**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A	For the	2022 calendar year, or tax year beginning $$	JUN 30, 2023	•
	Check if applicable		D Employer identifi	cation number
	applicable	Friends and Foundation of the Rochester		
	Addres	S   D1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		
F	Name change	<del>_</del>	16-13474	53
F	Initial	Number and street (or P.O. box if mail is not delivered to street address)  Room/s		
F	Final	115 South Avenue	585 428-	
_	—lreturn/ termin- ated		G Gross receipts \$	7,015,823.
Г	Ameno		H(a) Is this a group r	
F	Application		for subordinates	
	pendin	same as C above	<b>H(b)</b> Are all subordinates i	····· — —
$\overline{}$	Tay.eye			list. See instructions
	Websit		H(c) Group exemption	
				M State of legal domicile: NY
_	art I	Summary	real of formation. 23 05 1	VI Otato or logal dornicilo. 24 2
		Briefly describe the organization's mission or most significant activities: To raise	funds and pr	ovide
Governance	'	general funding for library facilities and p	rograms in Ro	chester.
nar	1 .	Check this box if the organization discontinued its operations or disposed of r	_	
Ver	1	Number of voting members of the governing body (Part VI, line 1a)		21
		Number of voting members of the governing body (Fart VI, line 1a)  Number of independent voting members of the governing body (Part VI, line 1b)		21
Activities &		Total number of individuals employed in calendar year 2022 (Part V, line 1a)	·····	8
ij				40
₹		Total number of volunteers (estimate if necessary)		0.
¥		Total unrelated business revenue from Part VIII, column (C), line 12  Net unrelated business taxable income from Form 990-T, Part I, line 11		0.
_	B	Net difference busiliess taxable income from Form 990-1, Fart1, life 11	Prior Year	Current Year
		Contributions and grants (Part VIII. line 1b)	6,790,315.	2,856,715.
ne		Contributions and grants (Part VIII, line 1h)	0,730,313.	0.
Revenue		Program service revenue (Part VIII, line 2g)	670,282.	562,462.
æ		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	117,330.	21,305.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	7,577,927.	3,440,482.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	820,295.	921,511.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	020,255.	0.
	I	Benefits paid to or for members (Part IX, column (A), line 4)	468,057.	401,876.
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
)en	loa	Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)  192,447.	0.	0.
Ä	47		185,273.	179,451.
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,473,625.	1,502,838.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	6,104,302.	1,937,644.
<u> </u>	19	Revenue less expenses. Subtract line 18 from line 12	Beginning of Current Year	End of Year
Net Assets or	20	Total accepts (Part V. line 16)	23,466,918.	27,148,847.
ASS	20	Total assets (Part X, line 16) Total liabilities (Part X, line 26)	201,557.	211,114.
let /	22	Net assets or fund balances. Subtract line 21 from line 20	23,265,361.	26,937,733.
P	art II	Signature Block	23,203,301.	20,551,155
_		Ities of perjury, I declare that I have examined this return, including accompanying schedules and st	atements, and to the hest of m	v knowledge and helief it is
	-	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep		y kilowioago alla bollol, it io
	, 001100	g and complete. Bookington of property (office that officer) to become on an information of which prop	Jaror nas any knowleage.	
Sig	ın	Signature of officer	Date	
He		Donna Borgus, Executive Director		
116		Type or print name and title		
		Print/Type preparer's name Preparer's signature	Date Check	PTIN
Pai	d	Jeanne Beutner Jeanne Beutner		
	parer	Firm's name Heveron & Company CPAs, PLLC		7-1895149
	Only	Firm's address 260 Plymouth Avenue South	THIHISEIN Z	, 10,0111
030	, only	Rochester, NY 14608	Dhone no 5 8	5-232-2956
Ma	v the IE	RS discuss this return with the preparer shown above? See instructions	[1 Holle Ho. 5 0	X Yes No

Pai	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	See Schedule O
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 1,090,034. including grants of \$ 921,511.) (Revenue \$ 21,305.) On an ongoing basis, the Friends & Foundation of RPL complements
	regular government appropriations to Rochester Public Library through
	(1) gifts to an annual fund raising campaign, (2) special grants from
	corporations, individuals, charitable foundations and government
	funding sources, (3) earnings generated by a permanent endowment fund,
	(4) individual gifts made through wills and trusts, and (5) income from
	the sale of books and library related items through the Library Store.
	Funds from these sources are used to expand library programs, to
	support capital improvements at public libraries, to ensure the
	appropriate maintenance of library facilities, and to support needed
	professional resources, services and staff. (Continued on Schedule O)
	•
4b	(Code:) (Expenses \$
4-	
4c	(Code:) (Expenses \$
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses 1,090,034.
	Form <b>990</b> (2022)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		х
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
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		Х
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		Х
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		Х
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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
<b>20</b> a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	

