Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

		For calendar year 2013 or other tax year beginning July 1 , 2013, and ending June 30 , 20 14 . See separate instructions.								
epartment of the Treasury nternal Revenue Service			ormation about Form 990-T and its instruction of enter SSN numbers on this form as it may be	() (a) () (a)						
☐ Ch	eck box if dress changed		Name of organization (inged ar	nd see instructions.)		D Employe	r identification r	number	
Everent under section Dublic Libr			Public Library Association of Annapolis and	d AA C	County Inc		(Employee	es' trust, see instr	uctions.)	
Number street and room or suite no. If a P.O. box se						1	52-6001871			
	7 D March 1						E Unrelated business activity codes			
and the second second	□ 408(e) □ 220(e) Type 5 Harry S Truman Parkway City or town, state or province, country, and ZIP or foreign postal code						(See instructions.)			
529(a)			Annapolis, MD 21401-7042	501/12	561439					
Book v	alue of all assets	F Gr	oup exemption number (See instructions.)	I			30143	5 i		
at end	of year		neck organization type ► ✓ 501(c) corp		n 501(c)	trust _] 401(a) tru	ıst Othe	er trust	
H Des	cribe the orga	nization	n's primary unrelated business activity.	Faxi	ng Service for the	e Public				
			e corporation a subsidiary in an affiliated grou				roup?	▶ ☐ Yes	√ No	
			nd identifying number of the parent corporat							
			Scott Sedmak	<u> </u>		ohone numb	er ▶	410-222-73	71	
			e or Business Income		(A) Income		(B) Expenses (C) Net			
1a	Gross receipts	or sale	es 23279						an Gerry	
	Less returns and		****	1c	23279					
			Schedule A, line 7)	2	0	Angel de la	A EXPENSE	(1) - (1) -		
			t line 2 from line 1c	3	23279		C very dispare	34 45 5 5 6 6		
			me (attach Form 8949 and Schedule D)	4a	. 23219	0.000 0.000			-	
			4797, Part II, line 17) (attach Form 4797)	4b					_	
	(F) (F)	7.0	n for trusts	4c						
			erships and S corporations (attach statement)	5		A 1544			_	
				6						
			ule C)					-		
			ced income (Schedule E)	7						
			, and rents from controlled organizations (Schedule F)	8					_	
		nt income of a section 501(c)(7), (9), or (17) organization (Schedule G)								
			tivity income (Schedule I)	10						
	Advertising income (Schedule J)									
			tructions; attach schedule.)	12						
	Total. Combi			13	23279			232	79	
Part			Taken Elsewhere (See instructions for				ept for co	ntributions,		
			t be directly connected with the unrelate		siness income.)					
			icers, directors, and trustees (Schedule K)		W 10 100 100 100		. 14			
15	Salaries and v			٠.			. 15	958	85	
16			ance							
17	Bad debts		***							
18			dule)							
19								-		
20			ons (See instructions for limitation rules.)				1			
21	Depreciation	(attach	Form 4562)		. 21			5		
22			aimed on Schedule A and elsewhere on re				22b			
23	Depletion .					* * * *	. 23			
24			erred compensation plans							
25	Employee be	nefit pr	ograms			* * * *	. 25	26	87	
26			enses (Schedule I)							
27	Excess reade	ership c	osts (Schedule J)				. 27			
28			tach schedule)			15 150 150 150	. 28			
29								122	72	
30			axable income before net operating loss de					110	07	
31			eduction (limited to the amount on line 30						0	
32			taxable income before specific deduction.					110	07	
33	Specific ded	uction (Generally \$1,000, but see line 33 instruction	ons fo	r exceptions.) .		. 33		000	
34	Unrelated by	usiness	s taxable income. Subtract line 33 from li	ne 32	. If line 33 is gre	ater than lin	e 32,			
	enter the sma	aller of	zero or line 32				- 34	100	007	

OMB No. 1545-0687

Part I		x Computation								
35	Organiz	ations Taxable as Corpo	orations. See instru	uctions for tax cor	nputation. C	controlled arc	au		1	
	members (sections 1561 and 1563) check here ▶ ☐ See instructions and:								1	
а		ur share of the \$50,000, \$2				in that order):			1	
	(1) \$	(2)		(3) \$) Element of	l lattorder).				
