Form

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

OMB No 1545-0047 2002

Open to Public Inspection

~	POI UII	e 2002 Calendar year, or tax year beginning, and ending					
В	Check if	f applicable Please C Name of organization		D	Employe	r ID numbe	r
ſ	Addre	ess change label of JAMES V. BROWN LIBRARY	- 1		24-0	799180	
Ī	Name	e change print of OF WILLIAMSPORT & LYCOMING COUNTY	Ī	E		ne number	
ſ	1	return type Number and street (or P O box if mail is not delivered to street address)	Room/suite		•	326-05	36
Ţ	1	return See 19 EAST FOURTH STREET		F		ng method	
<u> </u>	1	Specific City or flows state or country and ZIR + 4	 -	X	Accrual		specify)
-	7	instruc-			Acciden	[] O(c. /	opcony,
L	Applic	cation periodig		· E	27		
			t applicable to sect			anons	₽
_			ı yıcuğ retom för a 		ios" ²	∐ té2	ΓΛ M
			enter no of affilia			п.	
J	_		affiliates included?			∐ Yes	Пи
_			att alist See ins	tr)			
K	_		separate return (ed b	y an		
	\$25,00	Of The organization need not file a return with the IRS, but if the organization organization organization	ation covered by a	grou	ip ruling?	Yes	N
	receive	ed a Form 990 Package in the mail, it should file a return without financial data I Enter	4-digit GEN	<u> </u>			
	Some:	states require a complete return M Check	. 🕨 📙 if the	orga	anızatıon ı	s not requir	ed
<u>L</u>	Gross	receipts Add lines 6b, 8b, 9b and 10b to line 12 ▶ 3,383,961 to atta	ch Sch B (Forn	n 99	0, 990-EZ	<u>r, or 990-PF</u>)
F	art I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (Se	e page 17 o	f th	e instru	ctions)	
	1	Contributions, gifts, grants, and similar amounts received		[
	l a	Direct public support 1a	508,185	Ţ			
.	b	Indirect public support 1b		1	1		
Ś	c		738,149	1	- 1		
J	d		3,593)	1	a l	2,246	334
-	2	Program service revenue including government fees and contracts (from Part VII line 93)	,	2			541
_	3	Membership dues and assessments		3			
7	4	Interest on savings and temporary cash investments		4		23	940
5	5	Dividends and interest from securities		5	+		952
	6a	_		尸			, 332
	J .	Gross rents 6a 6a		1			
	b	Less rental expenses 6b	{ .				
_	c	Net rental income or (loss) (subtract line 6b from line 6a)		1 60			
Re	7	Other investment income (describe		7	——		
٧	8a		Other	ł	1		
e n	ļ	than inventory 568,236 8a		ļ			
u e	b	Less cost or other basis and sales expenses 618,131 8b		1	ĺ		
•	C	Gain or (loss) (attach schedule)49,895 8c		ļ	-]		
	d	Net gain or (loss) (combine line 8c columns (A) and (B)) SEE STMT 1		80	<u>d </u>	<u>-49</u>	<u>895</u>
	9	Special events and activities (attach schedule)		l	1		
	a	Gross revenue (not including \$ of		1	1		
	ľ	contributions reported on line 1a) 9a		1	ł		
	ь	Less direct expenses other than fundraising expenses9b		}			
	[c	Net income or (loss) from special events (subtract line 9b from line 9a)		90	<u> </u>		
	10a	Gross sales of inventory, less returns and allowances		[_			
	Ь	Less cost of goods sold					
	} c	Gross profit or (loss) from sales of inventory (att. sch.) (subtract line 10b from line 10a)		100	c l		
	11	Other revenue (from Part VII, line 103)		11	1	414	958
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)		12		2,765	
E	13	Program services (from line 44, column (B))		1:		2,385	
Expe	14	Management and general (from line 44, column (C))		14		279	
é	15	Fundraising (from line 44, column (D))	1:				
n s	16	Payments to affiliates (attach schedule)		10			
ė	17	Total expenses (add lines 16 and 44, column (A))		17 17		2,664	924
Ā	18	Excess or (deficit) for the year (subtract line 17 from line 12		18	$\overline{}$		906
N S	19	Not appete or fixed belonged at beginning of year from line 13 and 36 MD The		15		4,661	
e t	20	Other changes in net assets or fund balances (attach explanation)	STMT 2	20		-115	
t	21		JIMI Z				
	4	Net assets or fund balances at end of year (combine lines 18 19, and 20)		2	' L	4,647	UOZ