Form 990 (2022) Public Library

Part IV Checklist of Required Schedules (continued)

			· ·	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
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		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			7.7
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
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			7.7
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
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>			
_	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
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	20		X
31	contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	30		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	- 31		
-	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		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			۱,,
0.5	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?  If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		
Ь	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?	000		
	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		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		-	
Pai	Note: All Form 990 filers are required to complete Schedule 0  t V Statements Regarding Other IRS Filings and Tax Compliance	38	Х	
· al	Check if Schedule O contains a response or note to any line in this Part V			
	entering continues to contain a responde of flote to diffy fill of the v		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable   1a   13			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	

232004 12-13-22

Form 990 (2022) Public Library

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

			Yes	No						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,									
	filed for the calendar year ending with or within the year covered by this return 2a 8									
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х							
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X						
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b								
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a									
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X						
b	If "Yes," enter the name of the foreign country									
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).									
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X						
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X						
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с								
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit									
	any contributions that were not tax deductible as charitable contributions?	6a		X						
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts									
	were not tax deductible?	6b								
7	Organizations that may receive deductible contributions under section 170(c).									
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		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 required									
	to file Form 8282?	7c		X						
d	If "Yes," indicate the number of Forms 8282 filed during the year									
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X						
g										
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?									
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the									
	sponsoring organization have excess business holdings at any time during the year?									
9	Sponsoring organizations maintaining donor advised funds.									
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a								
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b								
10	Section 501(c)(7) organizations. Enter:									
	Initiation fees and capital contributions included on Part VIII, line 12									
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities									
11	Section 501(c)(12) organizations. Enter:									
	Gross income from members or shareholders									
b	Gross income from other sources. (Do not net amounts due or paid to other sources against									
	amounts due or received from them.)									
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40								
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									
	organization is licensed to issue qualified health plans  13b									
	Enter the amount of reserves on hand  Did the exemplation receive any payments for indeed tenning convices during the tay year?	44-		X						
	Did the organization receive any payments for indoor tanning services during the tax year?	14a								
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b								
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	45		Х						
	excess parachute payment(s) during the year?	15		22						
16	If "Yes," see the instructions and file Form 4720, Schedule N.	46		X						
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		71						
17	If "Yes," complete Form 4720, Schedule O.  Section F01(a)(21) arganizations. Did the trust, or any disqualified or other person angage in any activities.									
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities	47								
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17								
	If "Yes," complete Form 6069.									

232005 12-13-22

Form 990 (2022)

16-1347453

Page 6

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion 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			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 21			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	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 appoint 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, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
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 reached at the			
	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 Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
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 approval by independent			
	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		X
	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 arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
_	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NY			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	s only	) avail	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d fina	ncial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	The Organization - 585 428-8321			
	115 South Avenue, Rochester, NY 14604			

232006 12-13-22

### Form 990 (2022)

16-1347453

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
- Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the organization r	nor any related	orga	aniza	ation	COI	mpe	nsat	ted any current officer, o	director, or trustee.	
(A)	(B)			_ (0	<b>C</b> )			(D)	(E)	(F)
Name and title	Average	(do		Pos heck		than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week	$\vdash$	CCI all	lu a u	ii ecit	) / u us	1	from	from related	other
	(list any hours for	or director						the organization	organizations (W-2/1099-MISC/	compensation from the
	related	e or c	tee			satec		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	Individual trustee	Institutional trustee		yee	mper		1099-NEC)	1000 1120)	and related
	below	idual	ution	<u></u>	Key employee	est co	e.	,		organizations
	line)	Indiv	Instit	Officer	Key e	Highest compensated employee	Form			
(1) Donna Borgus	37.50									
Executive Director				Х				92,529.	0.	12,690.
(2) Andrew Iserson	0.40									
Director		Х						0.	0.	0.
(3) Brian McLaughlin	0.40									
Director		Х						0.	0.	0.
(4) Dan Ross	0.60									
Secretary		Х		Х				0.	0.	0.
(5) David Hou	0.60									
Treasurer		Х		Х				0.	0.	0.
(6) Diana Carter	0.40									
Director		Х						0.	0.	0.
(7) Dr. Sheila Strong	0.40									
Director		Х						0.	0.	0.
(8) Donna P. Benjamin	0.80							_	_	_
President		Х		Х				0.	0.	0.
(9) Dr. Kiah Nyame	0.40							_	_	_
Director		Х						0.	0.	0.
(10) Justin Stevens	0.60								_	_
Vice President		Х		Х				0.	0.	0.
(11) Patty Uttaro	0.40								_	_
Ex Officio		Х						0.	0.	0.
(12) Richard L. Hamilton	0.60								_	_
Consultive/Ex Officio		Х		Х				0.	0.	0.
(13) Sally Millick	0.40							_	_	_
Director		Х						0.	0.	0.
(14) Tiana Stephens	0.40							_	_	_
Director		Х						0.	0.	0.
(15) William Yust	0.40								_	_
Director		Х						0.	0.	0.
(16) Amy Button	0.10									
Director		Х						0.	0.	0.
(17) Shawn Futch	0.40									_
Director		Х						0.	0.	0.

