** PUBLIC DISCLOSURE COPY **

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047 Open to Public

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Inspection

A F	or the	e 2009 calen	dar year, or tax year beginning JUL 1, 2009 and ending	JUN 30, 2010	
	Check if applicabl		Name of organization	D Employer identifi	cation number
	Addre chang		HE LIBRARY FOUNDATION OF LOS ANGELES		
	Name chang	e type.	Doing Business As	95-4	368250
	Initial return Termir ated	1- Specific Instruc- 6	Number and street (or P.O. box if mail is not delivered to street address) Room/su 30 W. FIFTH STREET		228-7500
	Ameno return Applic		City or town, state or country, and ZIP + 4	G Gross receipts \$	28,846,365.
	tion pendir		OS ANGELES, CA 90071	H(a) Is this a group r	eturn
			and address of principal officer: KEN BRECHER AS C ABOVE	for affiliates? H(b) Are all affiliates inc	Yes X No
$\overline{1}$	Гах-ех		X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527	─ ` '	list. (see instructions)
			· LFLA · ORG	H(c) Group exemption	· · · · · · · · · · · · · · · · · · ·
					M State of legal domicile: CA
	art I		·		···
_			ibe the organization's mission or most significant activities: TO SUPPO	RT THE LOS AN	GELES
Governance			LIBRARY.		
rne	2	Check this b	ox if the organization discontinued its operations or disposed of m	ore than 25% of its net a	ssets.
OVE.	3	Number of v	oting members of the governing body (Part VI, line 1a)	3	42
<u>ھ</u>			ndependent voting members of the governing body (Part VI, line 1b)		41
es	5	Total numbe	r of employees (Part V, line 2a)	5	22
Activities			er of volunteers (estimate if necessary)		49
Act	7a	Total gross ι	unrelated business revenue from Part VIII, column (C), line 12	7 <u>a</u>	0.
_	b	Net unrelate	d business taxable income from Form 990-T, line 34		0.
				Prior Year	Current Year
ne			s and grants (Part VIII, line 1h)	3,999,422.	4,543,636.
Revenue			vice revenue (Part VIII, line 2g)	1 710 401	400 150
Be			ncome (Part VIII, column (A), lines 3, 4, and 7d)	-1,719,401. 1,119.	
	1		ue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,281,140.	
			e - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,201,140.	4,940,033.
			similar amounts paid (Part IX, column (A), lines 1-3) d to or for members (Part IX, column (A), line 4)		
"			er compensation, employee benefits (Part IX, column (A), lines 5-10)	2,389,976.	1,622,251.
Expenses			fundraising fees (Part IX, column (A), line 11e)		2,022,2321
per	h	Total fundrai	ising expenses (Part IX, column (D), line 25) 481,399.		
Щ	17	Other expen	ses (Part IX, column (A), lines 11a-11d, 11f-24f)	2,045,313.	1,935,535.
	1		ses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,435,289.	
	19		s expenses. Subtract line 18 from line 12	-2,154,149.	1,388,867.
Net Assets or Fund Balances				Beginning of Current Year	End of Year
sets	20	Total assets	(Part X, line 16)	23,390,520.	26,945,323.
t As	21	Total liabilitie	es (Part X, line 26)	201,045.	147,891.
캺	22		r fund balances. Subtract line 21 from line 20	23,189,475.	26,797,432.
Pa	art II	Signatu			
		and complete.	s of perjury, I declare that I have examined this return, including accompanying schedules and statemen Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	nts, and to the best of my knowled dge.	ige and belief, it is true, correct,
				1	
Sig		Signatu	ire of officer	I Date	
Her	е	l	BRECHER, PRESIDENT	24.0	
			r print name and title		
		Preparer's	Date		er's identifying number
Paid		signature		self- employed ▶ ☐ (see in	structions) -
	parer's	Firm's name (or	WINDES & MCCLAUGHRY ACCT. CORP.	EIN ►	
Use	Only	yours if self-employed),	\ 		
		address, and ZIP + 4	LONG BEACH, CA. 90801-0087	Phone no. ► (562)435-1191
May	/ the If		nis return with the preparer shown above? (see instructions)	1 ,	X Yes No

THE LIBRARY FOUNDATION OF LOS ANGELES 95-4368250 Form 990 (2009) Page 2 Part III Statement of Program Service Accomplishments Briefly describe the organization's mission: PROVIDES CRITICAL SUPPORT TO THE LOS ANGELES PUBLIC LIBRARY RESULTING IN FREE PROGRAMS, RESOURCES AND SERVICES AVAILABLE TO THOUSAND OF CHILDREN AND YOUTH IN LOS ANGELES. Did the organization undertake any significant program services during the year which were not listed on Yes X No the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. Yes X No Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 911,275. including grants of \$ (Code:) (Expenses \$) (Revenue \$ CHILDREN AND TEEN PROGRAMS--PROGRAMS TO INSPIRE A LIVELONG LOVE OF READING THROUGH SUMMER READING CLUBS AND LITERACY PROGRAMS THROUGHOUT FAMILY OUTREACH ACTIVITIES ICLUDE STORYTELLING, THE YEAR. ARTS AND CRAFTS, MUSIC, PUPPETS, AUTHOR TALKS, ALL DESIGNED TO HELP CHILDREN DISCOVER BOOKS THAT SPEAK TO THEIR INTERESTS AND MOTIVATE THEM TO VALUE READING. STUDENT SMART PROGRAM IN COLLABORATION WITH PRINCETON REVIEW, TO HELP MIDDLE AND HIGH SCHOOL STUDENTS DESIGNED PREPARE FOR COLLEGE FEATURES FREE SEMINARS AND COLLEGE ENTRANCE TEST TAKING PRACTICE LIVE HOMEWORK HELP PROVIDES FREE ONLINE TUTORS FOR K-12 SESSIONS. STUDENTS 7 DAYS A WEEK FROM 3 TO 10 P.M. FOR MATH. HISTORY. ARTS AND SOCIAL SCIENCES AMONG OTHER SUBJECTS. 509,628. including grants of \$ 4b (Code:) (Expenses \$) (Revenue \$ TECHNOLOGY AND LIBRARY IMPROVEMENTS- EXPANSION AND ENHANCEMENT OF ELECTRONIC INFORMATION RESOURCES AND THE TECHNOLOGIES THAT ENABLE THEM. PROVIDED WIRELESS SERVICES, INCREASED WEB SERVICES AND INFORMATION-RICH SUBSCRIPTION DATABASES. DIGITIZATION AND CATALOGING OF IMPORTANT LIBRARY COLLECTIONS. MORE THAN 2300 COMPUTERS PROVIDE PATRONS WITH FREE AND EQUAL ACCESS TO INFORMATION, OUR "LIBRARY WITHOUT WALLS." KEEP THE LIBRARY UPDATED, REPLACE OLD FURNITURE AND FIXTURES AND KEEP THE LIBRARY IN A CONDITION THAT IS SAFE AND ENJOYABLE FOR THE COMMUNITY. 422,807. including grants of \$ (Code:) (Expenses \$) (Revenue \$ - AWARD WINNING SERIES OF TALKS AND READINGS BY CULTURAL PROGRAMS POETS, AND JOURNALISTS, PANEL EMERGING AND ESTABLISHED AUTHORS, DISCUSSIONS, DANCE AND MUSIC PERFORMANCES, INTERVIEWS, DOCUMENTARY FILM INSPIRE NEW IDEAS. SCREENPLAYS ALL INTENDED TO PROVIDE FURTHER INQUIRY, AND ENCOURAGE DIALOGUE. APPROXIMATELY 90 PROGRAMS PER YEAR, FROM TRADITIONAL TO CUTTING EDGE, WITH TOPICS FAR REACHING AND CLOSE TO HOME, ADVANCE THE LIBRARY'S MISSION TO SUPPORT LIFELONG LEARNING AND PROVIDE A WEALTH OF IDEAS AND INFORMATION.

4d Other program services. (Describe in Schedule O.)

