Form 990 Under section 501(c), 52, 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. Co to www.its.gov/Enro#90 to instructions and the latest information. 20222 (Decent Instructions and the latest information). A For the 2022 calendar year, or tax year beginning and ending D Employer identification number		-	~~	Return of Organization Exempt	From	Income Tax	OMB No. 1545-0047					
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PUBLIC DISCLOSURE COPY

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer		Date							
Here	LINDA WELLER, PRESIDENT									
	Type or print name and title									
	Print/Type preparer's name	Preparer's signature Date	Check PTI	N						
Paid	CHELSEY WYANT	CHELSEY WYANT 03.	/15/23 self-employed P01	336644						
Preparer	Firm's name BONADIO & CO., LL	P	Firm's EIN 16-113	1146						
Use Only	Firm's address 171 SULLY'S TRAIL									
	PITTSFORD, NY 14534 Phone no. (585)									
May the II	RS discuss this return with the preparer shown abo	ve? See instructions	X	Yes 🗌 No						
	1114 Est Descented, Deduction Act Net	and the second strategies the second								

232001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2022)

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		Form 990 (2022)
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ASSOCIATION

Part IV Checklist of Required Schedules

Form 990 (2022)

			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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			37
	public office? If "Yes," complete Schedule C, Part I	3		X X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			v
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		х	
•	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 custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
10	If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	9		- 23
10		10	х	
11	or in 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, VII, VII, IX, or X,		- 23	
	as applicable.			
-	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes." complete Schedule D.			
a		11a	х	
h	Part VI	110		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
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		x
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		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
•	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		x
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			v
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	ggn	X (2022)
232003	12-13-22	Form	550	(2022)

232003 12-13-22

ASSOCIATION

Part IV Checklist of Required Schedules (continued)

Form 990 (2022)

	(continuou)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_X_
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			77
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			v
~=	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	07		x
00	entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>	28a	х	
h	"Yes," complete Schedule L, Part IV	20a	- 23	x
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	200		
Ũ	"Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
00	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>	<u> </u>		
02	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
•••	Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
		38	Х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 1a			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
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ASSOCIATION

Par	TV Statements Regarding Other IRS Filings and Tax Compliance (continued)								
_		I	I		Yes	No			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		20						
	filed for the calendar year ending with or within the year covered by this return			2b	Х				
-									
3a ⊾				3a 3b		X			
	b If "Yes," has it filed a Form 990-T for this year? <i>If</i> " <i>No</i> " <i>to line 3b, provide an explanation on Schedule O</i>								
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a financial account in a foreign country (such as a bank account, securities account, or other financial a			4a		x			
h	If "Yes," enter the name of the foreign country	accour	ių :	40		- 23			
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
52				5a		x			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa			5b		x			
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c					
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th								
	any contributions that were not tax deductible as charitable contributions?			6a		x			
b	If "Yes," did the organization include with every solicitation an express statement that such contributi								
	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 set	rvices p	provided to the payor?	7a		X			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b					
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as req	uired						
	to file Form 8282?			7c		X			
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c	ontrac	xt?	7e		X			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr	act?		7f		X			
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		<u> </u>			
h									
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	d by th	ie	8					
•	sponsoring organization have excess business holdings at any time during the year?								
9	Sponsoring organizations maintaining donor advised funds.			0					
a L				9a 0h					
b 10				9b					
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12	10a	1						
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a							
11	Section 501(c)(12) organizations. Enter:								
 а	Gross income from members or shareholders	11a	1						
b	Gross income from other sources. (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)	11b							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a					
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?			13a					
	Note: See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the		1						
	organization is licensed to issue qualified health plans	13b							
С	Enter the amount of reserves on hand	13c							
14a				14a		X			
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu			14b		<u> </u>			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune								
	excess parachute payment(s) during the year?			15		X			
	If "Yes," see the instructions and file Form 4720, Schedule N.					v			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmen	t incoi	me?	16		X			
	If "Yes," complete Form 4720, Schedule O.								
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac								
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17					
000000	If "Yes," complete Form 6069.			Eorm	990	(2022)			
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Form 990 (2022)

ASSOCIATION

Form 990 (2022)

X

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI	
Section A. Governing Body and Management	

					Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	9							
	If there are material differences in voting rights among members of the governing body, or if the governing									
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.									
b	b Enter the number of voting members included on line 1a, above, who are independent 1b 9									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other									
	officer, director, trustee, or key employee?									
3										
	of officers, directors, trustees, or key employees to a management company or other person?									
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 wa	s filed?	4		Х				
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		5		Х				
6	Did the organization have members or stockholders?			6		Х				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point	one or							
	more members of the governing body?			7a		Х				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st									
	persons other than the governing body?			7b		Х				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the yea									
а	The governing body?	-	-	8a	Х					
b	Each committee with authority to act on behalf of the governing body?			8b	Х					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read									
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			9		Х				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code)							
		10//40	0000		Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?			10a		Х				
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch									
		•	, ,	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body			11a	Х					
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		Ū.							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	х					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	Х					
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y									
	on Schedule O how this was done	, -		12c	x					
13	Did the organization have a written whistleblower policy?			13	х					
14	Did the organization have a written document retention and destruction policy?			14	Х					
15	Did the process for determining compensation of the following persons include a review and approva									
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	,, ,								
а	The organization's CEO, Executive Director, or top management official			15a	х					
b	Other officers or key employees of the organization			15b		Х				
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent w	vith a							
	taxable entity during the year?			16a		Х				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat									
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ									
	exempt status with respect to such arrangements?			16b						
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed NONE									
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar	nd 990)-T (section 501(c)(3)s	s onlv)	availat	ble				
-	for public inspection. Indicate how you made these available. Check all that apply.		,	,)						
	Own website Another's website X Upon request Other (explain	on S	chedule ()							
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		,	i finan	cial					
	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 boo	oks an	d records							
	BETTY SUE MILLER - 585-589-4246									
	134 SOUTH MAIN STREET, ALBION, NY 14411									
232006	12-13-22			Form	990	(2022)				