DAA

Ì	4		nplete column (A) Columns		•	
	Functional Expenses and section 4947(a)(1) noi	nexempt chantable trusts b	ut optional for others (See	page 21 of the instructions	:)
	Do not include amounts reported on line		(A) Total	(B) Program	(C) Management	(D) Fundraising
_	6b, 8b, 9b, 10b, or 16 of Part I		(7) 1001	services	and general	
,	Grants and allocations (attach schedule)					
	(cash \$)	22		L		
	Specific assistance to individuals	23		L _		
	Benefits paid to or for members	24				
	Compensation of officers, directors, etc	25				
	Other salaries and wages	26	1,428,478	1,208,342	220,136	
	Pension plan contributions	27	30,465	25,272	5,193	
	Other employee benefits	28	81,875		5,714	
	Payroll taxes	29	108,770	91,930	16,840	
	Professional fundraising fees	30	0.400		0.400	
	Accounting fees	31	9,488		9,488	-
	Legal fees	32	77 060	63 570	7 607	
	Supplies	33	71,269	63,572	7,697	
	Telephone	34	12,190	12,190		
	Postage and shipping	35	23,253	23,253		
	Occupancy	36	17,855	<u>17,855</u>		
	Equipment rental and maintenance	37	52,337	<u>52,337</u>		
	Printing and publications	38	9,387	9,387		
	Travel	39	15,687	15,687		
	Conferences conventions, and meetings	40	14,290	14 200		
	Interest	41	127,687	14,290 127,687		
	Depreciation, depletion etc (attach schedule)		121,001	121,001		
	Other expenses not covered above (itemize) a SEE STATEMENT 3	43a	661,893	647,906	13,987	
b		43b	001,033	047,300	13,30/	
0		43c 43d				 -
d		43u				
44	Total functional expenses (add lines 22 - 43) Organizations	426				
_	completing columns (B)-(D), carry these totals to lines 13-15	44	2 664 924	2,385,869	279,055	0
۔۔۔ بول	int Costs Check ▶ ☐ If you are following SOP 98-2		27001,222	_ 2/303/003	2/2/033	<u> </u>
	e any joint costs from a combined educational campaign and	l fundr	aising solicitation repoi	ted in (B) Program se	rvices?	Yes X No
	res * enter (i) the aggregate amount of these joint costs \$		=	amount allocated to Prog		
	the amount allocated to Management and general \$			e amount allocated to Fund		
	Part III Statement of Program Service Acco	lamo				
	nat is the organization's primary exempt purpose?		10.00.00	<u></u>	7	Program Service
	PUBLIC LIBRARY				ļ	Expenses (Required for 501(c)(3) &
	organizations must describe their exempt purpose achievem clients served, publications issued, etc. Discuss achievemen	nents i	n a clear and concise j	nanner State the num	iber	(4) orgs & 4947(a)(1)
ot (ora	clients served, publications issued, etc. Discuss achievemen lanizations and 4947(a)(1) nonexempt charitable trusts must	its thai Laiso e	t are not measurable (enter the amount of ora	Section 501(c)(3) and ints and allocations to	(4) others)	trusts but optional for others)
a						
	RESOURCES					
			(Grants and all	ocations \$,]	2,385,869
b						
			(Grants and all	ocations \$		
c						
			(Grants and al	ocations \$]	
d			-			
			(Grants and all	ocations \$		
	Other program services (attach schedule)		(Grants and all			
	Total of Program Service Expenses (should equal line 44,	colun	nn (B), Program service	es)	<u></u> <u>▶</u>	2,385,869
DA	4					Form 990 (2002)

Part IV Balance Sheets (See page 24 of the instructions)