232007 12-13-22

Form **990** (2022)

Page 7

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
(A) Name and title	(B) Average hours per week	(do box	not c	Pos heck ss pe	c) sition more erson		one h an	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estimated amount of other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	tions compens -MISC/ from t		the zation lated
(18) Denise Lippa Director	0.40	х						0.	0			0.
(19) Renee Minarik	0.10									+		
Director	0.10	x						0.	O	١.		0.
(20) Shiva Ramaswamy	0.40									Ť		
Director		Х						0.	O	١.		0.
(21) Marjorie Shelly	0.40											
Director		Х						0.	0	١.		0.
(22) Steven Suozzi	0.30	,,										0
Director		Х						0.		١.		0.
										$\dashv$		
								92,529.		).	1 2	600
1b Subtotal								92,529.		).	14,	690.
c Total from continuation sheets to Part VI d Total (add lines 1b and 1c)								92,529.		).	12.	690.
2 Total number of individuals (including but n										-1		
compensation from the organization						<b>-</b> ,			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			0
											Ye	s No
3 Did the organization list any <b>former</b> officer, line 1a? If "Yes," complete Schedule J for s								ghest compensated emp			3	Х
4 For any individual listed on line 1a, is the su	ım of reportab											
and related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	edule	e J i	for such individual		. L	4	X
5 Did any person listed on line 1a receive or a	•				•			· ·				l
rendered to the organization? If "Yes," com	plete Schedul	e J f	or su	uch	pers	son .					5	X
Section B. Independent Contractors		-l	- ll -						\$100,000 of acres		Alam fuam	
<ol> <li>Complete this table for your five highest co the organization. Report compensation for</li> </ol>										iisa	LIOTI ITOTI	1
(A)	trio odioridar y	cui	criai	ng v	VICI 1	<u> </u>		(B)	your.		(C)	
Name and business	address	N	INC	3				Description of s	ervices	Со	mpensa	tion
							$\dashv$					
2 Total number of independent contractors (i	•	ot li	mite	d to		_	stec	d above) who received m	nore than			
\$100,000 of compensation from the organic	zation					0						) (0000)
										-	orm <b>33</b> (	<b>)</b> (2022)

16-1347453 Page 9 Form 990 (2022) Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) Total revenue Related or exempt Unrelated from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues ..... 1b c Fundraising events ..... 1c d Related organizations 1d e Government grants (contributions) 1e 50,000. f All other contributions, gifts, grants, and similar amounts not included above 2,806,715. 1f g Noncash contributions included in lines 1a-1f 1g |\$ 2,856,715, h Total. Add lines 1a-1f **Business Code** Program Service Revenue 2 a f All other program service revenue g Total. Add lines 2a-2f. Investment income (including dividends, interest, and 585,233. other similar amounts) 585,233 Income from investment of tax-exempt bond proceeds 5 Royalties ..... (i) Real (ii) Personal 6 a Gross rents **b** Less: rental expenses ... 6b c Rental income or (loss) d Net rental income or (loss) (ii) Other 7 a Gross amount from sales of (i) Securities 3,528,732 assets other than inventory **b** Less: cost or other basis Other Revenue 3,551,503 and sales expenses 7b c Gain or (loss) -22,771. -22,771. -22,771. d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 41,137. 23,838. **b** Less: cost of goods sold ..... 17,299. 17,299 c Net income or (loss) from sales of inventory **Business Code** 11 a Other Income 900099 4,006 4,006 b d All other revenue 4,006 e Total. Add lines 11a-11d

12 To

Form 990 (2022)

562,462.

3,440,482.

**Total revenue.** See instructions

21,305.

