tax positions under				

Schedule D (Form 990) 2014 Page **4**

Part		Reconciliation of Revenue per Audited Financial Stateme			Retur	n.
		Complete if the organization answered "Yes" to Form 990, P				
1		evenue, gains, and other support per audited financial statements			1	
2		nts included on line 1 but not on Form 990, Part VIII, line 12:				
а		realized gains (losses) on investments	2a			
b	Donate	ed services and use of facilities	2b			
С	Recov	eries of prior year grants	2c			
d	Other	(Describe in Part XIII.)	2d			
е	Add lir	nes 2a through 2d			2e	
3	Subtra	ct line 2e from line 1			3	
4		nts included on Form 990, Part VIII, line 12, but not on line 1:				
а		ment expenses not included on Form 990, Part VIII, line 7b				
b	Other	(Describe in Part XIII.)				
С		nes 4a and 4b			4c	
5		evenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	
Part		Reconciliation of Expenses per Audited Financial Statem			er Ret	urn.
		Complete if the organization answered "Yes" to Form 990, P				
1		expenses and losses per audited financial statements			1	
2		nts included on line 1 but not on Form 990, Part IX, line 25:		ı		
а		ed services and use of facilities	2a			
b	-	ear adjustments	2b			
С		losses	2c			
d		(Describe in Part XIII.)				
е		nes 2a through 2d			2e	
3		ct line 2e from line 1			3	
4		nts included on Form 990, Part IX, line 25, but not on line 1:				
a		ment expenses not included on Form 990, Part VIII, line 7b			_	
b		(Describe in Part XIII.)				
с 5		nes 4a and 4b expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line			4c	
		Supplemental Information.	5 10.)	 	5	
		escriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	4 1 · D	art IV lines 1h and 2h	v Dort \	V line 4: Part V line
		escriptions required for Part II, lines 3, 3, and 9, Part III, lines 1a and s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part is				
۲, ۱ ai	. 70, 11110	3 24 and 45, and 1 art An, intes 24 and 45. Also complete this part	to pic	wac arry additional in	iioiiiiat	ion.

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

PUBLIC LIBRARY ASSOCIATION OF ANNAPOLIS AND A A CO INC

52-6001871

Employer identification number

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use			
	☐ Travel for companions ☐ Payments for business use of personal residence			
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		
_				
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?			
	10	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
Ū	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	☐ Compensation committee ☐ Written employment contract			
	✓ Independent compensation consultant ✓ Compensation survey or study			
	☐ Form 990 of other organizations ☐ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		~
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		~
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		~
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
•		50		~
a b	The organization?	5a 5b		•
b	If "Yes" to line 5a or 5b, describe in Part III.	30		
	The second of SD, describe in Fartin.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
_	compensation contingent on the net earnings of:			
а	The organization?	6a		~
b	Any related organization?	6b		~
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		~
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe	_		.,
	in Part III	8		~
0	If "Voo" to line 9 did the organization also follow the reputtable presumption precedure described in			
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?			

Schedule J (Form 990) 2014 Page 2

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

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

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

		(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)–(D)	in column (B) reported as deferred in prior Form 990	
Hampton M Auld, Chief	(i)	155,034	0	0	22,807	18,969	196,810	0	
Executive Officer	(ii)	0	0	0	0	0	0		
	(i)								
2	(ii)								
	(i)								
3	(ii)								
	(i)								
4	(ii)								
	(i)								
5	(ii)								
	(i)								
6	(ii)								
	(i)								
7	(ii)								
	(i)								
8	(ii)								
	(i)								
9	(ii)								
	(i)								
10	(ii)								
	(i)								
11	(ii)								
	(i)								
12	(ii)								
	(i)								
13	(ii)								
	(i)								
14	(ii)								
	(i)							 	
15	(ii)								
	(i)								
16	(ii)								

chedule J	(Form 990) 2014
Part III	Supplemental Information
rovide	the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this paradditional information.
or drift d	additional information.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2014

Open To Public

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990.

▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Inspection

Name of	the organization				Employer ic	dentification nur	mber		
PUBLI	C LIBRARY ASSOCIATION OF ANNA	POLIS AND	A A CO INC			52-60018	71		
Part	Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash cont amounts repo Form 990, Part \	orted on	Method o			
1	Art—Works of art								
2	Art—Historical treasures								
3	Art—Fractional interests								
4	Books and publications	~			85	Cost of dona	ited pr	opert	<u>y</u>
5	Clothing and household								
	goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities—Publicly traded								
10	Securities—Closely held stock .								
11	Securities—Partnership, LLC,								
	or trust interests								
12	Securities-Miscellaneous								
13	Qualified conservation								
	contribution—Historic								
	structures								
14	Qualified conservation								
	contribution—Other								
15	Real estate—Residential								
16	Real estate—Commercial								
17	Real estate—Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other ► (Supplies)	~	63		12,197	Cost of dona	ited pr	opert	y
26	Other ► (Furniture, Fixtures, ≀)	~	50		78,827	Cost of dona	ited pr	opert	y
27	Other ► (
28	Other ► (
29	Number of Forms 8283 received								
	which the organization completed	Form 8283	3, Part IV, Donee Acknowle	agement		29		· ·	0
								Yes	No
30a	During the year, did the organizat								
	28, that it must hold for at least the								
-	to be used for exempt purposes to		e notaing period?				30a		~
	If "Yes," describe the arrangemen				•				
31	Does the organization have a				-				
							31	~	<u> </u>
32a	Does the organization hire or use	-	_	-					
_							32a	~	
	If "Yes," describe in Part II.			and and a second second	l ()	!= = ! · !			
33	If the organization did not report ar describe in Part II.	i amount in	column (c) for a type of pro	perty for which (column (a)	is checked,			

Schedule M (Form 990) (2014) Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. Schedule M, Part I, Lines 25-28 - The organization is reporting the number of contributions. Schedule M, Part I, Line 32b - The Anne Arundel County Public Library Foundation, Inc. solicits both cash and non-cash contributions of behalf of the organization.

SCHEDULE 0 (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.

2014

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization	Employer identification number
PUBLIC LIBRARY ASSOCIATION OF ANNAPOLIS AND A A CO INC	52-6001871
Form 990, Part VI, Section B, Line 11b - The completed form 990 is presented to the Board of Trustees	and discussed and approved at a
Board Meeting prior to filing.	
Form 990, Part VI, Section B, Line 12c - All Trustees and certain employees are required to complete a	nd submit annually a Conflict of
Interest Disclosure Form.	
Indicate Distriction	
Form 990, Part VI, Section B, Line 15 - In 2006-2007, the organization contracted with a consultant for a	classification and compensation
study in which all salary scales including those of top management positions, were evaluated against	
organizations. The study was reviewed and approved by the organization's Board of Trustees. It was r	
consultant under contract to Anne Arundel County, Maryland, the source of the majority of the organizations	
consultant also reviewed local and national survey data for directors of library systems similar in size	
recommendations are used by the organization's Board of Trustees in setting the salary for the Chief I	
organization contracted with a consultant to conduct a market study to test the competitiveness of the	
of similar employers in the Baltimore, MD-Washington, D.C. marketplace. The recommendations of that	it study are under consideration.
Form 990, Part VI, Section C, Line 19 - The organization's governing documents, conflict of interest po	
available to the public upon request. The organizations Forms 990 and 990-T are available on its webs	
organization's audited financial statements, which are included in Anne Arundel County, Maryland's C	omprehensive Annual Financial
Reports, are available on Anne Arundel County's website (www.aacounty.org).	

Schedule O, Statement 1

PUBLIC LIBRARY ASSOCIATION OF ANNAPOLIS AND A A CO INC 52-6001871

Form: 990 Page: 1 Line Number:

Reasonable Cause Explanations

Explanation

Form 8868 was filed and extension was granted, giving a new filing date of May 15, 2016.

Page: 1

Schedule O, Statement 2

PUBLIC LIBRARY ASSOCIATION OF ANNAPOLIS AND A A CO INC 52-6001871

Form: 990 Page: 2

Line Number: Part III Line 4d

Other Program Services Accomplishments

Activity Code	Description	Expense	Grants	Revenue
	496,763 customers conducted 1,275,235 searches in our licensed databases	2,996,009	0	127,784
Total:		2,996,009	0	127,784