P	art IV	Balance Sheets (See page 24 of the in	struc	lions)					
	Note	Where required, attached schedules and amounts with	nn the	description	(A)		(B)		
_		column should be for end-of-year amounts only	Beginning of year		End of year				
	45	Cash - non-interest-bearing		<u> </u>	90,374		103,778		
	46	Savings and temporary cash investments	<u>560,748</u>	46	825,073				
			,	, , , , ,		ļ	}		
	47a	Accounts receivable	47a	48,816		ĺ	4.00.0		
	p	Less allowance for doubtful accounts	47b	 	25,136	47c	48,816		
		-		1 24 222	•				
	48a	Pledges receivable	48a	84,099	74 963	40	94 000		
	49	Less allowance for doubtful accounts Grants receivable	48b	┺━━━━━	74,863 94,988		84,099 18,381		
	50		j	23,300	49	10,301			
A	50	(attach schedule)	cervables from officers, directors, trustees, and key employees						
5	51a					50			
5		schedule)	51a	ì					
θ	b	Less allowance for doubtful accounts	51b			51c	}		
ŧ	52	Inventones for sale or use				52			
s	53	Prepaid expenses and deferred charges		[21,036	53	25,863		
	54	Investments-securities SEE STMT	4	► Cost X FMV	794,218	54	574,615		
	55a	Investments-land, buildings, and							
		equipment basis	55a				{		
	b	Less accumulated depreciation (attach	}	İ					
		schedule)	55b	L		55c	 		
	56	Investments-other (attach schedule)	ſ			56	ļ		
	57a	Land, buildings, and equipment basis	57a	4,307,730	1		ĺ		
(ь	Less accumulated depreciation (attach	{	020 606	2 226 615		2 275 224		
		schedule) SEE STMT 5	57b	932,696	3,336,615		3,375,034		
)	58	Other assets (describe SEE STMT 6	-)	}	808	58	829		
	59	Total assets (add lines 45 through 58) (must equal line	241		4,998,786	59	5,056,488		
-	60	Accounts payable and accrued expenses	5 14)		98,397	60	209,147		
L	61	Grants payable		F		61	205/11/		
a	62	Deferred revenue		-		62			
ь	63	Loans from officers, directors, trustees, and key emplo	yees (attach					
;		schedule)				63			
i	64a	Tax-exempt bond liabilities (attach schedule)				64a			
t	ь	Mortgages and other notes payable (attach schedule)	S	EE WORKSHEET	190,000	64b	157,020		
J e	65	Other liabilities (describe)		48,914	65	43,259		
s									
	66	Total liabilities (add lines 60 through 65)	•		337,311	66	409,426		
	Orga		and co	omplete lines					
		67 through 69 and lines 73 and 74			2 044 020		2 600 000		
N F	67	Unrestricted		-	3,844,832	ı	3,608,890		
t n	68	Temporarily restricted		-	495,643 321,000	68 69	717,172 321,000		
d	69 Oras	Permanently restricted nizations that do not follow SFAS 117, check here	▶ [and	321,000	- 69	321,000		
A s B	Oiga	complete lines 70 through 74)	Ì				
s a	70	Capital stock, trust principal, or current funds	}		70				
еl	71	Paid-in or capital surplus or land, building, and equipm	nd -	-	71				
t a s n	72	Retained earnings, endowment accumulated income,		72					
c	73	Total net assets or fund balances (add lines 67 throu							
Оę		70 through 72,	<u> </u>		Ì		}		
Гs		column (A) must equal line 19, column (B) must equal	line 2	1)	4,661,475	73	4,647,062		
	74	Total liabilities and net assets / fund balances (add l			4,998,786		5,056,488		
Fo	rm 990) is available for public inspection and, for some people					 		

Form 990 is available for public inspection and, for some people serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