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	HOAG LIBRARY OF THE SWAN LI	IBRARI
Form 990 (2022)	ASSOCIATION	16-0778804 Page 7
Part VII Compen	sation of Officers, Directors, Trustees, Key Em	ployees, Highest Compensated
Employe	ees, and Independent Contractors	
Check if Sc	chedule O contains a response or note to any line in this Part V	/II
Section A. Officers,	Directors, Trustees, Key Employees, and Highest Compens	sated Employees
 List all of the orga 		the calendar year ending with or within the organization's tax year. duals or organizations), regardless of amount of compensation.
 List all of the orga 	anization's current key employees, if any. See the instructions	for definition of "key employee."
who received reportable	tion's five current highest compensated employees (other than e compensation (box 5 of Form W-2, box 6 of Form 1099-MISC anization 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, the organization of the organization of the organization.

more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)		(C)		(D)	(E)	(F)				
Name and title	Average	(do	Position (do not check more than one				ne	Reportable			
	hours per	box	box, unless person is b		on is both an		compensation	compensation	amount of		
	week		officer and a director/trus		tee)	from	from related	other			
	(list any	rector						the	organizations	compensation	
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the	
	related organizations	ustee	trust		96	bens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related	
	below	lual tr	tional		nploy	st con	_	1099-1420)		organizations	
	line)	Individual trustee or director	In stit utional trustee	Officer	Key employee	Highest compensated employee	Former			organizations	
(1) BETTY SUE MILLER	40.00		-		-	1					
EXECUTIVE DIRECTOR		1		x				69,355.	0.	0.	
(2) LINDA WELLER	1.00										
PRESIDENT		Х		Х				0.	0.	0.	
(3) MARY COVELL	1.00										
VICE PRESIDENT		X		X				0.	Ο.	0.	
(4) DAWN SQUICCIARINI	1.00										
SECRETARY		Х		Х				0.	0.	0.	
(5) RACHEL HICKS	1.00										
TREASURER		Х		Х				0.	0.	0.	
(6) JIM BABCOCK	1.00										
TRUSTEE		Х						0.	0.	0.	
(7) DIANA DUDLEY	1.00										
TRUSTEE		Х						0.	0.	0.	
(8) JOYCE RILEY	1.00										
TRUSTEE		Х						0.	0.	0.	
(9) KEVIN DOHERTY	1.00										
TRUSTEE		Х						0.	0.	0.	
(10) DELLA MORALES	1.00										
TRUSTEE		Х						0.	0.	0.	
						<u> </u>					
						-					
		1									
		1									
		1									
						·		<u>.</u>		Form 990 (0000)	

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Form 990 (2022)

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-	HOAG LIBE 990 (2022) ASSOCIATI	-	ΤH	ΙE	SW	AN	ΓL	IF	BRARY	16-07	7900	201	П	age 8
	t VII Section A. Officers, Directors, Trus			000	200	1 11:	abor	+ 0	omponented Employee		100	004	P	age U
	(A) Name and title	(B) Average hours per week	(do box	not c , unle		C) itior more rson i) than (s both	one 1 an	(D) Reportable compensation from	(E) Reportable compensation from related		am	(F) timate ount other	
	(list any hours for related organization below line)			In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	(W-2/1099-MIS 1099-NEC)	s	comp fro orga and	oensa om th anizat I relat nizati	e ion ed
			-											
			-											
			-											
			-											
			-											
	Subtotal Total from continuation sheets to Part VI								69,355. 0.		0.			0.
_ <u>d</u> 2	Total (add lines 1b and 1c) Total number of individuals (including but no compensation from the organization	ot limited to th						o re	69,355. eceived more than \$100,	000 of reportable	0.	<u> </u>		0.
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for si				•	•						3	Yes	No X
4	For any individual listed on line 1a, is the su and related organizations greater than \$150	m of reportabl	e co	mpe	ensa	tion	and	otł	ner compensation from t	he organization		4		x
5 Sec	Did any person listed on line 1a receive or a rendered to the organization? <i>If</i> "Yes," com tion B. Independent Contractors											5		X
1	Complete this table for your five highest con the organization. Report compensation for t										ensati	on fro	m	
	(A) Name and business	address	N	ONI	Ξ				(B) Description of s	ervices	Co	(C omper		n
	-			.,										
2	Total number of independent contractors (ir \$100,000 of compensation from the organiz	•	ot lir	niteo	d to	thos (se lis)	ted	above) who received mo	ore than				