b		ganization's share of: (1) A			(50) \$					
-		tional 3% tax (not more that								
С		tax on the amount on line (What	727323200	
36	Truete	Taxable at Trust Rate	os Cos instructi					35c	1501	
30	the amo	unt on line 34 from: Tax	es. See mstruction	ons for tax com	iputation. II	ncome tax	on >	Atter		
017		36								
37	Proxy to	37								
38	Alternat	ive minimum tax				* * * *		38		
39	Total. A	dd lines 37 and 38 to line 3	35c or 36, whicheve	er applies				39	1501	
Part I	MADE SOME	x and Payments								
40a	Foreign	tax credit (corporations attac	h Form 1118; trusts	attach Form 1116)	. 40a					
b	Other c	redits (see instructions).			. 40b	700				
C	General	business credit. Attach Fo	ırm 3800 (see instru	ictions)	. 40c			10000	85	
d	Credit for	or prior year minimum tax (attach Form 8801 d	or 8827)	. 40d					
е		edits. Add lines 40a throu						40e	1	
41		t line 40e from line 39 .						41	1501	
42	Other tax	es. Check if from: Form 42	255 Form 8611	Form 8697 T Form 88	REG C Other /s	ettach schodulo)		42	1501	
43	Total ta	x. Add lines 41 and 42 .	.50 🖂 (0 (001)	TOTAL COST		ittach schedule)	•	43		
44a		its: A 2012 overpayment cr				ı ı	•	40		
b		timated tax payments .								
C	Tay dar	osited with Form 8868 .		* * * * * *	44b				ĺ	
d	Foreign	organizations: Tay paid or	· · · · · · · · · · · · · · · · · · ·	/!	. 44c					
	Doolsun	organizations: Tax paid or	withheld at source	(see instructions)	. 44d				1	
e	Oradit f	withholding (see instruction	ліs)	(4): 1 =	. 44e					
-		or small employer health in		(Attach Form 8941) - 44f				1	
g		redits and payments:	Form 2439		NE 1 SERVICE MANAGEMENT					
4 -	Form	25/7/125/62	Other		al ▶ 44g					
45	lotalp	ayments. Add lines 44a th	rough 44g				•	45	0	
46	Estimat	ed tax penalty (see instruct	tions). Check if For	n 2220 is attached			-	46		
47	Tax du	e. If line 45 is less than the	total of lines 43 and	d 46, enter amount	owed			47	1501	
48		yment. If line 45 is larger t			amount over	rpaid		48		
49		amount of line 48 you want:				Refunded		49		
Part		atements Regarding C)			
1	At any									
		time during the 2013	calendar year, d	id the organization	on have ar	n interest in	or	a signature	Yes	No
	or oth	time during the 2013 er authority over a	financial account	(bank, securitie	s, or oth	er) in a	oreig	n country)	No
	or oth	er authority over a f , the organization ma	financial account y have to file	(bank, securities Form TD F 90	es, or oth 0-22.1, Rep	er) in a	oreig	n country)	No
	or oth If YES Financi	er authority over a f i, the organization ma al Accounts. If YES, enter t	financial account y have to file the name of the fore	bank, securitie) Form TD F 90 eign country here	es, or oth 0-22.1, Rep ▶	er) in a s port of For	oreiq eign	gn country? Bank and)	No
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3 Sche 1 2 3 4a b	or other forms of the second o	er authority over a final fina	financial account y have to file the name of the fore on receive a distributi orms the organizati nterest received or a Enter method of in 1 2 3 4a 4b	(bank, securitie Form TD F 90 eign country here I on from, or was it the on may have to file accrued during the nventory valuatio 6 Inven 7 Cost line 6 in Pa 8 Do tl prope	es, or oth D-22.1, Rep e grantor of, or tax year n tax year n of goods from line 5 art I, line 2. the rules of erty produce	er) in a port of For r transferor to, \$ of year sold. Subt . Enter here section 263A ad or acquire	a for	gn country/Bank and eign trust? ,	Yes	1
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3 Sche 1 2 3 4a b	or other of the control of the contr	er authority over a final transfer authority over a final Accounts. If YES, enter the tax year, did the organizations are instructions for other fine amount of tax-exempt in -Cost of Goods Sold. If year beginning of year ses	financial account y have to file the name of the fore on receive a distributi orms the organizati nterest received or a Enter method of in 1 2 3 4a 4b 5	(bank, securitie Form TD F 90 eign country here I on from, or was it the on may have to file accrued during the nventory valuatio 6 Inven 7 Cost line 6 in Pa 8 Do th	es, or oth D-22.1, Rep e grantor of, or oth tax year year year year year year year year	er) in a port of For rtransferor to, \$ of year	a form	Bank and eign trust? , eign trust? , eign trust? , the respect to resale) apply	Yes	√ √ No