(Expenses \$ 741,016 • including grants of \$

) (Revenue \$

e Total program service expenses ►\$

2,584,726.

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?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	N/	A
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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; 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 term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10	Х	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	Х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI.			
•	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.			
•	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.			
•	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.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
•	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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII.	12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional X			37
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	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,			v
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			v
40	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	40		v
47	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	17		Х
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		-22
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	10	х	
10	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18	-23	
19		19		х
20	complete Schedule G, Part III Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
20	Did the diganization operate one of more hospitals: " 100, complete conclude H	20	I	

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
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 25	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) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			37
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			Х
00	Schedule L, Part III	27		Λ
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
•	instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was	200		
•	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	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		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			37
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		Х
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 in Schedule O for Part VI, lines 11 and 19?		,	
	Note. All Form 990 filers are required to complete Schedule O.	38	X	

Page 5

Part V Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable 1a 66			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
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 22			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	За		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country: ►			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts.			
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, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	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	_	v	
	provided to the payor?	7a	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		Х
	to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year 7d	7c		Λ
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	7.		Х
	benefit contract?	7e 7f		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>1</u>		-22
9 5	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7 <u>9</u> 7h		
Ω''	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the	/!!		
Ü	supporting organizations maintaining donor advised funds and section 309(a)(3) supporting organizations. Did the			
	N/A	8		
9	at any time during the year? Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966? N/A	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Section 501(c)(7) organizations. Enter:	55		
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders N/A 11a			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
-	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

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

Sec	tion A. Governing Body and Management						
						Yes	No
1a	Enter the number of voting members of the governing body	1a		42			
b	Enter the number of voting members that are independent			41			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi						
	officer, director, trustee, or key employee?				2		X
3	Did the organization delegate control over management duties customarily performed by or under the						
	of officers, directors or trustees, or key employees to a management company or other person?				3		X
4	Did the organization make any significant changes to its organizational documents since the prior Fo				4		X
5	Did the organization become aware during the year of a material diversion of the organization's asser				5		X
6	Does the organization have members or stockholders?				6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more me						3,7
	governing body?				7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other per				7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken	durin	g the year				
	by the following:					37	
а	The governing body?				8a	X	
b	Each committee with authority to act on behalf of the governing body?				8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real				_		.
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	Revenu	ie Code.)				Г
				Г		Yes	No
	Does the organization have local chapters, branches, or affiliates?				10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such	-					
				-	10b	v	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before f	iling th	ne form?		11	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					v	
12a	1 7				12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that cout to conflicts?	-			12b	х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If in Schedule O how this is done				12c	х	
13	Does the organization have a written whistleblower policy?				13	X	
14	Does the organization have a written document retention and destruction policy?				14	X	
15	Did the process for determining compensation of the following persons include a review and approve						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	-	пасрепасті				
а	The organization's CEO, Executive Director, or top management official				15a	Х	
h	Other officers or key employees of the organization				15b	X	
~	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment	with a				
	taxable entity during the year?				16a		Х
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva			,			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org						
	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 ▶CA						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-7	T (501	(c)(3)s only) ava	ailable 1	for		
	public inspection. Indicate how you make these available. Check all that apply.	•					
	X Own website Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	conflic	t of interest pol	icy, an	d fina	ncial	
	statements available to the public.		•				
20	State the name, physical address, and telephone number of the person who possesses the books a	ınd red	cords of the org	janizat	ion: 🕨	• .	
	SUE VERBRUGGHEN - (213)228-7500						
	630 W. FIFTH STREET, LOS ANGELES, CA 90071						

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

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. Use Schedule J-2 if additional space is needed.
- 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. See instructions for definition of "key employee."

Check this box if the organization did not compensate any current officer, director, or trustee.

- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B)			-	C)	,		(D)	(E)	(F)
Name and Title	Average hours	(0)		Pos		app	.1. ()	Reportable compensation	Reportable compensation	Estimated amount of
	per	⊢`	ICC		liiai	арр	''y <i>)</i>	from	from related	other
	week	directo				P		the	organizations	compensation
		tee or	ıstee			ensate		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
		al frus	nal tru		loyee	comp(e		(44-2/1099-141130)		and related
		ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
JEFFREY P. BROWN		_				- 0	_			
CHAIRMAN	3.00	Х		Х				0.	0.	0.
CARLA J. CHRISTOFFERSON										
VICE CHAIR	3.00	Х		Х				0.	0.	0.
MARK R. HUTCHINS										
TREASURER	3.00	Х		Х				0.	0.	0.
DONNA WOLFF										
SECRETARY	3.00	Х		Х				0.	0.	0.
JOHN F. COOKE	20.00	х		х				0.	0.	0
PRES(TIL 12/09)/DIRECTOR DEBRA ALBIN-RILEY	20.00	Λ		Λ				0.	0.	0.
DIRECTOR	1.00	Х						0.	0.	0.
CARL T. ANDERSON	1.00							0.	•	
DIRECTOR	3.00	х						0.	0.	0.
BETSEY APPLEBAUM									<u> </u>	
DIRECTOR	1.00	Х						0.	0.	0.
RHODA BRAUER										
DIRECTOR	1.00	Х						0.	0.	0.
CRAIG BURGER										
DIRECTOR	1.00	Х						0.	0.	0.
SAMUEL W. CARGILL	4 00									•
DIRECTOR	1.00	Х						0.	0.	0.
ROBERT A. CHICK DIRECTOR	1 00	х						0.	0.	0
JAMES P. CLARK	1.00	Λ						0.	0.	0.
DIRECTOR	3.00	х						0.	0.	0.
LOUIS C. CULLMAN, ESQ.	3.00	77						0.	0.	
DIRECTOR	1.00	х						0.	0.	0.
RICHARD J. DAVIS										
DIRECTOR	1.00	Х						0.	0.	0.
PATRICIA DESMARAIS										
DIRECTOR	1.00	Х						0.	0.	0.
PHILIP FLYNN										
DIRECTOR	1.00	Х						0.	0.	0.

932007 02-04-10

Part VII Section A. Officers, Directors, Tr	ustees, Key E	mple	oyee	s, a	nd l	High	est	Compensated Employ	ees (continued)			
(A)	(B)				C)			(D)	(F)			
Name and title	Average			Pos				Reportable	Reportable	Es	timate) d
	hours	(c	heck	call.	that	app	oly)	compensation	compensation		nount	of
	per week	sctor						from the	from related organizations		other pensa	ition
	Week	or dire	a)			ited		organization	(W-2/1099-MISC)		om the	
		stee	truste		يو	bens		(W-2/1099-MISC)	(** = * * * * * * * * * * * * * * * * *		anizati	
		ual fri	ional		ploye	t com	١. ا				d relate	
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			orga	anizatio	ons
VICTORIA E. FOOTE												
DIRECTOR	1.00	X						0.	0.			0.
JAN FRANKLIN												
DIRECTOR	1.00	X						0.	0.			0.
STEVE J. GHYSELS												
DIRECTOR	1.00	Х						0.	0.			0.
DEAN HANSELL												
DIRECTOR	1.00	Х						0.	0.			0.
NANCY HARAHAN												
DIRECTOR	1.00	Х						0.	0.			0.
MICHAEL C. HART												
DIRECTOR	1.00	Х						0.	0.			0.
MICHAEL T.M. JONES								_	_			_
DIRECTOR	1.00	Х						0.	0.			0.
BRIAN KAUFMAN								_	_			_
DIRECTOR	3.00	Х						0.	0.			0.
ANDREW W. KNOX		l										_
DIRECTOR	3.00	X						0.	0.			0.
JOYCE KRESA	1	l										_
DIRECTOR	1.00	Х						0.	0.			0.
1b Total						<u> </u>		244,525.	0.			0.
2 Total number of individuals (including but	not limited to th	nose	liste	ed a	bove	e) wl	ho re	eceived more than \$100	0,000 in reportable			2
compensation from the organization											Yes	No
0 5:11											res	NO
3 Did the organization list any former officer				-				•	•		Х	
line 1a? If "Yes," complete Schedule J for										3	Λ	
4 For any individual listed on line 1a, is the s	um of reportab	ie co	omp	ensa	atior	n and	a otr	ner compensation from	tne organization			

the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to

the organization.		
(A)	(B)	(C)
Name and business address	Description of services	Compensation
OASIS TECHNOLOGY	COMPUTER AIDES /	
601 DAILY DR. #226, CAMARILLO, CA 93010	ADULT LIT. TUTORS	330,393.
CARLCORP		
PO BOX 734, INWOOD, WV 25428	INFORMATION TECH.	125,129.
TUTOR.COM	LIVE HOMEWORK HELP /	
PO BOX 200599, PITTSBURGH, PA 15251	ONLINE TUTORS	125,000.