HOAG LIBRARY OF THE SWAN LIBRARY ASSOCIATION

			ASSOCIATION				16-0778	804 Page 9
Pa	t V	/111						
			Check if Schedule O contains a response of	or note to any line		(5)	· · · · · · · · · · · · · · · · · · ·	
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ς Ω	1	а	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues 1b					
Ū Ū			Fundraising events 1c					
ifts ar A			Related organizations 1d					
s, G				670,054.				
ŝi			All other contributions, gifts, grants, and	-				
buti			similar amounts not included above 1f	13,748.				
İd		g	Noncash contributions included in lines 1a-1f					
Col			Total. Add lines 1a-1f		683,802.			
				Business Code				
e	2	а	COPIER FEES	900099	4,850.	4,850.		
Program Service Revenue		b	FAX FEES	900099	2,833.	2,833.		
Se		с	BOOK FINES	900099	2,252.	2,252.		
am		d	BOOK SALES	900099	276.	276.		
- B B B B B B B B B B B B B B B B B B B		е						
д		f	All other program service revenue					
		g	Total. Add lines 2a-2f		10,211.			
	3		Investment income (including dividends, intere	est, and				
			other similar amounts)	l l l l l l l l l l l l l l l l l l l	900.			900.
	4		Income from investment of tax-exempt bond p	1				
	5		Royalties					
			(i) Real	(ii) Personal				
	6	а	Gross rents 6a					
			Less: rental expenses 6b					
			Rental income or (loss)					
	_		Net rental income or (loss)	(ii) Other				
	7	а	Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a					
đ		D	Less: cost or other basis					
evenue		~	and sales expenses 7b Gain or (loss) 7c					
			. ,					
Other R	•		Net gain or (loss) Gross income from fundraising events (not					
Ę	0	a	including \$ of					
Ŭ			contributions reported on line 1c). See					
			Part IV, line 18					
		b	Less: direct expenses 8b					
			Net income or (loss) from fundraising events					
	9		Gross income from gaming activities. See					
			Part IV, line 19 9a					
		b	Less: direct expenses 9b					
		с	Net income or (loss) from gaming activities					
	10	а	Gross sales of inventory, less returns					
			and allowances 10a					
		b	Less: cost of goods sold 10b					
		с	Net income or (loss) from sales of inventory					
s				Business Code				
Miscellaneous Revenue	11	а						
lane		b						
Sev		С					ļ	
Mis			All other revenue					
	10		Total. Add lines 11a-11d		604 012	10 011		000
	12		Total revenue. See instructions		694,913.	10,211.	0.	900.
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	990 (2022) ASSOCIATION			16-07	78804 Page 10
Pa	t IX Statement of Functional Expense	es			
Secti	on 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All othe	r organizations must con	nplete column (A).	
	Check if Schedule O contains a respon				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	69,355.	6,935.	62,420.	
6	trustees, and key employees	09,333.	0,955.	02,420.	
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	232,348.	188,947.	43,401.	
8	Pension plan accruals and contributions (include	202/0101	20075270		
Ū	section 401(k) and 403(b) employer contributions)	4,302.	2,793.	1,509.	
9	Other employee benefits	23,798.	15,451.	8,347.	
10	Payroll taxes	25,364.	16,468.	8,896.	
11	Fees for services (nonemployees):				
а	Management				
	Legal	3,608.		3,608.	
	Accounting	13,750.		13,750.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	470.		470.	
g	Other. (If line 11g amount exceeds 10% of line 25,	40.007	40.007		
	column (A), amount, list line 11g expenses on Sch 0.)	42,037.	42,037.		
12	Advertising and promotion	23,687.	20,808.	2,879.	
13	Office expenses	23,007.	20,000.	2,019.	
14	Information technology				
15 16	Royalties	17,931.	16,736.	1,195.	
17	Occupancy Travel	179.	179.	1,193.	
18	Payments of travel or entertainment expenses	2750	2751		
.0	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	360.	360.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	159,066.	148,462.	10,604.	
23	Insurance	14,477.	13,512.	965.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	LIBRARY BOOKS AND MATER	43,388.	43,388.		
b	MAINTENANCE SUPPLIES AN	43,270.	43,270.		
С	ALMS USER FEES AND COMM	16,934.	16,934.		
d		400	400		
	All other expenses	479.	479. 576,759.		0.
<u>25</u>	Total functional expenses. Add lines 1 through 24e	734,803.	5/0,/59.	158,044.	U •
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				

10

232010 12-13-22

Check here

Form 990 (2022)

educational campaign and fundraising solicitation.

if following SOP 98-2 (ASC 958-720)

			_				•
22)	ASSOC	I.	AТ	'I(1C	1

		ASSOCIATION	1.			16-	0778804 Page 11
ar	t X	Balance Sheet					
		Check if Schedule O contains a response or note	e to any	<u>line in this Part X</u>			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			358,053.	1	613,452.
	2	Savings and temporary cash investments			309,421.	2	175,850.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, substa					
		controlled entity or family member of any of these				5	
	6	Loans and other receivables from other disqualifi	ed pers				
		under section 4958(f)(1)), and persons described				6	
s	7	Notes and loans receivable, net			7		
Assets	8	Inventories for sale or use				8	
As	9	–				9	
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	4,842,699.			
	b	basis. Complete Part VI of Schedule D	10b	1,483,743.	3,500,511.	10c	3,358,956
	11	Investments - publicly traded securities			27,789.	11	28,775
	12	Investments - other securities. See Part IV, line 1		12			
	13	Investments - program-related. See Part IV, line 1		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equa			4,195,774.	16	4,177,033
	17	Accounts payable and accrued expenses			17		
	18	Grants payable		18			
	19	Deferred revenue		19	20,163		
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability. Complete P		21			
s.	22	Loans and other payables to any current or forme					
Ē		trustee, key employee, creator or founder, substa	ontributor, or 35%				
Liabilities		controlled entity or family member of any of these	e perso	ons		22	
-	23	Secured mortgages and notes payable to unrelat	ed thir	d parties		23	
	24	Unsecured notes and loans payable to unrelated	third p	arties		24	
	25	Other liabilities (including federal income tax, pay	ables t	o related third			
		parties, and other liabilities not included on lines	17-24).	Complete Part X			
		of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			0.	26	20,163
		Organizations that follow FASB ASC 958, chec	k here				
ces		and complete lines 27, 28, 32, and 33.					
an	27	Net assets without donor restrictions			4,148,355.	27	4,109,451. 47,419.
Бд Г	28	Net assets with donor restrictions	47,419.	28	47,419.		
		Organizations that do not follow FASB ASC 95					
ĩ		and complete lines 29 through 33.					
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds		L		29	
sel	30	Paid-in or capital surplus, or land, building, or equ	uipmen	t fund		30	
[As	31	Retained earnings, endowment, accumulated inc				31	
Sei	32	Total net assets or fund balances		L	4,195,774.	32	4,156,870.
1	33	Total liabilities and net assets/fund balances			4,195,774.	33	4,177,033.