orm 990 (2002)	JAMES V. BROWN LIB	RARY	24-	0799180		Page 4
Part IV-A	Reconciliation of Revenue po	er Audited	Part IV-B	Reconciliation of	Expenses per	Audited
7	Financial Statements with Re	evenue per	l .	Financial Stateme	nts with Expe	lises her
	Return (See page 26 of the in	structions)		Return		
	nue gains, & other support		1	es and losses per		,664,924
•	financial statements	2,650,511		ual statements uded on line a but not		7-0-1
Amounts in	ncluded on line a but not on		-			
line 12, Fo			on line 17, Fo (1) Donated servi			
(1) Net unreal	ized gains on		of facilities	\$		
investment			(2) Pnor year adj	ustments		
• •	ervices and use		reported on lin		1 1	
of facilities			Form 990	\$		
(3) Recoveries	i i		(3) Losses report	led on line 20,		
year grant			Form 990	<u>\$</u>		
(4) Other (spe	ecity)		(4) Other (specify	y)		
	. !!					
uoms bb∆	ints on lines (1) through (4) b			<u>\$</u>	<u> </u>	
7100 011100			1	on lines (1) through (4)	b	664 924
Line a min	us line b	2,650,51	1 c Line a minus		► c 2	<u>,664,924</u>
_	ncluded on line 12,		·	uded on line 17,	1 1	
Form 990	but not on line a		1	t not on line a		
(1) Investmen	nt expenses		(1) Investment e			
not includ	ed on line 6b		not included	on line 6D,		
Form 990	<u>\$</u>		Form 990	3		
(2) Other (spe			(2) Other (specif	у)		
	SEE STMT 8			\$		
	\$ 115,319	115,31	Add amounts	s on lines (1) and (2)	▶ d	
	unts on lines (1) and (2)	111111		ses per line 17 Form 990	>	
	enue per line 12, Form 990	2,765,83	(line c plus li	ne d)	▶ e	2,664,92 <u>4</u>
(line c plu	List of Officers, Directors, Trus	tees, and Key	Employees (List e	each one even if not com	pensated, see pag	ge 26 of
Pariv	the instructions)	_	<u> </u>			
 -			(B) Title and average hours per week devoted	(C) Compensation to (If not paid, enter	(D) Contrib to employee benefit plans & deferred	(E) Expense account and other
	(A) Name and address		position	-0)	compensation _	allowances
JANICE	TRAPP SHEAFFER		DIRECTOR		4 507	0
	MSPORT, PA 17701		40	73,142	4,587	
JOHN C			PRESIDENT		0	o
WILLIA	MSPORT, PA 17701		0			<u>_</u>
HAROLD	HERSHBERGER		VICE PRES	0	l o	l o
<u> WILLIA</u>	MSPORT, PA 17701	 +	0 TREASURER			
WILLIA	M NICHOLS		O TREASURER	0	0	0
<u>WILLIA</u>	MSPORT, PA 17701	- _+	SECRETARY			
GRACE	PAGE		0	0	0	0
WILLIA	MSPORT, PA 17701		TRUSTEE			
KENNET	H COOPER		0	0	0	0
	MSPORT, PA 17701		TRUSTEE			
FREDA	KISBERG MSPORT, PA 17701	ì	0	0	<u></u>	0
MIDDIA	IA LOWERY		TRUSTEE			
WTI.T.TA	MSPORT, PA 17701		0		<u></u>	<u> </u>
MATTITE A	MITCHELL		TRUSTEE	_		, ا
	MSPORT, PA 17701		0		<u> </u>	<u> c</u>
WTT.T.TA			marid Mari	1	1	1
WILLIA	MICHAEL RAFFERTY		TRUSTEE	_		م ا
WILLIA MAYOR	MICHAEL RAFFERTY MSPORT, PA 17701 officer director, trustee, or key employee		0 _		·———	<u> </u>