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Form **990** (2009)

X

Х

932009 02-04-10

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp	lete column (A) but are			(D).
	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 governments and		·		
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	235,238.	129,381.	35,285.	70,572.
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	1,375,244.	869,271.	159,221.	346,752.
8	Pension plan contributions (include section 401(k)				<u></u> .
	and section 403(b) employer contributions)	11,769.	6,473.	1,765.	3,531.
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting	33,574.		33,574.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	57,068.		57,068.	
g	Other	54,699.		54,699.	
12	Advertising and promotion	201,523.	189,517.	12,006.	
13	Office expenses	49,527.	48,244.	1,283.	
14	Information technology	306,401.	282,873.	23,528.	
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	00.01=		00.015	
22	Depreciation, depletion, and amortization	22,845.		22,845.	
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	LIBRARY COLLECTIONS	571,557.	571,557.		
h	PROGRAMS FOR PUBLIC	411,833.	404,884.	6,949.	
c	OFFICE OPERATIONS	83,438.	,	83,438.	
d	EVENTS/EXHIBITIONS	82,526.	82,526.	,	
e	OTHER FUNDRAISING	60,544.			60,544.
f	All other expenses	· ·			<u> </u>
25	Total functional expenses. Add lines 1 through 24f	3,557,786.	2,584,726.	491,661.	481,399.
26	Joint costs. Check here if following	-	-	-	<u> </u>
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
					Carres 000 (0000)

Pa	rt X	Balance Sheet					
		•			(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing			1,204,686.	1	102,930.
	2	Savings and temporary cash investments			3,632,161.	2	4,200,050.
	3	Pledges and grants receivable, net			2,011,757.	3	1,572,337.
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, di					
	-	employees, and highest compensated employee		· · ·			
		of Schedule L				5	
	6	Receivables from other disqualified persons (as					
		4958(f)(1)) and persons described in section 495					
		Part II of Schedule L				6	
Ś	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			78,866.	8	76,324.
Ä	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	340,694.			
	b		10b	285,583.	80,376.	10c	55,111.
	11	Investments - publicly traded securities			16,043,308.	11	20,564,357.
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	339,366.	15	374,214.		
	16	Total assets. Add lines 1 through 15 (must equ			23,390,520.	16	26,945,323.
	17	Accounts payable and accrued expenses			138,808.	17	93,423.
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
S	21	Escrow or custodial account liability. Complete				21	
Liabilities	22	Payables to current and former officers, director	s, truste	ees, key employees,			
<u>a</u>		highest compensated employees, and disqualifi	ed pers	ons. Complete Part II			
		of Schedule L				22	
	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelate	d third p	arties		24	
	25	Other liabilities. Complete Part X of Schedule D			62,237.	25	54,468.
	26	Total liabilities. Add lines 17 through 25			201,045.	26	147,891.
		Organizations that follow SFAS 117, check he	ere 🕨	X and complete			
es		lines 27 through 29, and lines 33 and 34.					
anc	27	Unrestricted net assets			9,132,758.	27	11,038,209.
Fund Balances	28	Temporarily restricted net assets			4,712,054.	28	5,372,922.
pu	29				9,344,663.	29	10,386,301.
교		Organizations that do not follow SFAS 117, c	heck he	re ▶ and			
ō		complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
Ass	31	Paid-in or capital surplus, or land, building, or ed		To the state of th		31	
Net Assets or	32	Retained earnings, endowment, accumulated in		02 102 175	32	06 808 433	
2	33	Total net assets or fund balances			23,189,475.	33	26,797,432.
	34	Total liabilities and net assets/fund balances			23,390,520.	34	26,945,323.

Pa	rt XI Financial Statements and Reporting			
			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 in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
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	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
	consolidated basis, separate basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		
		Eorm	990 (2000)