Form **990** (2022)

232011 12-13-22

HOME DIDIUMAL OF THE DWIM DIDIUMA	HOAG	LIBRARY	OF	THE	SWAN	LIBRARY
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Form	990 (2022) ASSOCIATION	16-07	78804	Page 12
Pa	rt XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>,913.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2		,803.
3	Revenue less expenses. Subtract line 2 from line 1	3		,890.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,195	<u>,774.</u>
5	Net unrealized gains (losses) on investments	5		986.
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain on Schedule O)	9		0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,			
	column (B))	10	4,156	<u>,870.</u>
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>	
			`	Yes No
1	Accounting method used to prepare the Form 990: Cash Cash Control Control Control Cash Control	0		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a		
	separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?		2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,		
	consolidated basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,		
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	

Form **990** (2022)

232012 12-13-22

		Public Charity Status and Public Support omplete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.						OMB No. 1545-0047	
	of the Treasury venue Service		At	ttach to Form 990 or Fo	rm 990-E	Ζ.	o uno oti o n		Open to Public Inspection
Name of	f the organization	on HOAG ASSO	LIBRARY O	Form990 for instruction F THE SWAN L	BRARY	ζ		1	identification number 6 – 0 7 7 8 8 0 4
Part I	Reason	for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instruction	IS.	
The orga 1 2 3 4	A church, cor A school dese A hospital or	nvention of ch cribed in sect a cooperative search organiz	urches, or associatio ion 170(b)(1)(A)(ii). (hospital service orga	For lines 1 through 12, cl on of churches described Attach Schedule E (Form anization described in se njunction with a hospital	in sectio 990).) ection 170	n 170(b)(1 (b)(1)(A)(ii	ii).)(iii). Enter	the hospital's name,
5] An organizati	on operated fo	or the benefit of a col	llege or university owned	or operate	ed by a go	overnmental u	nit describe	ed in
6 7 X 8 9	 7 X 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.) 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 								
	or university o	or a non-land-g	grant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of	the college	or
10				than 33 1/3% of its supp tto certain exceptions; a					
	 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization. You must complete Part IV, Sections A and B. 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. 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. d 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. 								
	(i) Name of suppo		n about the supporte (ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount o	f monetary	(vi) Amount of other
	organization			(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions)
Total									

HOAG LIBRARY OF THE SWAN LIBRARY ASSOCIATION

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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.)

Schedule A (Form 990) 2022

Part II

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1043806.	868,974.	755,137.	966,126.	683,802.	4317845.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1043806.	868,974.	755,137.	966,126.	683,802.	4317845.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						463,479.
	Public support. Subtract line 5 from line 4.						3854366.
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2018 1043806.	(b) 2019	(c)2020 755,137.	(d) 2021 966,126.	(e) 2022	(f) Total 4317845.
	Amounts from line 4	1043000.	868,974.	/55,15/.	900,120.	683,802.	431/045.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	53.	56.	14.	874.	900.	1,897.
•	and income from similar sources		50.	14.	0/4.	900.	1,097.
9	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital		1,850.	4,450.			6,300.
11	assets (Explain in Part VI.) Total support. Add lines 7 through 10		1,050.	1,150.			4326042.
12	Gross receipts from related activities,	etc. (see instructio	ns)			12	55,790.
	First 5 years. If the Form 990 is for th		,	fourth or fifth tax y			
10	organization, check this box and stor	-		-			
Sec	ction C. Computation of Publi	c Support Per	centage				
	Public support percentage for 2022 (I			olumn (f))		14	89.10 %
	Public support percentage from 2021		•			15	87.38 %
	33 1/3% support test - 2022. If the c					ore, check this bo	
	stop here. The organization qualifies						V
b	33 1/3% support test - 2021. If the c	organization did no	t check a box on l	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual	ifies as a publicly s	supported organization	ation			
17a	10% -facts-and-circumstances test	- 2022. If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	nd line 14 is 10% o	or more,
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop her	r e. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pu	blicly supported or	rganization		
b	10% -facts-and-circumstances test	- 2021. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is [.]	10% or
	more, and if the organization meets the	ne facts-and-circum	nstances test, cheo	ck this box and st	op here. Explain i	n Part VI how the	
	organization meets the facts-and-circu		-		• •		
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a		
						Schedule A	(Form 990) 2022

HOAG LIBRARY OF THE SWAN LIBRARY ASSOCIATION

Schedule A (Form 990) 2022

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 202	2 (f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 202	2 (f) Total
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)					L	
14	First 5 years. If the Form 990 is for th	-			-		· · · · · · · · · · · · · · · · · · ·
<u> </u>	check this box and stop here	o Cupport Do					
	ction C. Computation of Public						
	Public support percentage for 2022 (I			.,,		15	%
	Public support percentage from 2021 ction D. Computation of Invest					16	%
	•			no 10. oolumn (f))		17	0/
	Investment income percentage for 20 Investment income percentage from					17	<u> </u>
	1 33 1/3% support tests - 2022. If the					· · · · · · · · · · · · · · · · · · ·	
198	more than 33 1/3%, check this box a						
h	33 1/3% support tests - 2021. If the						
L.	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						
-	23 12-09-22	an alla not check a	<u>557 OF INC 14, 19</u>				dule A (Form 990) 2022
20202			15			Cone	

HOAG LIBRARY OF THE SWAN LIBRARY ASSOCIATION

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1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes No

Part IV | Supporting Organizations

Schedule A (Form 990) 2022

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

Section A. All Supporting Organizations

- 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.
- 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).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? // "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- 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.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- **5a** Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes." answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes." provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes." complete Part I of Schedule L (Form 990).
- 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.
- b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disgualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to determine whether the organization had excess business holdings.)