Part IX Statement of Functional Expenses

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

Sect	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).								
Check if Schedule O contains a response or note to any line in this Part IX									
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses				
1	Grants and other assistance to domestic organizations								
	and domestic governments. See Part IV, line 21	921,511.	921,511.						
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,	100 (47	20 026	22 505	20 026				
_	trustees, and key employees	108,647.	38,026.	32,595.	38,026.				
6	Compensation not included above to disqualified								
	persons (as defined under section 4958(f)(1)) and								
_	persons described in section 4958(c)(3)(B)	217 022	02 220	50 645	72 020				
7	Other salaries and wages	217,822.	93,339.	50,645.	73,838.				
8	Pension plan accruals and contributions (include	14,959.	6 3/10	3 531	5 070				
•	section 401(k) and 403(b) employer contributions)	33,515.	6,349. 11,523.	3,531. 9,202.	5,079. 12,790.				
9 10	Other employee benefits	26,933.	10,914.	6,802.	9,217.				
11	Payroll taxes Fees for services (nonemployees):	20,555	10,714.	0,002.	J, ZII •				
'' a	Management								
b	Legal								
	Accounting								
d	Lobbying								
e	Professional fundraising services. See Part IV, line 17								
f	Investment management fees	84,020.		84,020.					
g	Other. (If line 11g amount exceeds 10% of line 25,								
	column (A), amount, list line 11g expenses on Sch O.)	17,404.		17,404.					
12	Advertising and promotion								
13	Office expenses	66,855.	3,930.	9,777.	53,148.				
14	Information technology								
15	Royalties								
16	Occupancy								
17	Travel								
18	Payments of travel or entertainment expenses								
	for any federal, state, or local public officials								
19	Conferences, conventions, and meetings								
20	Interest			-					
21	Payments to affiliates  Depreciation, depletion, and amortization			+					
22 23									
23 24	Other expenses. Itemize expenses not covered								
2-7	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									
b									
С									
d									
е	All other expenses	11,172.		6,381.	349.				
25	Total functional expenses. Add lines 1 through 24e	1,502,838.	1,090,034.	220,357.	192,447.				
26	Joint costs. Complete this line only if the organization								
	reported in column (B) joint costs from a combined								
	educational campaign and fundraising solicitation.								
	Check here if following SOP 98-2 (ASC 958-720)				F 000 (0000)				

Form 990 (2022)
Part X | Balance Sheet

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	594,386.	1	330,613.
	2	Savings and temporary cash investments	745,198.	2	1,408.
	3	Pledges and grants receivable, net		3	19,859.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	180,136.	8	94,689.
⋖	9	Prepaid expenses and deferred charges		9	4,320.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D10a			
	b	Less: accumulated depreciation10b		10c	
	11	Investments - publicly traded securities	17,654,999.	11	19,753,456. 6,944,502.
	12	Investments - other securities. See Part IV, line 11	4,166,077.	12	6,944,502.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	00 -00	16	27,148,847.
	17	Accounts payable and accrued expenses	89,509.	17	73,376.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ies	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
<u>ia</u>		controlled entity or family member of any of these persons		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X	112,048.		137,738.
	00	of Schedule D			211,114.
	26	Total liabilities. Add lines 17 through 25  Organizations that follow FASB ASC 958, check here	Z01,337•	26	211,114.
es		and complete lines 27, 28, 32, and 33.			
anc	27	Net assets without donor restrictions	9,321,883.	27	9,894,225.
Bala	28	Net assets with donor restrictions  Net assets with donor restrictions	40 040 4-0	28	17,043,508.
P	20	Organizations that do not follow FASB ASC 958, check here		20	27,020,000
Ī		and complete lines 29 through 33.			
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Ass	31	Retained earnings, endowment, accumulated income, or other funds		31	
et,	32	Total net assets or fund balances		32	26,937,733.
~	33	Total liabilities and net assets/fund balances	00 400 010	33	27,148,847.
	- 00	Total natinates and not assets/fund palatices		- 55	Form <b>990</b> (2022)

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3	, 44	0,4	82.
2	Total expenses (must equal Part IX, column (A), line 25)	2		,50		
3	Revenue less expenses. Subtract line 2 from line 1	3				44.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4				61.
5	Net unrealized gains (losses) on investments	5	1	,79	9,5	23.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8		-6	4,7	95.
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	26	,93	7,7	33.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d 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 separat	e basis	,			
	consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	, , , , ,					
	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 Sch	nedule (	O.			
За	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	ired aud	dit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

# **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** 

Friends and Foundation of the Rochester Name of the organization Public Library 16-1347453 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 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.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. ☐ Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