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

95-4368250

Name of the organization

Employer identification number THE LIBRARY FOUNDATION OF LOS ANGELES

Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	te this par	t.) See inst	tructions.				
he orgar	nization is not a	a private foundation	because it is: (For lines 1	through ⁻	11, check	only one b	oox.)					
1			s, or association of churc									
2	A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach Sci	hedule E.)								
3			tal service organization of		in section	170(b)(1)	(A)(iii).					
4	•	•	operated in conjunction					(b)(1)(A)(ii	i). Enter th	e hospita	al's nan	ne,
	city, and stat								•	•		
5	An organizati	on operated for the	benefit of a college or ur	niversity ov	wned or op	perated by	a governi	mental uni	t describe	d in		
		(b)(1)(A)(iv). (Comple										
6	A federal, sta	ite, or local governm	ent or governmental unit	described	d in sectio	n 170(b)(1)(A)(v).					
7 X			eives a substantial part					r from the	general p	ublic des	cribed	in
		b)(1)(A)(vi). (Comple										
8			ection 170(b)(1)(A)(vi). (Complete	Part II.)							
9			eives: (1) more than 33 1			rom contri	butions, m	nembershi	p fees, and	d gross re	eceipts	from
			nctions - subject to certa									
	income and u	unrelated business to	axable income (less sect	ion 511 ta	x) from bu	sinesses a	acquired b	y the orga	nization at	fter June	30, 19	75.
		509(a)(2). (Complete										
10 🔲			perated exclusively to tes	st for publi	ic safety. S	See sectio	n 509(a)(4	l).				
11 🔲	An organizati	on organized and or	perated exclusively for th	ne benefit o	of, to perfo	orm the fu	nctions of,	or to carr	y out the p	urposes	of one	or
	more publicly	supported organiza	ations described in section	on 509(a)(⁻	1) or section	on 509(a)(2	2). See sec	tion 509(a)(3). Ched	ck the bo	x that	
	describes the	e type of supporting	organization and comple	ete lines 1	1e through	11h.						
	a Type I	b	☐ Type II	: 🔲 Тур	e III - Func	tionally int	tegrated		d 🗀	Type III -	Other	
е 📖	By checking	this box, I certify tha	at the organization is not	controlled	directly o	r indirectly	by one o	r more disc	qualified p	ersons of	ther tha	an
	foundation m	anagers and other t	han and ar mara nublial					antion FOO	1/-1/41	ootion 50	0(0)(0)	
		3	riair one or more publicly	/ supporte	d organiza	ations des	cribea in s	ection 50s	$\theta(a)(1)$ or s	ection 50	9(a)(2).	
f	If the organiz	•	ten determination from t		ū				9(a)(1) or s	ection 50	19(a)(∠).	
f		•	ten determination from t	he IRS tha	at it is a Ty	pe I, Type	II, or Type	e III	9(a)(1) or s			. 🗆
f g	supporting of	ation received a writ	ten determination from t	he IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				. 🗆
	supporting of Since August	ation received a writ rganization, check th t 17, 2006, has the c	ten determination from t	he IRS tha	at it is a Ty	pe I, Type	II, or Type	e III owing pers	sons?		Yes	No No
	supporting of Since August (i) A perso	ation received a writ rganization, check th t 17, 2006, has the c n who directly or ind	ten determination from t nis box organization accepted an	he IRS that ny gift or co	at it is a Ty ontribution ether with	pe I, Type from any persons o	of the follower	e III owing pers in (ii) and (sons?		Yes	. 🗆
	supporting of Since August (i) A perso the gove	ation received a writ rganization, check th t 17, 2006, has the c n who directly or ind erning body of the su	ten determination from to his box organization accepted an irectly controls, either alo	he IRS than	at it is a Ty ontribution ether with	pe I, Type from any persons o	of the follo	e III owing pers in (ii) and (sons? iii) below,	11g(i)	Yes	. 🗆
	supporting of Since August (i) A perso the gove (ii) A family	ation received a writ rganization, check th t 17, 2006, has the con m who directly or ind erning body of the so member of a persor	ten determination from the control of the control o	he IRS that ny gift or co	ontribution	pe I, Type i from any persons o	of the folk	e III owing pers in (ii) and (sons? iii) below,	11g(i)	Yes	. 🗆
	supporting of Since August (i) A perso the gove (ii) A family (iii) A 35% of	ation received a writ rganization, check th t 17, 2006, has the con who directly or ind erning body of the su member of a persor controlled entity of a	ten determination from the control of the control o	ny gift or co	ontribution ether with	pe I, Type i from any persons o	of the folk	e III owing pers in (ii) and (sons? iii) below,	11g(i)	Yes	. 🗆
g	supporting of Since August (i) A perso the gove (ii) A family (iii) A 35% of	ation received a writ rganization, check th t 17, 2006, has the con who directly or ind erning body of the su member of a persor controlled entity of a	ten determination from this box organization accepted an irectly controls, either alsupported organization? In described in (i) above? I person described in (i) about the supported organization.	ny gift or co	ontribution ether with	pe I, Type i from any persons o	of the folk	e III Dwing pers in (ii) and (sons? iii) below,	11g(i)	Yes	. 🗆
g h	supporting of Since August (i) A perso the gove (ii) A family (iii) A 35% of	ation received a writ rganization, check th t 17, 2006, has the con who directly or ind erning body of the su member of a persor controlled entity of a	ten determination from this box organization accepted an irectly controls, either alcupported organization? In described in (i) above? person described in (i) about the supported organization (iii) Type of	ny gift or coone or tog or (ii) above ganization	ontribution ether with e? (s).	pe I, Type in from any persons of	of the followers of the	e III Dowing persion (ii) and (sons? iii) below,	11g(i) 11g(iii	Yes	No
g h (i) Name	supporting of Since August (i) A perso the gove (ii) A family (iii) A 35% of Provide the formal supporting the supporting of the supportin	ation received a writ rganization, check th t 17, 2006, has the con member of the sum member of a persor controlled entity of a collowing information	ten determination from this box organization accepted an irectly controls, either alcupported organization? In described in (i) above? person described in (i) about the supported organization (iii) Type of organization	ny gift or co one or tog or (ii) above ganization((iv) Is the o in col. (i) lis	et it is a Ty contribution ether with e? (s). erganization sted in your	pe I, Type from any persons c (v) Did you organizat	of the followers of the	e III Dowing person (ii) and ((vi) Is organizatic (ii) organizatic (ii) organizatic	the on in col. ed in the	11g(i) 11g(ii) 11g(iii	Yes)	No
g h (i) Name	supporting of Since August (i) A perso the gove (ii) A family (iii) A 35% of Provide the forest of supported	ation received a writ rganization, check th t 17, 2006, has the con member of the sum member of a persor controlled entity of a collowing information	ten determination from this box organization accepted an irectly controls, either alcupported organization? In described in (i) above? person described in (i) cabout the supported organization (described on lines 1-9 above or IRC section	ny gift or coone or tog or (ii) above ganization((iv) Is the of the col. (i) lis governing of	erganization sted in your document?	pe I, Type from any persons c (v) Did you organizat (i) of you	of the followers of the	(vi) Is organizatic (i) organizatic U.S	the on in col. ed in the ?	11g(i) 11g(ii) 11g(iii	Yes)) mount (No
g h (i) Name	supporting of Since August (i) A perso the gove (ii) A family (iii) A 35% of Provide the forest of supported	ation received a writ rganization, check th t 17, 2006, has the con member of the sum member of a persor controlled entity of a collowing information	ten determination from this box organization accepted an irectly controls, either alsupported organization? In described in (i) above? person described in (i) about the supported organization (iii) Type of organization (described on lines 1-9	ny gift or co one or tog or (ii) above ganization((iv) Is the o in col. (i) lis	et it is a Ty contribution ether with e? (s). erganization sted in your	pe I, Type from any persons c (v) Did you organizat	of the followers of the	e III Dowing person (ii) and ((vi) Is organizatic (ii) organizatic (ii) organizatic	the on in col. ed in the	11g(i) 11g(ii) 11g(iii	Yes)) mount (No
g h (i) Name	supporting of Since August (i) A perso the gove (ii) A family (iii) A 35% of Provide the forest of supported	ation received a writ rganization, check th t 17, 2006, has the con member of the sum member of a persor controlled entity of a collowing information	ten determination from this box organization accepted an irectly controls, either alcupported organization? In described in (i) above? person described in (i) cabout the supported organization (described on lines 1-9 above or IRC section	ny gift or coone or tog or (ii) above ganization((iv) Is the of the col. (i) lis governing of	erganization sted in your document?	pe I, Type from any persons c (v) Did you organizat (i) of you	of the followers of the	(vi) Is organizatic (i) organizatic U.S	the on in col. ed in the ?	11g(i) 11g(ii) 11g(iii	Yes)) mount (No
g h (i) Name	supporting of Since August (i) A perso the gove (ii) A family (iii) A 35% of Provide the forest of supported	ation received a writ rganization, check th t 17, 2006, has the con member of the sum member of a persor controlled entity of a collowing information	ten determination from this box organization accepted an irectly controls, either alcupported organization? In described in (i) above? person described in (i) cabout the supported organization (described on lines 1-9 above or IRC section	ny gift or coone or tog or (ii) above ganization((iv) Is the of the col. (i) lis governing of	erganization sted in your document?	pe I, Type from any persons c (v) Did you organizat (i) of you	of the followers of the	(vi) Is organizatic (i) organizatic U.S	the on in col. ed in the ?	11g(i) 11g(ii) 11g(iii	Yes)) mount (No
g h (i) Name	supporting of Since August (i) A perso the gove (ii) A family (iii) A 35% of Provide the forest of supported	ation received a writ rganization, check th t 17, 2006, has the con member of the sum member of a persor controlled entity of a collowing information	ten determination from this box organization accepted an irectly controls, either alcupported organization? In described in (i) above? person described in (i) cabout the supported organization (described on lines 1-9 above or IRC section	ny gift or coone or tog or (ii) above ganization((iv) Is the of the col. (i) lis governing of	erganization sted in your document?	pe I, Type from any persons c (v) Did you organizat (i) of you	of the followers of the	(vi) Is organizatic (i) organizatic U.S	the on in col. ed in the ?	11g(i) 11g(ii) 11g(iii	Yes)) mount (No
g h (i) Name	supporting of Since August (i) A perso the gove (ii) A family (iii) A 35% of Provide the forest of supported	ation received a writ rganization, check th t 17, 2006, has the con member of the sum member of a persor controlled entity of a collowing information	ten determination from this box organization accepted an irectly controls, either alcupported organization? In described in (i) above? person described in (i) cabout the supported organization (described on lines 1-9 above or IRC section	ny gift or coone or tog or (ii) above ganization((iv) Is the of the col. (i) lis governing of	erganization sted in your document?	pe I, Type from any persons c (v) Did you organizat (i) of you	of the followers of the	(vi) Is organizatic (i) organizatic U.S	the on in col. ed in the ?	11g(i) 11g(ii) 11g(iii	Yes)) mount (No
g h (i) Name	supporting of Since August (i) A perso the gove (ii) A family (iii) A 35% of Provide the forest of supported	ation received a writ rganization, check th t 17, 2006, has the con member of the sum member of a persor controlled entity of a collowing information	ten determination from this box organization accepted an irectly controls, either alcupported organization? In described in (i) above? person described in (i) cabout the supported organization (described on lines 1-9 above or IRC section	ny gift or coone or tog or (ii) above ganization((iv) Is the of the col. (i) lis governing of	erganization sted in your document?	pe I, Type from any persons c (v) Did you organizat (i) of you	of the followers of the	(vi) Is organizatic (i) organizatic U.S	the on in col. ed in the ?	11g(i) 11g(ii) 11g(iii	Yes)) mount (No
g h (i) Name	supporting of Since August (i) A perso the gove (ii) A family (iii) A 35% of Provide the forest of supported	ation received a writ rganization, check th t 17, 2006, has the con member of the sum member of a persor controlled entity of a collowing information	ten determination from this box organization accepted an irectly controls, either alcupported organization? In described in (i) above? person described in (i) cabout the supported organization (described on lines 1-9 above or IRC section	ny gift or coone or tog or (ii) above ganization((iv) Is the of the col. (i) lis governing of	erganization sted in your document?	pe I, Type from any persons c (v) Did you organizat (i) of you	of the followers of the	(vi) Is organizatic (i) organizatic U.S	the on in col. ed in the ?	11g(i) 11g(ii) 11g(iii	Yes)) mount (No
g h (i) Name	supporting of Since August (i) A perso the gove (ii) A family (iii) A 35% of Provide the forest of supported	ation received a writ rganization, check th t 17, 2006, has the con member of the sum member of a persor controlled entity of a collowing information	ten determination from this box organization accepted an irectly controls, either alcupported organization? In described in (i) above? person described in (i) cabout the supported organization (described on lines 1-9 above or IRC section	ny gift or coone or tog or (ii) above ganization((iv) Is the of the col. (i) lis governing of	erganization sted in your document?	pe I, Type from any persons c (v) Did you organizat (i) of you	of the followers of the	(vi) Is organizatic (i) organizatic U.S	the on in col. ed in the ?	11g(i) 11g(ii) 11g(iii	Yes)) mount (No
g h (i) Name	supporting of Since August (i) A perso the gove (ii) A family (iii) A 35% of Provide the forest of supported	ation received a writ rganization, check th t 17, 2006, has the con member of the sum member of a persor controlled entity of a collowing information	ten determination from this box organization accepted an irectly controls, either alcupported organization? In described in (i) above? person described in (i) cabout the supported organization (described on lines 1-9 above or IRC section	ny gift or coone or tog or (ii) above ganization((iv) Is the of the col. (i) lis governing of	erganization sted in your document?	pe I, Type from any persons c (v) Did you organizat (i) of you	of the followers of the	(vi) Is organizatic (i) organizatic U.S	the on in col. ed in the ?	11g(i) 11g(ii) 11g(iii	Yes)) mount (No
g h (i) Name	supporting of Since August (i) A perso the gove (ii) A family (iii) A 35% of Provide the forest of supported	ation received a writ rganization, check th t 17, 2006, has the con member of the sum member of a persor controlled entity of a collowing information	ten determination from this box organization accepted an irectly controls, either alcupported organization? In described in (i) above? person described in (i) cabout the supported organization (described on lines 1-9 above or IRC section	ny gift or coone or tog or (ii) above ganization((iv) Is the of the col. (i) lis governing of	erganization sted in your document?	pe I, Type from any persons c (v) Did you organizat (i) of you	of the followers of the	(vi) Is organizatic (i) organizatic U.S	the on in col. ed in the ?	11g(i) 11g(ii) 11g(iii	Yes)) mount (No