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Schedule A (Form 990) 2022

Part IV Supporting Organizations (continued) Yes No 11 Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11b balow, of a support or organization? Indirectly or indirectly controls, either alone or together with persons described on lines 11b and 11b balow? Indirectly or indirectly controls, either alone or together with persons described on lines 11b and 11b balow? Indirectly or indirectly controls, either alone or together with persons described on lines 11b and 11b balow? Indirectly or indirectly controls, either alone or together with persons described on lines 11b and 11b balow? Indirectly or indirectly or indirectly controls, either alone or together with persons described on lines 11b balow? Indirectly or inding organization's and or indirectors or indirectly or indi	Sche	edule A (Form 990) 2022 ASSOCIATION	16-077880) 4 Pa	age 5
Heat the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, ether alone or together with persons described on lines 11b and 11b talow, the governing body of a supported organization? A A person who directly or indirectly controls, ether alone or together with persons described on lines 11b and 11b talow, the governing body of a supported organization? A Addition of Part W. Section B. Type I Supporting Organizations Ves No more supported organizations have the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the powers to regularly appoint or elect at least a majority of the organization is directics, or trustees at all these during the support or direct, if now the supported organization is directively operated, supervised, or controlled the organization is all the organization is directions, or providing such powers to regularization and in the supported organization and what controller the supporting organization? I were a majority of the organization and what controller the purposes of the support of organization? I were a majority of the organization's directors or trustees during the support organization? I were a majority of the organization's active the purposes of the support organization? I were a majority of the organization's directors or trustees during the support or organization? I were a majority of the organization's directors or trustees during the support provided corganization's I were are organized organization's directors or trustees during the support provided corganization's I were are organized organization organization. I were are an orbit or governing body of a supported organization of support provided corganization's I were are					<u> </u>
 a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? b A family member of a person described on line 11a ac 11b above? c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Pert VI. c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Pert VI. c A bardy pertod. c A bardy person. d A b				Yes	No
11a 11a 2 A 39% controlled enty of a person described on line 11a above? 13b 3 A 39% controlled enty of a person described on line 11a bove? 11b 4 A 39% controlled enty of a person described on line 11a or 11b above? 11c 5 A 50% controlled enty of a person described on line 11a or 11b above? 11c 5 A 50% controlled enty of a person described on line 11a or 11b above? 11c 6 A 50% controlled enty of a person described on line 11a or 11b above? 11c 7 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have than ensy supported organization for ensy endpoint and control on remove supported organization for ensy endpoint and person described. Junc to the support of organization apported organization durat conditions remove solutions of the support of a person described or aganization of the time support of organization of the time of the support of organization for the time support of organization for the support of organization support of organization for the support of organization is support of organization for the samp of the organization is support of organization for the samp of the organization is support of organization for the samp of the organization is support of organization for the samp of the organization is support of organization for the samp of the organization for the samp of the organization for the samp of the organization is support of organization fo	11	Has the organization accepted a gift or contribution from any of the following persons?			
b A family member of a person described on line 11a above? c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. Section B. Type I Supporting Organizations Yes No more supported organizations have the power to againly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization of the powers to application's activities. If the organization that more than one supported organization, general how the powers to application's directors, or trustees were allocated among the supported organization operated any supported organization? If "Yes," explain in Part VI how providing such benefit carried or any supported organization's there the purposes of the supported organization of the provide of any supported organization? If "Yes," explain in Part VI how benefit carried or the purposes of the supported organization's UP segnitation's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's upported organization's UP segnitation's UP segnitation's upported organization's upported organization's upported organization's upporting organization's upported organization's UP segnitation's upported organization's upported organization's upported organization's UP segnitation's upported organization's upported organization's UP segnitation's UP segnit UP segnitation's UP segnitation's UP se	а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
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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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization's. 2 3 By reason of the relationship described on line 2, above, did the organization's supported organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organization is negard. 3 3 Section E. Type III Functionally Integrated Supporting Organizations. 3 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 3 2 The organization subported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions). 4 4 The organization is the parent of each of its supported organizations. Complete l				Vac	No
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those supported organizations and explain how these activities directly furthered their exempt purposes,					

- that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, 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.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "No" provide details in **Part VI.**

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.* 232025 12-09-22

17

3b | | Schedule A (Form 990) 2022

2a

2b

3a

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Scho	HOAG LIBRARY OF THE SWA	AN LIBR		L6-0778804 Page 6
Pa		na Oraani		
1	Check here if the organization satisfied the Integral Part Test as a qualifying All other Type III non-functionally integrated supporting organizations must	ng trust on N	lov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			

emergency temporary reduction (see instructions).

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

6

Schedule A (Form 990) 2022

232026 12-09-22

	dule A (Form 990) 2022 ASSOCIATION	(a)(2) Currenting Organ			6-0778804 Page 7
Par		(a)(3) Supporting Orga	nizations (continu	<u>ied)</u>	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe			1	
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets	-		4	
5	Qualified set-aside amounts (prior IRS approval required - pre	ovide details in Part VI)		5	
6	Other distributions (<i>describe in</i> Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which th	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount	(1)	<i>(</i>)	10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	is	(iii) Distributable Amount for 2022
_1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
C	From 2019				
d	From 2020				
e	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
<u>a</u>	Excess from 2018				
	Excess from 2019				
C	Excess from 2020				
d	Excess from 2021				
е	Excess from 2022				

Schedule A (Form 990) 2022

232027 12-09-22

Schedule A	(Form 990) 2022		LIBRARY CIATION	OF	THE	SWAN	LIBRAR	Y	16-0778804 _{Page}
Part VI	Supplemental Inform Part IV, Section A, lines 1	mation. , 2, 3b, 3c, lines 2 and	Provide the exp 4b, 4c, 5a, 6, 9 3; Part IV, Sec	9a, 9b, tion E,	9c, 11a, , lines 1c	11b, and , 2a, 2b, 3	11c; Part IV, S a, and 3b; Pa	Section B, lines t V, line 1; Part	r 17b; Part III, line 12; 1 and 2; Part IV, Section C, V, Section B, line 1e; Part V,
232028 12-09-2	22				20				Schedule A (Form 990) 20

Schedule A

Identification of Excess Contributions Included on Part II, Line 5

16-0778804

2022

** Do Not File ** *** Not Open to Public Inspection ***

Total Contributions	Excess Contributions
550,000.	463,479
	Contributions

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

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

Department of the Treasury Internal Revenue Service

(Form 990)

Schedule B

Name of the organization

HOAG LIBRARY OF THE SWAN LIBRARY

ASSOCIATION

Organization type (check	one):
--------------------------	-----	----

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

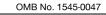
J For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set in the set of t

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2022)