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3 Sche 1 2 3 4a b	or oth If YES Financi During to If YES, Enter th Edule A- Invento Purcha Cost of Additio (attach Other of Total. Under part correct, e	er authority over a final the organization may all Accounts. If YES, enter the tax year, did the organizations are instructions for other fine amount of tax-exempt in Cost of Goods Sold. But year beginning of year ses	financial account y have to file the name of the fore on receive a distributi orms the organizati nterest received or a Enter method of in 1 2 3 4a 4b 5 we examined this return, incer (other than taxpayer) is b	(bank, securities Form TD F 90 eign country here I on from, or was it the on may have to file accrued during the nventory valuatio 6 Inven 7 Cost line 6 in Pa 8 Do t prope to the cluding accompanying sci assed on all information of	egrantor of, of tax year year tax year year tax year year year year year year year year	er) in a port of For rtransferor to, \$ of year	a for	Bank and Ban	Yes Yes Yes Yes Yes Yes Yes Yes	No No tis true, return below
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Sche 1 2 3 4a b 5 Sign Here	or other of the correct, and the correct and t	er authority over a to the organization may all Accounts. If YES, enter the tax year, did the organizations are instructions for other for amount of tax-exempt in Cost of Goods Sold. But year beginning of year ses	financial account y have to file the name of the fore on receive a distributi orms the organizati nterest received or a Enter method of in 1 2 3 4a 4b 5 ve examined this return, incer (other than taxpayer) is b	(bank, securitie Form TD F 90 eign country here I on from, or was it the on may have to file accrued during the nventory valuatio 6 Inven 7 Cost line 6 in Pa 8 Do t proporto the cluding accompanying sci ased on all information of III I	egrantor of, of tax year year tax year year tax year year year year year year year year	er) in a port of For rtransferor to, sold. Subt. Enter here section 263A and or acquired an?	a formation a formation a formation a formation and a formation a	Bank and eign trust? . 6 7 th respect to resale) apply	Yes y ind belief, it iscuss this irer shown s)? Yes	No No tis true, return below
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Schedule C—Rent Income (see instructions)	(From Real	Pro	perty and	Persona	al Property L	.ea	sed With Real Prop	perty)		
Description of property										
(1) (2)										
(3)										
(4)										
(+)	2. Rent received	or acc	rued			_				
(a) From personal property (if the percentage of rent for personal property is more than 10% but not percentage of rent							3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)			
more than 50%)		50%	or if the rent	is based on p	orofit or income)		59.53	TO 20040V 19		
(1)										
(2)						_		- constant and a second		
(3)		~ · · · · · · · · · · · · · · · · · · ·				4				
(4)										
Total		Fotal					(b) Total deductions.			
(c) Total income. Add totals of contere and on page 1, Part I, line 6, content and on page 1 part I, line 6, content and on page 1 part I, line 6, content and on page 1 part I, line 6, content and on page 1 part I page 1	column (A)			instruction	ns)		Enter here and on page 1 Part I, line 6, column (B)			
			91119				3. Deductions directly conn	nected with or allocable to		
1. Description of del	bt-financed prope	rty		2. Gross income from or allocable to debt-financed property		(a)	debt-finance Straight line depreciation	(b) Other deductions		
(1)	***************************************			1	***		(attach schedule)	(attach schedule)		
(1)				4						
(2)				+		_				
(3)			vestiller in each	-						
4. Amount of average	5 Average	adiusta	ed hasis	+		_				
acquisition debt on or allocable to debt-financed property (attach schedule)			e to operty	4	Column divided column 5	7.	Gross income reportable (column 2 × column 6)	8. Allocable deductions (column 6 × total of columns 3(a) and 3(b))		
(1)					%		0			
(2)					%			100 A		
(3)			FEET 1.36		%			7		
(4)				3	%					
Totals						Er P	ater here and on page 1, art I, line 7, column (A).	Enter here and on page 1, Part I, line 7, column (B).		