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

Schedule A (Form 990 or 990-EZ) 2009

932021 02-08-10

Schedule A (Form 990 or 990-EZ) 2009 THE LIBRARY FOUNDATION OF LOS ANGELES 95-4368250 Page 2

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

	(Complete only if you checke	d the box on line 5	, 7, or 8 of Part I.)				
Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	8,622,954.	4,143,503.	5,247,365.	3,999,422.	4,543,636.	26,556,880.
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	8,622,954.	4,143,503.	5,247,365.	3,999,422.	4,543,636.	26,556,880.
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)						2,066,129.
	Public support. Subtract line 5 from line 4.						24,490,751.
	ction B. Total Support	-					
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	8,622,954.	4,143,503.	5,247,365.	3,999,422.	4,543,636.	26,556,880.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties	252 425				406 600	
	and income from similar sources	350,196.	440,903.	598,774.	480,704.	406,627.	2,277,204.
9	Net income from unrelated business						
	activities, whether or not the	E01 100	554 040				
	business is regularly carried on	791,400.	554,948.				1,346,348.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
	Total support. Add lines 7 through 10						30,180,432.
	Gross receipts from related activities,	•	,				,139,671.
13	First five years. If the Form 990 is for		s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	. \Box
80	organization, check this box and stor						<u></u>
	•			al		14	81.15 %
	Public support percentage for 2009 (I Public support percentage from 2008					15	78.92 %
	33 1/3% support test - 2009. If the o						
106	stop here. The organization qualifies	-					
	33 1/3% support test - 2008. If the o						
	and stop here. The organization qual	•		•		•	
17-	10% -facts-and-circumstances tes						
110	and if the organization meets the "fac	-					
	meets the "facts-and-circumstances"						
	10% -facts-and-circumstances tes						
	,. 14010 4114 011 0411131411063 163	. Looom the orga		.com a box on line	.5, 154, 165, 01 1	, a, and into 10 15 1	5,5 Oi

Schedule A (Form 990 or 990-EZ) 2009

more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

Sch	edule A (Form 990 or 990-E2) 2009 art III Support Schedule for C	Organizations	Described in	Section 509(a	1)(2) (Complete only	if you checked the h	Page 3
	ction A. Public Support	<u> </u>			-/(/ (Oomplete om)	il you checked the b	ox on line 3 or r art i.
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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-						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7 <i>a</i>	Amounts included on lines 1, 2, and 3 received from disqualified persons						
t	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						
8	Public support (Subtract line 7c from line 6.)						
_	ction B. Total Support		1		1		1
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
t	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
	Total support (Add lines 9, 10c, 11, and 12.)						<u> </u>
14	First five years. If the Form 990 is for	ŭ			•	. , . ,	zation,
50	check this box and stop here ction C. Computation of Publ						<u></u>
	Public support percentage for 2009 (l			column (f))		15	%
	Public support percentage from 2008					16	
	ction D. Computation of Inves					110	70
	Investment income percentage for 20					17	%
18	Investment income percentage from 2					18	%
	a 33 1/3% support tests - 2009. If the						
	more than 33 1/3%, check this box a a 33 1/3% support tests - 2008. If the	nd stop here. The	e organization qual	ifies as a publicly s	supported organiz	ation	> □
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	a box on line 14, 19	a, or 19b, check t	his box and see ir	structions	>

** PUBLIC DISCLOSURE COPY **

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

Employer identification number

2009

95-4368250 THE LIBRARY FOUNDATION OF LOS ANGELES Organization type (check one): Filers of Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 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, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization 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), and received from any one contributor, during the year, a contribution 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. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to 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. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), 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 line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

923451 02-01-10

for Form 990, 990-EZ, or 990-PF.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization

Employer identification number

THE LIBRARY FOUNDATION OF LOS ANGELES

95-4368250

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$311,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2		\$\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3		\$150,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4			Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5			Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6		\$\$\$	Person X Payroll
22452 02 0	4.40	Schedule R (Form	990 990-F7 or 990-PF) (2009)