2022

Employer identification number

16-0778804

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$648,964.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

HOAG LIBRARY OF THE SWAN LIBRARY ASSOCIATION

Schedule B (Form 990) (2022) Name of organization

Employer identification number

Page 2

16-0778804

223452 11-15-22

	B (Form 990) (2022)		Page 3
	rganization LIBRARY OF THE SWAN LIBRARY		Employer identification number
	IATION		16-0778804
Part II	Noncash Property (see instructions). Use duplicate copies of Part II	if additional space is needed	l.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		\$	
223453 11-15	5-22		Schedule B (Form 990) (2022)

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Schedule B (Form 990) (2022)

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Schedule B (Form 990) (2022)			Page 4
Name of organization			Employer identification number
HOAG LIBRARY OF THE SWA	N LIBRARY		
from any one contributor. Complete completing Part III, enter the total of exclusiv	e columns (a) through (e) and the followin vely religious, charitable, etc., contributions of \$	ng line entry. For organizations	$\frac{16-0778804}{\text{or (10) that total more than $1,000 for the year}}$
Use duplicate copies of Part III if	additional space is needed.		
(a) No. from (b) Purpose of gift Part I	(c) Use of g	gift	(d) Description of how gift is held
	(e) Transf	er of gift	
Transferee's name, a	address, and ZIP + 4	Relationsh	ip of transferor to transferee
(a) No. from (b) Purpose of gift Part I	(c) Use of g	yift	(d) Description of how gift is held
	(e) Transf	er of gift	
Transferee's name,	address, and ZIP + 4		ip of transferor to transferee
(a) No. from (b) Purpose of gift Part I	(c) Use of g	yift	(d) Description of how gift is held
	(e) Transf	fer of gift	
Transferee's name, a	address, and ZIP + 4	Relationsh	ip of transferor to transferee
(a) No. from (b) Purpose of gift Part I	(c) Use of g	yift	(d) Description of how gift is held
	(e) Transf	er of gift	
Transferee's name, .	address, and ZIP + 4	Relationsh	ip of transferor to transferee
223454 11-15-22			Schedule B (Form 990) (2022)

08290315 784124 HOA002001

SC	CHEDULE D Supplemental Financial Statements					
(Forr	Form 990) Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.					
	partment of the Treasury Attach to Form 990.					
	I Revenue Service					
Nam	e of the organization	h HOAG LIBRARY OF THI ASSOCIATION	E SWAN LIDRARI		identification number 6 – 0 7 7 8 8 0 4	
Pa	t I Organizat		d Funds or Other Similar Funds o			
		answered "Yes" on Form 990, Part IV, lin				
	-		(a) Donor advised funds	(b) Funds and	other accounts	
1	Total number at end	l of year				
2		contributions to (during year)				
3		grants from (during year)				
4	Aggregate value at e	end of year				
5			writing that the assets held in donor advised	d funds		
	are the organization	's property, subject to the organization's	exclusive legal control?		Yes No	
6	Did the organization	i inform all grantees, donors, and donor a	dvisors in writing that grant funds can be u	sed only		
	for charitable purpos		r donor advisor, or for any other purpose co	•		
Dec	impermissible privat	e benefit?			Yes No	
Pa		· · · · · · · · · · · · · · · · · · ·	ganization answered "Yes" on Form 990, Pa	art IV, line 7.		
1		rvation easements held by the organization				
		of land for public use (for example, recrea	·	a historically import		
		natural habitat	Preservation of a	a certified historic s	structure	
•	Preservation of		in al an annual in a na shiin shinn in Alan fa maa a	6		
2	day of the tax year.	hrough 2d if the organization held a qualif	ied conservation contribution in the form of		it the End of the Tax Year	
		accuration accomente				
a b						
c	•		ucture included in (a)			
		ation easements included in (c) acquired a				
		() (2d		
3			eased, extinguished, or terminated by the c		the tax	
	year			0 0		
4	Number of states wi	here property subject to conservation eas	sement is located			
5	Does the organization	on have a written policy regarding the per	iodic monitoring, inspection, handling of			
	violations, and enfor	rcement of the conservation easements it	holds?		Yes No	
6	Staff and volunteer I	hours devoted to monitoring, inspecting,	handling of violations, and enforcing conse	rvation easements	during the year	
7	Amount of expenses	s incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation	on easements durir	ng the year	
8			e satisfy the requirements of section 170(h)			
_	and section 170(h)(4				Yes No	
9		•	on easements in its revenue and expense s			
			ote to the organization's financial statemer	nts that describes t	he	
Pa	t III Organization's account	unting for conservation easements.	Art, Historical Treasures, or Oth	er Similar Ass	ets	
1 4		he organization answered "Yes" on Form				
10			8, not to report in its revenue statement an	d balanco shoot w	orke	
Id	U U		blic exhibition, education, or research in fur			
			ncial statements that describes these items	-		
b					of	
	b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service,					
	provide the following amounts relating to these items:					
	-			\$		
				*		
2						
		nts required to be reported under FASB A				
а	Revenue included o	n Form 990, Part VIII, line 1	-	\$		
LHA	For Paperwork Rec	duction Act Notice, see the Instructions	s for Form 990.	Sched	lule D (Form 990) 2022	
23205	09-01-22					
			26			