Total dividends-received deduct						_				
Schedule F-Interest, Ann	uities, Roya	lties,	and Ren	ts From (Controlled O	rga	anizations (see instru	ctions)		
			Exempt	Controlled	Organizations	3	· · · · · · · · · · · · · · · · · · ·			
Name of controlled organization	1. Name of controlled 2. Employer organization identification number 3. Net unre		ated income 4. Total of specified payments made			5. Part of column 4 that is included in the controlling organization's gross incom				
(1)		- N - 10						-		
(2)										
(3)										
(4)										
Nonexempt Controlled Organi	izations						1	311/100		
7. Taxable Income	8. Net unrelated income (loss) (see instructions)		Total of specified payments made		10. Part of column 9 that is included in the controlling organization's gross incom	11. Deductions directly connected with income in column 10				
(1)	-						+	-		
(1)	 									
(2)	-									
(3)	-						-			
(4)	1			L						
							Add columns 5 and 10. Enter here and on page 1 Part I, line 8, column (A).			
Totals	\$ 10 MEST 1907 7000			ig jage sear co	3 3 3 3 40 40 40	. b				
the second secon	- To The Control (1985)	- A	The same of the same of the same					1		

Schedule G-Investment Inco	me of a Section	501(c	(7), (9),	or (17) Organia	zation (see instr	uction	ns)	1 490 .	
1. Description of income	2. Amount of income		3. Deductions directly connected (attach schedule)		4. Set-asides (attach schedule)		5. Total deductions and set-asides (col. plus col. 4)		
(1)	- Canada agree								
(2)									
(3)							-		
(4)									
	Enter here and on p Part I, line 9, colun					1877		re and on page 1, ine 9, column (B).	
Totals	>								
Schedule I—Exploited Exemp	t Activity Income	∍, Oth	er Than	Advertising In	come (see instr	uction	ıs)		
1. Description of exploited activity	2. Gross unrelated business income from trade or business	unrelated conne business income produ		4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5		7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).	
(1)									
(2)									
(3)									
(4)		7.32							
2	Enter here and on page 1, Part I, line 10, col. (A).	page	ere and on 1, Part I,), col. (B).					Enter here and on page 1, Part II, line 26.	
Totals									
Schedule J-Advertising Inco			8						
Part I Income From Perio	odicals Reported	on a	Consoli	dated Basis					
1. Name of periodical	2. Gross advertising income		Direct sing costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs		7. Excess readership costs (column 6 minus column 5, but not more than column 4).	
(1)				A STATE OF THE STATE OF		-		Table 20 and 10	
(1)									
(2)									
(3)									
(4)									
								11	
Totals (carry to Part II, line (5))	>				2				
Part II Income From Perio 2 through 7 on a line	odicals Reported e-by-line basis.)	on a	Separat	te Basis (For ea	ach periodical I	isted	in Part II	, fill in columns	
1. Name of periodical	2. Gross advertising income		Direct ising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation 6 income		eadership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).	
(1)									
(2)						-			
(3)		-		-					
					ļ	-			
(4)			****		Larran				
Totals from Part I									
Totals, Part II (lines 1-5)	Enter here and on page 1, Part I, line 11, col. (A).	page line 1	nere and on 1, Part I, 1, col. (B).					Enter here and on page 1, Part II, line 27,	
Schedule K—Compensation	of Officers, Direc	ctors.	and Tru	stees (see instr	ructions)				
1. Name			2. Title		2 Percent of			Compensation attributable to unrelated business	
(1)		 		- Indexes Color		6			
(2)									
(3)					6				
		-			6				
(4)	11 P. 44					6			
Total. Enter here and on page 1, Part	ii, line 14			<u> </u>					