<u> </u>		<u></u>				1 age <u>-</u>				
Part II Support Schedule for	Organizations	Described in	Sections 170	(b)(1)(A)(iv) and	d 170(b)(1)(A)(\	/i)				
(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	s listed below, plea	se complete Part	II.)							
Section A. Public Support										
Calendar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total				
1 Gifts, grants, contributions, and										
membership fees received. (Do not										
include any "unusual grants.")	786,811.	666,736.	1202922.	826,676.	856,715.	4339860.				
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	786,811.	666,736.	1202922.	826,676.	856,715.	4339860.				
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)						532,011.				
6 Public support. Subtract line 5 from line 4.						3807849.				
Section B. Total Support										
Calendar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total				
7 Amounts from line 4	786,811.	666,736.	1202922.	826,676.	856,715.	4339860.				
8 Gross income from interest,										
dividends, payments received on										
securities loans, rents, royalties,										
and income from similar sources	184,819.	178,404.	154,800.	674,711.	585,233.	1777967.				
Not income from unrelated business										

_	organization, check this box and stop here	_
	organization, check this box and <b>stop here</b>	
13	First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)	_
40	First Freeze If the Ferra 000 is few the experiention's first exceed third female and fifth to make a continue 501(a)(0)	

	organization, oneok this box and <b>stop herc</b>		
Se	ction C. Computation of Public Support Percentage		
14	Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	61.77 %
15	Public support percentage from 2021 Schedule A, Part II, line 14	15	61.73 %
16a	33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or n	nore, o	check this box and
	stop here. The organization qualifies as a publicly supported organization		X
k	33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3%	or m	ore, check this box
	and stop here. The organization qualifies as a publicly supported organization		
17a	10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, a	and lir	ne 14 is 10% or more,
	and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part	VI hov	v the organization
	meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		
k	10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or	17a, a	nd line 15 is 10% or
	more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in	n Part	VI how the
	organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organ	izatio	ı
18	<b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box a	nd se	e instructions

Schedule A (Form 990) 2022

activities, whether or not the business is regularly carried on ...

10 Other income. Do not include gain or loss from the sale of capital

# 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.)

Se	ction A. Public Support	, <b>,</b>	,				
Cale	endar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(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						
ŀ	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
(	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support			•	•	•	•
Cale	endar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	. ,		` '		, ,	
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources						
ŀ	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included 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			1			
13	assets (Explain in Part VI.)						
	First 5 years. If the Form 990 is for the	ne organization's f	irst, second, third.	fourth, or fifth tax	vear as a section	501(c)(3) organizat	ion.
-	check this box and stop here	•		,			,
Se	ction C. Computation of Publ						
	Public support percentage for 2022 (			column (f))		15	%
	Public support percentage from 2021					16	%
	ction D. Computation of Inve						
	Investment income percentage for 20					17	%
	Investment income percentage from					18	%
	a 33 1/3% support tests - 2022. If the						
	more than 33 1/3%, check this box a						
ŀ	33 1/3% support tests - 2021. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation If the organization						

232023 12-09-22

# Part IV | Supporting Organizations

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

### Section A. All Supporting Organizations

- 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")? *If* "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?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 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 disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 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.)

-		Yes	No
	4		
	1		
	2		
	За		
	3b		
	3с		
	4a		
	4b		
	4-		
	4c		
	5a		
	5b 5c		
	30		
	6		
	7		
	8		
	9a		
	Ju		
	9b		
	9с		
	10a		
	- 3-		
	10b		
ule	A (Forr	n 990)	2022

	4 IV/		1,15	<u> </u>	age 3
Pai	t IV	Supporting Organizations (continued)		I	<del></del>
		·		Yes	No
11		ne organization accepted a gift or contribution from any of the following persons?			
а		son who directly or indirectly controls, either alone or together with persons described on lines 11b and			
		elow, the governing body of a supported organization?	11a		
		ly member of a person described on line 11a above?	11b		
С		controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
2		in Part VI.	11c		
sec	tion E	B. Type I Supporting Organizations			
		,		Yes	No
1		e governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
		supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, ors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)			
		vely operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organi	zation, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	suppo	rted organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the	e organization operate for the benefit of any supported organization other than the supported			
	organi	zation(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part V	I how providing such benefit carried out the purposes of the supported organization(s) that operated,			
		rised, or controlled the supporting organization.	2		
Sec	tion C	C. Type II Supporting Organizations			
		·		Yes	No
1	Were a	a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trus	tees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or mar	nagement of the supporting organization was vested in the same persons that controlled or managed			
		pported organization(s).	1		
Sec	tion D	D. All Type III Supporting Organizations			
				Yes	No
1	Did the	e organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organi	zation'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			
	organi	zation's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were a	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organi	zation(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the org	ganization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By rea	son of the relationship described on line 2, above, did the organization's supported organizations have a			
	signific	cant voice in the organization's investment policies and in directing the use of the organization's			
	incom	e or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
		rted organizations played in this regard.	3		
Sec	tion E	. Type III Functionally Integrated Supporting Organizations			
1	Check	the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).			
а	Ш.	The organization satisfied the Activities Test. Complete line 2 below.			
b	Ш.	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С		The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	structio	ns).	
2	Activit	ies Test. <b>Answer lines 2a and 2b below.</b>		Yes	No
а	Did su	bstantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the su	pported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those	supported organizations and explain how these activities directly furthered their exempt purposes,			
	how th	ne organization was responsive to those supported organizations, and how the organization determined			
	that th	ese activities constituted substantially all of its activities.	2a		
b	Did the	e 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 V	I the reasons for the organization's position that its supported organization(s) would have engaged in			
	these a	activities but for the organization's involvement.	2b		
3	Parent	t of Supported Organizations. <b>Answer lines 3a and 3b below.</b>			
а	Did the	e organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustee	es of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the	e organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its s	supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