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

2009
Open to Public Inspection

Name of the organization

THE LIBRARY FOUNDATION OF LOS ANGELES

Employer identification number 95-4368250

Pai	t I Organizations Maintaining Donor Advised F		Is or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.		
	, ,	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writi	ng that the assets held in donor adv	ised funds
•	are the organization's property, subject to the organization's exc	_	
6	Did the organization inform all grantees, donors, and donor advis		
•	for charitable purposes and not for the benefit of the donor or do		
Pai			
1	Purpose(s) of conservation easements held by the organization (
	Preservation of land for public use (e.g., recreation or pleas		istorically important land area
	Protection of natural habitat		rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified	conservation contribution in the forr	n of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic structu	ıre included in (a)	2c
d	Number of conservation easements included in (c) acquired after	8/17/06	2d
3	Number of conservation easements modified, transferred, releas	ed, extinguished, or terminated by t	ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation easem	ent is located >	
5	Does the organization have a written policy regarding the periodi	c monitoring, inspection, handling o	
	violations, and enforcement of the conservation easements it ho		
6	Staff and volunteer hours devoted to monitoring, inspecting, and		
7	Amount of expenses incurred in monitoring, inspecting, and enfo		
8	Does each conservation easement reported on line 2(d) above sa	atisfy the requirements of section 17	
	and section 170(h)(4)(B)(ii)?		
9	In Part XIV, describe how the organization reports conservation e	· ·	
	include, if applicable, the text of the footnote to the organization	s financial statements that describe	s the organization's accounting for
Dai	conservation easements. t III Organizations Maintaining Collections of A	rt Historical Transuras or (Other Similar Assets
rai	Complete if the organization answered "Yes" to Form 990	-	Other Sillilai Assets.
	Complete if the organization answered Tes to Form 550	, raitiv, inte o.	
10	If the organization elected, as permitted under SFAS 116, not to	report in its revenue statement and	halance sheet works of art, historical
ıu	treasures, or other similar assets held for public exhibition, educations and the similar assets held for public exhibition, educations are similar assets.	· ·	
	the footnote to its financial statements that describes these item		able service, provide, in Fart XIV, the text of
h	If the organization elected, as permitted under SFAS 116, to repo		ince sheet works of art, historical treasures
	or other similar assets held for public exhibition, education, or re-		
	these items:	sourch in factoration of public service	so, provide the relieving amounts relating to
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
2	If the organization received or held works of art, historical treasur		
_	the following amounts required to be reported under SFAS 116 r	•	3 / In a comp
а	Revenues included in Form 990, Part VIII, line 1	_	> \$
			> \$
			· · · · · · · · · · · · · · · · · · ·

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Schedule D (Form 990) 2009

	,	RARY FOUND.					95-43			
Par	t III Organizations Maintaining C	Collections of A	rt, Historical Tr	easures,	or Othe	er Simil	ar Asse	ts (cont	inued)	
3	Using the organization's acquisition, access	ion, and other record	ls, check any of the	following tha	at are a si	gnificant	use of its	collectio	n item	 IS
	(check all that apply):		•	-		_				
а	Public exhibition	d	Loan or exc	hange progra	ams					
b	Scholarly research	е		3 1 3						
c	Preservation for future generations	_								
4	Provide a description of the organization's c	ollections and evolai	n how they further t	he organizati	ion's avar	ant nurn	nce in Par	+ YI\/		
5	During the year, did the organization solicit of	•	•	•			Joe IIII ai	L XIV.		
3	to be sold to raise funds rather than to be m							Yes] Na
Da	t IV Escrow and Custodial Arran									No
Fai	reported an amount on Form 990, Pa		ete ir organization ar	iswered "Ye	s" to Forr	n 990, Pa	irt iv, iine	9, or		
1a	Is the organization an agent, trustee, custod							٦.,		٦
	on Form 990, Part X?							Yes		J No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table:							
								Amoun	t	
С	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					. 1e				
f	Ending balance					. 1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21?				L	Yes		No
b	If "Yes," explain the arrangement in Part XIV									
Par	T V Endowment Funds. Complete	f the organization an	swered "Yes" to Fo	rm 990, Part	IV, line 1	0.				
	•	(a) Current year	(b) Prior year	(c) Two yea	rs back	(d) Three y	ears back	(e) Four	years	back
1a	Beginning of year balance	17,960,014.	22,380,876.					Ì		
	Contributions	1041638.	606,870.							
С	Net investment earnings, gains, and losses	2534173.	-4,684,732.							
	Grants or scholarships		· · ·							
	Other expenditures for facilities									
·			343,000.							
	and programs Administrative expenses		323,3333							
		21,535,825.	17,960,014.							
g	End of year balance									
2	Provide the estimated percentage of the year	44.72								
	Board designated or quasi-endowment		_%							
b	Permanent endowment ► 48.23 Term endowment ► 7.05	%								
		%								
3a	Are there endowment funds not in the posse	ession of the organiza	ation that are held a	nd administe	ered for th	ne organiz	zation	г		
	by:							-	Yes	
	(i) unrelated organizations							3a(i)		X
	(ii) related organizations							3a(ii)		Х
b	If "Yes" to 3a(ii), are the related organization	s listed as required o	n Schedule R?					3b		
4	Describe in Part XIV the intended uses of the									
Par	rt VI Investments - Land, Building	gs, and Equipm	ent. See Form 990	, Part X, line	10.					
	Description of investment	(a) Cost or o		or other		ccumulate	ed	(d) Boo	k valu	е
		basis (investr	nent) basis	(other)	dep	reciation				
1a	Land									
	Buildings									
	Leasehold improvements									
	Equipment		34	0,694.	2	285,5	83.	5.	5,1	11.
	Other									

Schedule D (Form 990) 2009

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

Schedule D (Form 990) 2009 Int LIBRARI			ANGEI	<u> </u>	-4300230	Page •
Part VII Investments - Other Securities. Se	ee Form 990, Part X, lii	ne 12.				
(a) Description of security or category (including name of security)	(b) Book value			(c) Method of valuated of valuated to the condition of th		
Financial derivatives						
Closely-held equity interests						
Other_						
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)						
Part VIII Investments - Program Related. S	ee Form 990, Part X, I	ine 13.				
(a) Description of investment type	(b) Book value			(c) Method of value		
	, ,		Cos	t or end-of-year ma	rket value	
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)	<u> </u>					
Part IX Other Assets. See Form 990, Part X, line	Description				(b) Book va	ılııo
(d)	Description				(b) Book va	liue
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 15.)			•		
Part X Other Liabilities. See Form 990, Part X,						
1. (a) Description of liability		(b) Amou	nt			
Federal income taxes						
RENT AND ACCRUED VACATION PAY	ABLE	54	,468.			
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 25.) ▶	54	,468.			

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48. 932053 02-01-10

Schedule D (Form 990) 2009

27,444. a Donated services and use of facilities 2a **b** Prior year adjustments 2b 2c c Other losses 376,592. Other (Describe in Part XIV.) 2d 404,036. 2e Add lines 2a through 2d 3,500,718. Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: 57,068. a Investment expenses not included on Form 990, Part VIII, line 7b 4a **b** Other (Describe in Part XIV.) 57,068. 4с c Add lines 4a and 4b 3,557,786. Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4: THE FOUNDATION'S ENDOWMENT FUNDS ARE USED TO SUPPORT A

VARIETY OF PURPOSES INCLUDING LITERACY, EDUCATION, HUMANITIES.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

Part XIV Supplemental Information

CHANGES IN VALUE OF CHARITABLE REMAINDER TRUSTS: 30579.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

CHANGES IN VALUE OF CHARITABLE REMAINDER TRUSTS: 30579.

Schedule D (Form 990) 2009

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

Open To Public

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
 ► Attach to Form 990 or Form 990-EZ.

Inspection

Employer identification number

Name of the organization							ntification number
THE LIB	RARY FOUNDATION OF	, PO	S A	NGELES		95-4368	250
Part I Fundraising Activities required to complete this par	Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.						
1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a							
(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have co or con contrib	ustody itrol of	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
Total							
3 List all states in which the organization	on is registered or licensed to solicit	funds (or has	been notified it is ex	empt	t from registrati	on or licensing.