^{08290315 784124} HOA002001

HOAG LIBRARY (OF	\mathbf{THE}	SWAN	LIBRARY
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0.1		BRARY OF TH	IE SWAN LII	BRARY		16-07	7990	1 5	2
	dule D (Form 990) 2022 ASSOCIA		Historical Tre	asures or (Other Sim	⊥0−07 ilar Assete	1000	<u>4 P</u> a	age Z
							(contil	nued)	
3	Using the organization's acquisition, accession collection items (check all that apply):	on, and other records	s, check any of the f	ollowing that m	ake signinca	ni use or its			
	X Public exhibition	d	X Loan or exc	hango program					
a		a		nange program					
b	Scholarly research	e							
c	Preservation for future generations		. In			maaa in Daut	VIII		
4	Provide a description of the organization's co	•		•		•	XIII.		
5	During the year, did the organization solicit o						Yes	X	
Par	to be sold to raise funds rather than to be ma t IV Escrow and Custodial Arran								No
I UI	reported an amount on Form 990, Par		ete il the organizatio	n answered re	es on Forma	990, Part IV,	ine 9, or		
10	Is the organization an agent, trustee, custodi		any for contribution	a or other exect	o not include				
Ia			•				Yes		No
h	on Form 990, Part X?					∟			
D	If "Yes," explain the arrangement in Part XIII	and complete the foll	lowing table:				Amoun	+	
						-	Amoun		
	Beginning balance								
	Additions during the year					d			
-	Distributions during the year					e			
t On	Ending balance					f	Vee		
	Did the organization include an amount on Fe				•	∟	Yes		No
Par	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds. Complete i								
1 41		(a) Current year	(b) Prior year	(c) Two years t		ee years back	(e) Fou	r veare	hack
4.0	Designing of year belongs	47,419.	47,419.		. ,	47,419.			419.
	Beginning of year balance	47,415.	47,419.	= / ,	±1J.	47,419.		ч',	417.
	Net investment earnings, gains, and losses								
	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
	Administrative expenses	47,419.	47,419.	47	419.	47,419.		47	419.
	End of year balance	,	,	,	±19.	47,419.		¥/,	419.
2	Provide the estimated percentage of the curr	rent year end balance		i) neid as:					
	Board designated or quasi-endowment Permanent endowment100	0/	_%						
		%							
С		%							
0.	The percentages on lines 2a, 2b, and 2c sho				6 He				
за	Are there endowment funds not in the posse	ssion of the organiza	tion that are held ar	id administered	for the		1	Yes	No
	organization by:							165	X
	(i) Unrelated organizations						3a(i)		X
	(ii) Related organizations						3a(ii)		
	If "Yes" on line 3a(ii), are the related organiza						3b		
4 Dar	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		wment funds.						
Fai	Complete if the organization answere		Dout IV line 110 C		lart V lina 10				
							(* 5		
	Description of property	(a) Cost or of	. ,	or other	(c) Accumu		(d) Boo	k valu	е
	Land	basis (investr	,	(other)	depreciat		10	6 21	5.0
	Land			6,258.	1 160	971		$\frac{6, 2!}{1, 2!}$	
	Buildings		5,69	4,166.	1,162,	0/10	2,73	⊥, ∠:	90.
	Leasehold improvements			2 7 / /	101	026	C	<u>, , , , , , , , , , , , , , , , , , , </u>	00
	Equipment			3,744.		036.		$\frac{2}{2}, \frac{7}{6}$	
	Other			8,531.		836.	3,35	<u>8,6</u>	
iotal	. Add lines 1a through 1e. (Column (d) must e	oual Form 990 Part	x column (R) line 1	()c)		1	J, JJ	υ, Ϳ:	JU.

Schedule D (Form 990) 2022

HOAG LIBRARY OF THE SWAN LIBRARY ASSOCIATION Schedule D (Form 990) 2022 Part VII Investments - Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (c) Method of valuation: Cost or end-of-year market value (a) Description of security or category (including name of security) (b) Book value (1) Financial derivatives (2) Closely held equity interests (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13. Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (a) Description of liability (b) Book value 1 (1) Federal income taxes (2)(3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the 2. organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2022

232053 09-01-22

	HOAG LIBRARY OF	THE SWAN LIBRAN	RY			
Sche	dule D (Form 990) 2022 ASSOCIATION				778804	Page 4
Par	t XI Reconciliation of Revenue per Audited Fi	inancial Statements Wi	th Revenue per Re	turn.		
	Complete if the organization answered "Yes" on Form	990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial	statements		1	695,	429.
2	Amounts included on line 1 but not on Form 990, Part VIII, lin	ne 12:				
а	Net unrealized gains (losses) on investments	2a	986.			
b	Donated services and use of facilities	2b				
С	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d			2e		986.
3	Subtract line 2e from line 1			3	694	443.
4	Amounts included on Form 990, Part VIII, line 12, but not on	line 1:				
а	Investment expenses not included on Form 990, Part VIII, line	e7b4a	470.			
b	Other (Describe in Part XIII.)	4b				
С	Add lines 4a and 4b			4c		470.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)						,913.
Pa	t XII Reconciliation of Expenses per Audited F		ith Expenses per F	leturn	•	
	Complete if the organization answered "Yes" on Form	, ,				
1	Total expenses and losses per audited financial statements			1	734	,333.
2	Amounts included on line 1 but not on Form 990, Part IX, line	1	1			
а	Donated services and use of facilities					
b	Prior year adjustments					
С	Other losses					
d	, , , , , , , , , , , , , , , , , , , ,					•
е	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	734	,333.
4	Amounts included on Form 990, Part IX, line 25, but not on lin	1	450			
а	Investment expenses not included on Form 990, Part VIII, line		470.			
b						480
С	Add lines 4a and 4b			4c	D 24	470.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 9)	90, Part I, line 18.)		5	734	,803.
Pa	rt XIII Supplemental Information.					

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

PART III, LINE 1A:

IN ACCORDANCE WITH COMMON LIBRARY PRACTICE, THE LIBRARY HAS NOT REFLECTED
THE VALUE OF COLLECTIONS ON ITS FINANCIAL STATEMENTS. PURCHASES OF OR
PROCEEDS FROM THE SALE OF COLLECTION ITEMS ARE RECORDED AS CHANGES IN
UNRESTRICTED NET ASSETS IN THE YEAR THE TRANSACTION OCCURS. COLLECTION
ITEMS RECEIVED AS DONATIONS ARE NOT RECORDED AS INCOME IN THE STATEMENT OF
ACTIVITIES AND CHANGE IN NET ASSETS.

PART III, LINE 4:

THE LIBRARY'S COLLECTION CONSISTS OF BOOKS AND OTHER MEDIA ITEMS FOR

COMMUNITY MEMBERS TO UTILIZE.