232025 12-09-22

Schedule A (Form 990) 2022

16-1347453 Page 6

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organ	nizations			
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.					
	All other Type III non-functionally integrated supporting organizations mu	st complete	Sections A through E.			
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).	6				
7	Check here if the current year is the organization's first as a non-function	ally integrate	ed Type III supporting org	anization (see		
	instructions).					

Schedule A (Form 990) 2022

Pai	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)							
Sect	ion D - Distributions		•		Current Year			
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		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 organizatior	าร	3				
4	Amounts paid to acquire exempt-use assets			4				
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5				
6	Other distributions (describe in Part VI). See instructions.			6				
_7_	<b>Total annual distributions.</b> Add lines 1 through 6.			7				
8	Distributions to attentive supported organizations to which the	he organization is responsive	е					
	(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		ı	10				
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	าร	(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							
а	From 2017							
b	From 2018							
С	From 2019							
d	From 2020							
е	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							
С	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.							

Schedule A (Form 990) 2022

8 Breakdown of line 7:
 a Excess from 2018
 b Excess from 2019
 c Excess from 2020
 d Excess from 2021
 e Excess from 2022

Friends and Foundation of the Rochester 16-1347453 Page 8 Public Library Schedule A (Form 990) 2022 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) Schedule A, Part II, Line 10, Explanation for Other Income: Other Program Service Income

232028 12-09-22	Schedule A (Form 990) 2022

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

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Inspection

Name of the organization

Friends and Foundation of the Rochester Public Library

**Employer identification number** 16-1347453

Pai	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.						
	organization answered Tes Official 330, Faithy, iii	(a) Donor advised funds	(b) Funds and other accounts				
1	Total number at end of year	,					
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor adv	ised funds				
	are the organization's property, subject to the organization's	_					
6	Did the organization inform all grantees, donors, and donor a						
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or for any other purpos	e conferring				
	impermissible private benefit?		Yes No				
Pai			, Part IV, line 7.				
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply).					
	Preservation of land for public use (for example, recrea	tion or education) Preservation of	of a historically important land area				
	Protection of natural habitat	Preservation of	of a certified historic structure				
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the forn					
	day of the tax year.		Held at the End of the Tax Year				
	Total number of conservation easements						
	Number of conservation easements on a certified historic str		2c				
a	Number of conservation easements included in (c) acquired a	- · · · · · · · · · · · · · · · · · · ·					
_	historic structure listed in the National Register						
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by tr	ne organization during the tax				
4	year Number of states where property subject to conservation ea	coment is located					
5	Does the organization have a written policy regarding the per		<b>f</b>				
J	violations, and enforcement of the conservation easements if						
6	Staff and volunteer hours devoted to monitoring, inspecting,						
_	g,		<b>,</b>				
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserv	ration easements during the year				
			-				
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 17	O(h)(4)(B)(i)				
	and section 170(h)(4)(B)(ii)?		Yes No				
9	In Part XIII, describe how the organization reports conservati	on easements in its revenue and expens	se statement and				
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial stater	ments that describes the				
	organization's accounting for conservation easements.						
Pai	t III Organizations Maintaining Collections o	-	Other Similar Assets.				
	Complete if the organization answered "Yes" on Form						
1a	If the organization elected, as permitted under FASB ASC 95	'					
	of art, historical treasures, or other similar assets held for pub	·	•				
	service, provide in Part XIII the text of the footnote to its finar						
b	If the organization elected, as permitted under FASB ASC 95						
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in fur	therance of public service,				
	provide the following amounts relating to these items:		Φ.				
	(i) Revenue included on Form 990, Part VIII, line 1		· · · · · · · · · · · · · · · · · · ·				
•	(ii) Assets included in Form 990, Part X						
2	If the organization received or held works of art, historical tre		ıaı gaırı, provide				
_	the following amounts required to be reported under FASB A		<b>¢</b>				
	Revenue included on Form 990, Part VIII, line 1  Assets included in Form 990, Part X						
	For Paperwork Reduction Act Notice, see the Instructions		Schedule D (Form 990) 2022				