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

Schedule G (Form 990 or 990-EZ) 2009

Schedule G (Form 990 or 990-EZ) 2009 THE LIBRARY FOUNDATION OF LOS ANGELES 95-4368250 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000

		on Form 990-EZ, line 6a. List events with	gross receipts greater th	nan \$5,000.		
			(a) Event #1	(b) Event #2	(c) Other events	(-N-T-+-1+-
			ANNUAL	LITERARY		(d) Total events
				FEASTS	1	(add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
ne			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	380,236.	657,540.	42,925.	1,080,701.
	2	Less: Charitable contributions	244,544.	551,405.	26,035.	821,984.
	3	Gross income (line 1 minus line 2)	135,692.	106,135.	16,890.	258,717.
	4	Cash prizes				
ses	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs	73,472.	20,665.	1,018.	95,155.
Direct	7	Food and beverages			10,564.	10,564.
	8	Entertainment				
	9	Entertainment Other direct expenses		85,470.	5,308.	152,998.
	10			•		258,717,
					_	0.
Pa		Net income summary. Combine line 3, colum Gaming. Complete if the organization	n (u), and line 10 answered "Ves" to Form	990 Part IV line 19 or a		<u> </u>
		\$15,000 on Form 990-EZ, line 6a.		1000, 1 41117, 11110 10, 01 1	oportou moro triari	
_		\$15,000 0111 01111 990-LZ, line 0a.		(b) Pull tabs/instant		(d) Total gaming (add
ine			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue				amgo, progressive amge		con (a) through con (b)
Re						
	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	└── No	│└── No	└── No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		>	()
	8	Net gaming income summary. Combine line 1	1, column (d), and line 7		>	
						Yes No
9	En	ter the state(s) in which the organization opera	tes gaming activities:			
а	ls t	the organization licensed to operate gaming ac	ctivities in each of these	states?		9a
b	If "	No," explain:				
	_					
10a	We	ere any of the organization's gaming licenses re	evoked, suspended or te	erminated during the tax	year?	10a
b	If "	Yes," explain:				
	_					
11	Do	es the organization operate gaming activities v	with nonmembers?			11
		the organization a grantor, beneficiary or truste				
	adı	minister charitable gaming?				12

932082 02-03-10

Sch	edule G (Form 990 or 990-EZ) 2009 THE LIBRARY FOUNDATION OF LOS ANGELES 95-436	825	0 Pa	age 3
			Yes	No
13	Indicate the percentage of gaming activity operated in:			
а	The organization's facility 13a %			
	An outside facility			
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
45-		45-		
ısa	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a		
h	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount			
	of gaming revenue retained by the third party \blacktriangleright \$			
c	If "Yes," enter name and address of the third party:			
	The fact of the first and address of the time party.			
	Name			
	Address >			
16	Gaming manager information:			
	Name			
	Gaming manager compensation ▶ \$			
	Description of services provided			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	17a		
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			

Schedule G (Form 990 or 990-EZ) 2009

organization's own exempt activities during the tax year > \$

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

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

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Questions Regarding Compensation

THE LIBRARY FOUNDATION OF LOS ANGELES

Employer identification number 95-4368250

Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence			
First-class or charter travel Travel for companions Housing allowance or residence for personal use Payments for business use of personal residence			
Travel for companions Payments for business use of personal residence			
Lax indemnification and gross-up payments Late Health or social club dues or initiation fees			
Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	ь		
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	2		
3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			
CEO/Executive Director. Check all that apply.			
X Compensation committee X Written employment contract			
X Independent compensation consultant X Compensation survey or study			
X Approval by the board or compensation committee			
——————————————————————————————————————			
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
organization or a related organization:			
	a	Х	
	ŀb		Х
	lc		Х
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
contingent on the revenues of:			
	ia		Х
	ib		Х
If "Yes" to line 5a or 5b, describe in Part III.			
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
contingent on the net earnings of:			
	ia		Х
	ib di		Х
If "Yes" to line 6a or 6b, describe in Part III.			
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	7		Х
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	в		Х
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	\neg		
	9		

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2009

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		(B) Breakdown of W-2 and/or 1099-MISC compensa		SC compensation	(C)	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	Retirement and other deferred compensation	benefits	(B)(i)-(D)	reported in prior Form 990 or Form 990-EZ
	(i)	47,285.	0.	62,125.	0.	0.	109,410.	0.
CAROLYN WAGNER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
-	(ii)							
	(i)							
	(ii) (i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Supplemental information
Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.
PART I, LINE 4A: CAROLYN WAGNER RECEIVED SEVERANCE OF 3 MONTHS SALARY WHICH
IS EQUIVALENT TO \$44,625 ON MARCH 31, 2009. SHE ALSO RECEIVED \$17,500 ON
MAY 15 FOR A GRAND TOTAL OF \$62,125, WHICH WILL BE INCLUDED ON HER 2009
W-2. SHE WAS NOT AN OFFICER AT ALL IN THE FISCAL YEAR ENDING 6/30/2010,
BUT AS COMPENSATION ON THE FORM 990, PART VII IS REPORTED ON A CALENDAR
YEAR END BASIS, HER W-2 WAGES ARE REPORTED THERE.

SCHEDULE J-2 (Form 990)

Department of the Treasury Internal Revenue Service **Continuation Sheet for Form 990**

► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

► See the Instructions for Form 990.

2009
Open to Public Inspection

Name of the Organization

THE LIBRARY FOUNDATION OF LOS ANGELES

Employer Identification number 95-4368250

								OS ANGELES	95-436				
Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees													
(A)	(B)		(C)					(D)	(E)	(F)			
Name and title	Average		Position					Reportable	Reportable	Estimated			
	hours	(c	(check all that apply)					compensation	compensation	amount of			
	per					П		from the organization (W-2/1099-MISC)	from related	other			
	week	_				loyee			organizations	compensation			
		irecto	tee			Highest compensated employee			(W-2/1099-MISC)	from the			
		e or d								organization and related			
		ruste	Itrus		ee,	nben				organizations			
		dual t	nstitutional trustee	L	nplo	st co	<u></u>			organizations			
		Individual trustee or director	Institu	Officer	Key employee	Highe	Former						
ELLEN LEVITT													
DIRECTOR	1.00	х						0.	0.	0.			
THOMAS E MC LAIN													
DIRECTOR	3.00	x						0.	0.	0.			
GWEN MILLER													
DIRECTOR	1.00	x						0.	0.	0.			
RICHARD A. NERI									•				
DIRECTOR	1.00	x						0.	0.	0.			
TAKASHI OHDE	1,00							•	•				
DIRECTOR	1.00	х						0.	0.	0.			
LIN OLIVER	1.00						H	•	•	•			
DIRECTOR	1.00	Х						0.	0.	0.			
LAWRENCE POST	1.00		\vdash					•	•	•			
DIRECTOR	1.00	Х						0.	0.	0.			
SHARON RISING	1.00	^						0.	0.	0.			
DIRECTOR	1.00	x						0.	0.	0.			
ALLISON SNIPES	1.00	^						0.	0.	0.			
DIRECTOR	1.00	x						0.	0.	0.			
QUINN R. STILLS	1.00	^						0.	0.	0.			
DIRECTOR	3.00	x						0.	0.	0.			
STENDER E. SWEENEY II	3.00	^						0.	0.	0.			
DIRECTOR	1.00	x						0.	0.	0.			
DAVID ROSENBLUM	1.00	_						0.	0.	0.			
	1 00	7.7						0.	0.	_			
DIRECTOR TYREE WIEDER	1.00	Х						0.	0.	0.			
	1 00	7.7							0	_			
DIRECTOR	1.00	A						0.	0.	0.			
MARTIN GOMEZ, CITY LIBRA	1 00	3,7							0	_			
DIRECTOR	1.00	A						0.	0.	0.			
KEN BRECHER	F0 00	,,		,,					0	_			
PRESIDENT START 2/1/2010	50.00	X		Х				0.	0.	0.			
SUE VERBRUGGHEN	F0 00			l				425 445	•				
DIRECTOR OF FINANCE	50.00			Х				135,115.	0.	0.			
CAROLYN WAGNER	F0 00							100 410	^	_			
PRESIDENT UNTIL 3/31/09	50.00	_	<u> </u>				Х	109,410.	0.	0.			
		_	<u> </u>				-						
		\vdash	 	\vdash			\vdash	-					