232054 09-01-22

HOAG LIBRARY OF THE SWAN LIBRARY	16 0770004
Schedule D (Form 990) 2022 ASSOCIATION Part XIII Supplemental Information (continued)	16-0778804 Page 5
PART V, LINE 4:	
TO PROVIDE INCOME TO BE USED ON AN ANNUAL BASIS FOR THE	OPERATIONS OF THE
LIBRARY.	
	Schedule D (Form 990) 2022

232055 09-01-22

SCHEDULE L		Tra	insactior	ıs V	Vith	Int	erested	P	ersons			0	ИВ No. ⁻	1545-00)47
(Form 990)	Complete if t	the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.									2022				
Department of the Treasury			Attac	h to F	orm 9	90 or I	Form 990-EZ.						pen T		olic
Internal Revenue Service			/w.irs.gov/Form					test	information.	_			spect		
			IBRARY OF THE SWAN LIBRARY									r ident		on nu	mber
	ASSOCI.											788	04		
									n 501(c)(29) orga						
	f the organizatior						line 25a or 25b I	o, or	Form 990-EZ, Pa	art V, I	ine 40)b.			
1 (a) Name of disquali	fied person	(b) ⊦	Relationship betv person and or			ified	(c) D	escription of tran	sactic	n				ected?
				5									+ "	es	No
													+	-+	
													+		
													+		
2 Enter the amount o	f tax incurred by	the o	rganization man	agers	or disc	qualifie	d persons dur	ing	the year under						
section 4958											\$				
3 Enter the amount o	f tax, if any, on li	ne 2,	above, reimburs	ed by	the org	ganiza	tion				\$				
Dout II Leave to	and/ar Fran	. I.a.t	ave at a d Dave												
	and/or Fron							_							
	-					, Part V	V, line 38a or F	orm	990, Part IV, lin	e 26; (or if th	ie orga	nizatio	'n	
	amount on For		i	Ť –	2. Dan to or					((h) Ap	proved		Vritten
(a) Name of interested person	(b) Relation with organi			fron	n the	, ,,	e) Original cipal amount	0	(I) Dalance due (9) III hu hoard or (1) III			ement?			
					From	l .	-			Yes	No	Yes	No	Yes	
					FIOIII					165		165		165	
															+
															+
															+
													<u> </u>		<u> </u>
													L		
Total		Dar	afiting Inter	<u></u>		<u></u>	\$								
	r Assistance		•												
	f the organization								()) =						
(a) Name of interes	sted person		(b) Relationship interested pers			(c) Amount of assistance		(d) Type assistan			•) Purp assista		đ
			the organiza		u										
		-									-				
LHA For Paperwork Re	eduction Act No	otice,	see the Instruc	tions f	for For	m 990) or 990-EZ.				Sche	edule L	. (Forr	n 990) 2022

HOAG	LIBRARY	OF	THE	SWAN	LIBRARY
ASSO	νταπτοΝ				

Schedule L (Form 990) 2022 ASSOCI	ATION		16-0778	804	Page 2
Part IV Business Transactions Involv	ing Interested Persons.				
Complete if the organization answered	"Yes" on Form 990, Part IV, line 28a, 28	3b, or 28c.			<u> </u>
(a) Name of interested person	(b) Relationship between interested	(c) Amount of	(d) Description of	(e) Sha organiz	ring of ation's
	person and the organization	transaction	transaction	reven	ues?
		1 - 1 - 1		Yes	No
LINDA WELLER	BOARD PRESIDENT	15,161.	PURCHASE OF		Х
Part V Supplemental Information.	11				
	onses to questions on Schedule L (see in	nstructions)			
SCH L, PART IV, BUSINESS T	RANSACTIONS INVOLVIN	G INTERESTE	D PERSONS:		
(A) NAME OF PERSON: LINDA	WELLER				
(D) DESCRIPTION OF TRANSAC	TION: PURCHASE OF CO	MPUTER EQUI	PMENT AND		
SOFTWARE BY THE LIBRARY FR	OM THE COMPANY THAT	LINDA WELLE	R IS THE		
PRESIDENT OF.					

Schedule L (Form 990) 2022

232132 11-01-22

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information. HOAG LIBRARY OF THE SWAN LIBRARY



16-0778804

OMB No. 1545-0047

ASSOCIATION

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

AND LEARNING EXPERIENCES THROUGH PROGRAMMING.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS PRESENTED TO THE ENTIRE BOARD AT A REGULAR MONTHLY MEETING

FOR THEIR REVIEW PRIOR TO THE FILING OF THE FORM 990 WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

ON AN ANNUAL BASIS, EACH BOARD MEMBER REVIEWS AND SIGNS THE ADOPTED

CONFLICT OF INTEREST POLICY.

FORM 990, PART VI, SECTION B, LINE 15A:

AS PART OF THE ANNUAL REVIEW PROCESS, THE BOARD REVIEWS AND APPROVES THE

EXECUTIVE DIRECTOR'S SALARY.

FORM 990, PART VI, SECTION C, LINE 19:

THE DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST TO THE

EXECUTIVE DIRECTOR. THIS AVAILABILITY IS NOT PUBLICIZED.

FORM 990, PART XII, LINE 1:

THE FINANCIAL STATEMENTS AND FORM 990 OF THE LIBRARY HAVE BEEN PREPARED

ON THE MODIFIED CASH BASIS OF ACCOUNTING.

FORM 990, PART XII, LINE 2C:

THE BOARD OF TRUSTEES REVIEWS THE RESULTS OF THE AUDIT WITH THE

INDEPENDENT AUDITOR AT A REGULARLY SCHEDULED BOARD MEETING.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2022

33

<u>Schedule O (Form 990) 20</u> Name of the organization	HOAG LIBRARY ASSOCIATION	OF THE SWAN	I LIBRARY	Page Employer identification number 16-0778804
	mbbociniion			10 0770004
232212 10-28-22			34	Schedule O (Form 990) 202