232051 09-01-22

Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or Oth	er Simil	ar Asse	<b>ts</b> (contir	nued)	<u>.gc                                    </u>
3	Using the organization's acquisition, accession	on, and other records	s, check any of the	following that make	significant	use of its			
	collection items (check all that apply):								
а	Public exhibition	d	Loan or exc	hange program					
b	Scholarly research	е	Other						
С	c Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	how they further t	he organization's ex	empt purpo	se in Par	t XIII.		
5	During the year, did the organization solicit or								
	to be sold to raise funds rather than to be ma						Yes		No
Par	t IV Escrow and Custodial Arrang						line 9, or		
	reported an amount on Form 990, Par	t X, line 21.							
1a	Is the organization an agent, trustee, custodia	an or other intermedi	ary for contribution	s or other assets no	t included				
	on Form 990, Part X?						Yes		No
b	If "Yes," explain the arrangement in Part XIII a	and complete the foll	owing table:						
An						Amoun	t		
С	Beginning balance				1c				
	Additions during the year								
	Distributions during the year								
f	Ending balance								
2a	Did the organization include an amount on Fo						Yes		No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the exp	olanation has been	provided on Part XI	II				]
Par	t V Endowment Funds. Complete if	the organization ans	swered "Yes" on Fo	orm 990, Part IV, line	10.				
	·	(a) Current year	(b) Prior year	(c) Two years back	(d) Three y	ears back	(e) Four	years	back
1a	Beginning of year balance	21,941,691.	12,582,829.	9,941,817.	10,2	83,123.	1	,961,	347.
	Contributions	2,297,592.	13,122,028.	223,898.		46,605.	8	,304,	443.
	Net investment earnings, gains, and losses	2,282,619.	-3,008,977.			43,860.		644,	238.
	Grants or scholarships					-			
	Other expenditures for facilities								
	and programs	770,518.	660,523.	452,392.	414,919.			541,	937.
f	Administrative expenses	84,020.	93,666.	43,559.		16,852.		84,	968.
g	End of year balance	25,667,364.	21,941,691.	-		41,817.	10	,283,	123.
2	Provide the estimated percentage of the curr								
	Board designated or quasi-endowment	35.2900	%	-,,,					
b	Permanent endowment 64.7100	%							
С		<u></u> '							
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.							
За	Are there endowment funds not in the posses		tion that are held a	nd administered for	the				
	organization by:	3					[	Yes	No
	(i) Unrelated organizations						3a(i)	$\neg$	X
	(ii) Related organizations							$\neg$	X
b	If "Yes" on line 3a(ii), are the related organization	tions listed as require	ed on Schedule R?				3b	$\neg$	
4	Describe in Part XIII the intended uses of the								
Par	t VI Land, Buildings, and Equipm								
	Complete if the organization answered		, Part IV, line 11a. S	See Form 990, Part X	(, line 10.				
	Description of property	(a) Cost or ot	her (b) Cost	or other (c) A	Accumulate	ed	(d) Boo	k valu	—— е
	2 ccompanent en property	basis (investm			epreciation	_	(4, 200		-
	Land	,	,	. ,					
	Buildings								
	Leasehold improvements								
	Equipment								
	Other								
	Add lines 1a through 1e (Column (d) must ed		( column (R) line 1	(Oc.)					0.

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022 Public Libi	rary	16	5-1347453 <sub>Page</sub> 3
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.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) US Bonds	6,944,502.	End-of-Year Market	. Value
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)	6,944,502.		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)  Part VIII   Investments - Program Related.	0,344,302.		
	on Form 000 Dort IV line	11a Saa Farm 000 Part V line 12	
Complete if the organization answered "Yes			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or er	id-or-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)	15\		
Total. (Column (b) must equal Form 990, Part X, col. (B) lin  Part X   Other Liabilities.	ne 15.)		
	F 000    D+    \/	44 446 O Favor 000 Back V line 0	.F
Complete if the organization answered "Yes	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 2	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			125 520
(2) Due to Rochester Public I	Library		137,738.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	ne 25.)		137,738.
	,		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the 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