If "Yes," attach schedule-see page 26 of the instructions

If Yes, attach a contormed copy of the changes Did the organization have unrelated business gross inc of \$1,000 or more during the year covered by this return? If Yes, has if filled a tax return on Form \$90-1 for this year? Was there a liquidation, dissolution, termination, or substantial contraction during the year? If Yes, attach a statement to statement Bib is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodes, trustees, officers etc., to any other exempt or nonexempt organization? If Yes a enter the name of the organization of the name of the unit of the organization of the properties of the properties of the organization of the properties of the propertie	,— P	age s
seath activity Were any changes made in the organizing or governing documents but not reported to the IRS? Were any changes made in the organizing or governing documents but not reported to the IRS? Were any changes made in the organizing or governing documents but not reported to the IRS? If Yees, "attach a controlmed copy of the changes If Yees," attach a controlmed copy of the changes If Yees, has it field a tax return on Form 990-1 for this year? Yes there a liquidation, dissolution, termination, or substantial contraction during the year? If Yees," attach a statement Telescope of the organization reliable (other than by association with a statement or nembershy, governing bodies, fusities, officers, etc. to any other exempt or nonexempt organization? There's "enter the name of the organization ➤ LYCOMING COUNTY LIBRARY SYSTEM and check whether it is \$\frac{1}{2} there is only the organization of the services or the use of materials, equipment or facilities at no charge or at substantialy less than fair retail value. If Yes, "you may indicate the value of these terms here D ono include this amount as revenue in Part I or as an expense in Part I or as an expense in Part II (See instructions in Part II). If Yes, "do the organization comply with the disclosure requirements for returns and exemption applications? If Yes," do the organization micrule with every solicitation an express statement that such controlutions or gifts that were not tax deductible? If Yes," do the organization micrule with every solicitation an express statement that such controlutions or gifts that were not tax deductible. If Yes, "do a shape the part I (See instructions or gifts that were not tax desuctible." If Yes was answered to either 85s or 85s, do not complete 85 through 85h below unless the organization received a warre for proxy tax words. If Yes	Yes	No
177 Wee any changes made in the organization or provening documents but not reported to the IRS?		
If 'Yes,' attach a contramed copy of the changes Table T	 	X
Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		X
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, fusitieses, officers etc, to any other exempt or nonexempt organization? If I was not the organization of the organization of the organization in the organization related the organization related the organization related the organization related services or the use of materials, equipment or facilities at no charge or at substantially less than fair rental value? 10 bit the organization comply with the substantially esset than fair rental value? 22 bit "Yes," you may indicate the value of these items here Do not include this amount as revenue in Paril or as an expense in Paril I (See mistructions in Paril II) 30 bit the organization comply with the disclosure requirements for returns and exemption applications? 31 bit the organization comply with the disclosure requirements retaining to quip or quo contributions? 32 bit the organization comply with the disclosure requirements retaining to quip or quo contributions? 33 bit the organization comble with every solicitation an express statement that such contributions or gifts were not tax deductible? 34 bit the organization and contributions or gifts that were not tax deductible? 35 bit the organization make only in-house blobbying expenditures of \$2,000 or less? 36 bit the organization make only in-house blobbying expenditures of \$2,000 or less? 37 bit is expenditured to establish the propriet of \$2,000 or less? 38 bit is expenditured to establish the propriet of \$2,000 or less? 38 bit is expenditured to establish the propriet is \$2,000 or less? 39 bit is expenditured to establish the propriet is \$2,000 or less? 40 bit is expenditured to establi	LJ	X
statement is the organization related (other than by association with a statewide or nationwide organization?) is the organization related (other than by association with a statewide or nationwide organization?) is the organization related (other than by association with a statewide or nationwide organization?) if Yes "enter the name of the organization		
Book Sink organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, frustees, officers et., is any other exempt or nonexempt organization? If "Yes" enter the name of the organization ► LYCOMING COUNTY LIBRARY SYSTEM and check whether it is Membership		
membership, governing bodies, itusites, officers etc., to any other exempt or nonexempt organization? b fi-Yes - enter the name of the organization		X
b if "Yes" enter the name of the organization LYCOMING COUNTY LIBRARY SYSTEM and check whether it is exempt or invitexempt and check it is exempt or invitexempt and check whether it is exempt or invitexempt and check whether it is exempt or invitexempt and check the program change and check the program change and check the program check of the check of the program check of the check of		
and check whether it is several to invince in invince members and check whether it is several invince in in in	X	<u> </u>
1316 Enter direct or indirect political expenditures. See line 81 in str b Did the organization file Form 1120-PDL for this year? 1320 Did the organization receive donated services or the use of materials, equipment or facilities at no charge or at substantially less than fair rental value? 1321 If Yes, You may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III) 1322 Did the organization comply with the public inspection requirements for returns and exemption applications? 1332 Did the organization comply with the public inspection requirements for returns and exemption applications? 1333 Did the organization comply with the disclosure requirements relating to quid pro quo contributions? 1334 Did the organization solicit any contributions or grifts that were not tax deductible? 1334 Did the organization comply with the disclosure requirements relating to quid pro quo contributions? 1335 Did the organization collect with every solicitation an express statement that such contributions or grifts were not tax deductible? 1336 Did the organization as developed the every solicitation and express statement that such contributions or grifts were not tax deductible? 1337 Did the organization make only in-house tobbying expenditures of \$2,000 or less? 1348 Did the organization make only in-house tobbying expenditures of \$2,000 or less? 1359 Did the organization make only in-house tobbying expenditures of \$2,000 or less? 1360 Did the organization make only in-house tobbying expenditures of \$2,000 or less? 1370 Did the organization enders as a separate from the members 2380 Did the organization and an advantage of \$5,000 or less? 2380 Did the organization enders and several did the appropriation of the section 152 Did to the section 152 Did to the organization		