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J-2 (Form 990) 2009

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

THE LIBRARY FOUNDATION OF LOS ANGELES

Employer identification number 95-4368250

Pa	rt I Types of Property								
		(a)	(b)	(c)	(d)				
		Check if	Number of	Revenues reported on	Method of de		ning		
		applicable	contributions	Form 990, Part VIII, line 1g	revenu	ies			
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications	X		3,995.	MARKET PRIC	F.			
5	Clothing and household goods			37333		_			
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property	X	3	25,858.	STOCK MARKE	т 17	λTIT	_	
9	Securities - Publicly traded	Λ	3	23,030.	SIOCK MARKE	1 V	АЦО	<u> </u>	
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory	X	1	561.	MARKET VALU	Ε			
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other ► (MEALS & FOOD)	X	1	2,190.	MARKET PRIC	E			
26	Other (CRYSTAL AWARD)	X	3	570.	MARKET PRIC	E			
27	Other ()								
28	Other (
29	Number of Forms 8283 received by the organi	zation during	the tax vear for o	contributions					
	for which the organization completed Form 8283, Part IV, Donee Acknowledgment								
		,					Yes	No	
30a	During the year, did the organization receive b	y contributio	n any property rei	ported in Part I. lines 1-28 th	at it must hold for				
	at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for								
	the entire holding period?								
b	b If "Yes," describe the arrangement in Part II.								
31									
	32a Does the organization have a gift acceptance policy that requires the review of any horistandard continuations:								
<u>J</u> La	contributions?								
h	If "Yes," describe in Part II.					32a		X	
33	If the organization did not report revenues in c	olumn (a) fa	a type of propert	y for which column (a) is she	ckod				
33	•	olullili (C) fol	a type of propert	y for writeri columni (a) is che	creu,				
1 1 1 4	describe in Part II. For Privacy Act and Paperwork Reduction	Ant Nation	ooo the Instruct	iona for Earm 000	Schedule M	I /Ear	n 000	2000	
LHA	I OI ITIVACY ACLAIN PADELWOLK NEGUCTION	ACLINULICE	, っせせ いほ けらいせじし	いいる いし しいけい カカル・	ochedule IV	i (FUI)	ロックリ	, といしぎ	

Schedule M (Form 990) 2009

SCHEDULE O

(Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

THE LIBRARY FOUNDATION OF LOS ANGELES

Employer identification number 95-4368250

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

ADOPT-A-BRANCH AND COMPUTER AIDES- A PUBLIC/PRIVATE PARTNERSHIP

DESIGNED TO PROVIDE BRANCH LIBRARIES WITH THE RESOURCES THEY NEED TO

MEET THE UNIQUE NEEDS OF THE COMMUNITY. FUNDS ARE TARGETED TO

FULFILLING THE SPECIFIC NEEDS OF THAT BRANCH SUCH AS REPLACING

COMPUTERS OR PURCHASING MATERIALS THAT ALIGN WITH THE LOCAL SCHOOLS'

CURRICULA. PROVIDE COMPUTER AIDES TO HELP PATRONS WITHOUT ACCESS TO

COMPUTERS NAVIGATE CYBERSPACE, PERFORM RESEARCH, LEARN COMPUTER

LITERACY, ACCESS INFORMATION FROM THE INTERNET.

EXPENSES \$ 305388. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

ADULT LITERACY - HIRING OF SUPPORT FOR NEW CENTERS, LITERACY

COORDINATORS, TUTOR TRAINING, BOOKS AND OTHER PRINT MATERIALS, AND

SELF-TEACHING COMPUTER SOFTWARE PROGRAMS TO HELP PROMOTE ADULT LITERACY

SERVICES TO THE COMMUNITY.

EXPENSES \$ 197409. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

LIBRARY AWARENESS & COLLECTIONS - EXPANSION AND ENHANCEMENT OF THE

LIBRARY'S GENERAL COLLECTIONS OF BOOKS AND MATERIALS, MUSIC CDS, AND

SPECIAL COLLECTIONS OF MATERIALS IN SPECIALIZED AREAS; AND PROGRAMS

THAT HELP MAKE THE PUBLIC MORE AWARE OF THE LIBRARY'S RESOURCES.

EXPENSES \$ 142637. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

EXHIBITIONS - THE FOUNDATION PRESENTS COMPELLING EXHIBITIONS AT THE

CENTRAL LIBRARY FROM THE FINE ARTS TO CULTURE, SCIENCE, AND HISTORY.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932211 02-03-10

Schedule O (Form 990) 2009

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

THE LIBRARY FOUNDATION OF LOS ANGELES

Employer identification number 95-4368250

EXPENSES \$ 95582. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 AFTER PREPARATION IS

SENT TO ALL DIRECTORS. THE AUDIT COMMITTEE WILL FORMALLY REVIEW IT WITH THE

TAX PREPARERS AND ALL DIRECTORS ARE INVITED TO ATTEND THAT MEETING. THE

FINALIZED FORM IS DISTRIBUTED TO EACH DIRECTOR BEFORE IT IS FILED WITH THE

IRS.

FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTEREST POLICY IS

DISTRIBUTED TO EVERY DIRECTOR ON AN ANNUAL BASIS. THE DIRECTORS ARE

REQUIRED TO DISCLOSE ANY RELATIONSHIPS THAT MAY LEAD TO CONFLICTS OF

INTEREST AND MUST SIGN AND RETURN THE POLICY EVERY YEAR.

FORM 990, PART VI, SECTION B, LINE 15: AN AD HOC COMMITTEE OF THE BOARD'S EXECUTIVE COMMITTEE DETERMINES THE COMPENSATION. THE COMMITTEE SURVEYS MANY OTHER COMPARABLE ORGANIZATIONS AS WELL AS CONSULTS INDEPENDENT FIRMS TO DETERMINE A FAIR COMPENSATION. THE AMOUNTS DETERMINED ARE THEN TAKEN TO THE 10 MEMBER EXECUTIVE COMMITTEE FOR APPROVAL.

FORM 990, PART VI, SECTION C, LINE 19: THE FINANCIAL STATEMENTS AS WELL AS
THE FORM 990 ARE AVAILABLE VIA THE ORGANIZATION WEBSITE WWW.LFLA.ORG UNDER
THE "ABOUT US" SECTION OF THE WEBSITE. THOSE DOCUMENTS, AS WELL AS THE
DETERMINATION LETTER AND OTHER GOVERNING DOCUMENTS ARE AVAILABLE UPON
REQUEST AT THE MAIN OFFICE OF THE ORGANIZATION.

FORM 990, PART VII, CONTINUATION ON SCHEDULE J-2

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization **Employer identification number** 95-4368250 THE LIBRARY FOUNDATION OF LOS ANGELES COMPENSATION OF PRESIDENT JOHN F. COOKE WAS PRESIDENT OF THE LIBRARY FOUNDATION FROM APRIL 1, 2009 THROUGH DECEMBER 1, 2009. HE DID NOT RECEIVE ANY COMPENSATION OR BENEFITS AS HE WAS VOLUNTEERING ALL HIS TIME IN THIS CAPACITY. JOHN F. COOKE RETURNED TO HIS POSITION ON THE BOARD OF DIRECTORS AS SOON AS THE POSITION OF PRESIDENT WAS FILLED BY KEN BRECHER. FORM 990, PART VIII, LINE 10B LIBRARY STORE - COST OF GOODS SOLD COST OF GOODS SOLD INCLUDES ALL COSTS OF OPERATING THE LIBRARY STORE. FORM 990, PART IX, LINE 22 ADVERTISING EXPENSE ADVERTISING AND PROMOTION COSTS OF \$201,523 INCLUDE ALL COLLATERAL MATERIALS FOR PROGRAMS OFFERED TO THE PUBLIC-POSTERS, FLYERS, BOOKMARKS FOR SCHOOL, YOUTH ORGANIZATIONS, BRANCH LIBRARIES AND BOOK BAGS WITH ALL RELATED MATERIALS FOR SUMMER READING CLUBS.

33