	dule D (Form 990) 2022 Public Library  TXI Reconciliation of Revenue per Audited Financial Statement	ents Wi	th Revenue per F		1347453 Page <sup>.</sup> 1.
	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	5,252,368
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	1,799,523.		
b	Donated services and use of facilities		96,383.		
С	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)	1 1			
е	Add lines 2a through 2d			2e	1,895,906
3	Subtract line 2e from line 1			3	3,356,462
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 7b	.   4a	84,020.		
b	Other (Describe in Part XIII.)	4b			
	Add lines 4a and 4b			4c	84,020
5	Total revenue. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12.)			5	3,440,482
Pai	t XII Reconciliation of Expenses per Audited Financial Statem	nents W	ith Expenses per	Retu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a				
1	Total expenses and losses per audited financial statements			1	1,515,201
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	96,383.		
b	Prior year adjustments	2b			
С	Other losses				
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d			2e	96,383
3	Subtract line 2e from line 1			3	1,418,818
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a	84,020.		
b	Other (Describe in Part XIII.)	. 4b			
С	Add lines 4a and 4b			4c	84,020
_5_	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	1,502,838
Pai	t XIII Supplemental Information.				
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part	t 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 add	ditional inf	ormation.		
ъ.	TT 15 A				
Pai	ct V, line 4:				
The	e annual income generated from the investm	ent c	of these fur	nds	is required

The annual income generated from the investment of these funds is required to be used in specific ways by donors and, accordingly, is recorded as donor restricted or undesignated according to donor requirements.

# Part V, Line 1c - Four Years Back

The 2018 contributions total of \$8,304,443 included contributions of \$8,287,439 of investments that were established as board designated endowment in the prior year.

Schedule D (Form 990) 2022

### SCHEDULE I (Form 990)

# **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Department of the Treasury Internal Revenue Service Attach to Form 990. Go to www.irs.gov/Form990 for the latest information. Open to Public Inspection

OMB No. 1545-0047

Name of the organization Friends a Public Li		$\begin{array}{c} \text{Employer identification number} \\ 16-1347453 \end{array}$					
Part I General Information on Grants a	and Assistance						
Does the organization maintain records     criteria used to award the grants or assi     Describe in Part IV the organization's pr     Part II Grants and Other Assistance to	stance? ocedures for moni	itoring the use of grant	t funds in the Unite	d States.			X Yes No
recipient that received more than					anization answered	res on ronn 550, ran	Try, line 21, lot arry
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
Rochester Public Library In C/O the Organization Rochester, NY 14604	22-3160973	501(c)3	452,169.	469,342.	Cost	Various equipment and supplies	Support the organization's exempt purpose
·				,			
2 Enter total number of section 501(c)(3) a	and government o	rganizations listed in th	ne line 1 table		ı	1	1.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the informat	tion required in Part I, lin	e 2; Part III, columi	n (b); and any other a	dditional information.	
Part I, Line 2:					
Each year the Rochester Public	Library Boa	rd approve	es the dist	ribution of	
the annual campaign proceeds to	o the Librar	y, and the	e Friends a	nd Foundation	
of the Rochester Public Library	y. The orga	nization m	maintains d	ocumentation	
from the RPL board for these di	istributions				
The other monies that the organ	nization giv	es to the	Library co	me from	
income received through proposa	als for supp	ort of spe	ecific area	s at the	
Library or are unsolicited done					

Part IV   Supplemental Information
Regular communication between the two organizations ensure that funds are
spent in accordance with their intended purposes.

### SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

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.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Friends and Foundation of the Rochester Public Library

Employer identification number 16-1347453

Form 990, Part III, Line 1, Description of Organization Mission:

The Friends and Foundation of the Rochester Public Library is an

incorporated, not-for-profit public charity whose mission is to raise

funds and provide programming in support of the Central Library of

Rochester and Monroe County and the Rochester Public Library. The

Foundation's primary goals are to raise private and public funds to

help ensure the library's financial security, to enable the highest

level of library service to the community in the 21st century, and to

help build broad public support for the library's programs.

Form 990, Part III, Line 4a, Program Service Accomplishments:

Through ongoing communication, the Friends & Foundation of RPL seeks to

coordinate its efforts with other public libraries and library support

groups throughout Monroe County, and whenever possible acts as a source

of information and counsel for other Monroe County public libraries.

Form 990, Part VI, Section B, line 11b:

A draft copy of the return was sent to all members of the board for comments before filing.

Form 990, Part VI, Section B, Line 12c:

All members are expected to disclose any conflict of interest that arises in the course of the year.

Form 990, Part VI, Section B, Line 15a:

The board discusses the compensation of the Executive Director annually.

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

Schedule O (Form 990) 2022

232211 10-28-22