b Did the organization file Form 1128-POL for this year? Did the organization receive donaled services or the use of materials, equipment or facilities at no charge or at substantially less than fair rental value? If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part I I (See in Section 1971). Did the organization comply with the public inspection requirements for returns and exemption applications? In Part I or as an expense in Part II (See in Part II). Did the organization comply with the disclosure requirements for returns and exemption applications? N/A 335 Did the organization comply with the disclosure requirements for returns and exemption applications? N/A 345 Did the organization of any contributions or grifts that were not tax deductible? N/A 346 If "Yes," did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible? N/A 345 Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes as answered to either 83 or 85, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year. Dues assessments, and similar amounts from members Section 162(e) lobbying and political expenditures (line 85d less 85e) Does the organization elect to pay the section 6033(e) 13/A) dues notices Agregate nondeductible amount of section 6033(e) 13/A or in the amount in 85f or its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures (line 85d less 85e) Does the organization elect to pay the section 6033(e) 13/A or in the amount in 85f or its reasonable estimates of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A 85h Solic(N/I) orga Enter a Initiation fees and capital contributions included on line 12 Gross income from other sources (Do not net amounts due or paid to other sources against amo		1
Did the organization receive donated services or the use of materials, equipment or facilities at no charge or at substantially less than fair rental value? If Yes, You may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III) Did the organization comply with the public inspection requirements for returns and exemption applications? N/A 33b. Did the organization solicit any contributions or grist shat were not tax deductible? If Yes, of the progranization include with every solicitation an express statement that such contributions or grists were not tax deductible? N/A 35b. Did the organization solicit any contributions or grist shat were not tax deductible? N/A 35b. Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A 35b. Did the organization and only in-house lobbying expenditures of \$2,000 or less? N/A 35b. Did the organization and only in-house lobbying expenditures of \$2,000 or less? N/A 35b. If Yes' was answered to either 83b or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year. Dues assessments, and similar amounts from members. S5c Section 162(e) lobbying and political expenditures (line 85d less 85e). Does the organization elect to pay the section 6033(e) tax on the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A 35h. S6d. S7c Solic(XY) orgs Enter a linitiation fees and capital contributions included on line 12 Solic(XY) orgs Enter a linitiation fees and capital contributions included on line 12 Solic(XY) orgs Enter a linitiation fees and capital contributions included on line 12 Solic(XY) orgs Enter a linitiation fees and capital expenditures for the following tax year? S7d Solic(XY) orgs Enter a Gross income from members or shareholders S8d Solic(XY) orgs Enter a Gross income from	i I	l
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b Gross receipts, included on line 12, for public use of club facilities 86b 87a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 8 At any time during the year did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3 if "Yes" complete Part IX 88 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 0 section 4912 0 section 4912 0 section 4955 0 section 4956 excess benefit transaction during the year under sections 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912 4955, and 4958 d Enter Amount of tax on line 895, above, reimbursed by the organization 10 List the states with which a copy of this return is filed NONE 10 Number of employees employed in the pay period that includes March 12 2002 (See instructions) 11 The books are in care of BUSINESS MANAGER Telephone no 570 - 326 2IP + 4 17701 - 6301		
501(c)(12) orgs Enter a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b 87b 87b 87b 87b 87b 87b 87	.	ĺ
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 8 At any time during the year did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes" complete Part IX 88 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 0 section 4912 0 section 4955 0 501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912 4955, and 4958 d Enter Amount of tax on line 89c, above, reimbursed by the organization List the states with which a copy of this return is filed NONE Number of employees employed in the pay period that includes March 12 2002 (See instructions) The books are in care of BUSINESS MANAGER Telephone no 570 - 326 ZIP + 4 17701 - 6301 Section 4947(a)(1) nonexempt chantable trusts filing Form 990 in lieu of Form 1041- Check here	ł	ł
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301 7701-2 and 301 7701-3? If "Yes " complete Part IX \$88 \$90 \$501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 \$501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction \$89b\$ C Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912 4955, and 4958 C Enter Amount of tax on line 89c, above, reimbursed by the organization List the states with which a copy of this return is filled ▶ NONE Number of employees employed in the pay period that includes March 12 2002 (See instructions) The books are in care of ▶ BUSINESS MANAGER Located at ▶ 19 EAST FOURTH STREET WILLIAMSPORT PA ZIP + 4 ▶ 17701 - 6301)	
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section 4911 O section 4912 O , section 4955 O b 501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912 4955, and 4958 d Enter Amount of tax on line 89c, above, reimbursed by the organization List the states with which a copy of this return is filed NONE Number of employees employed in the pay period that includes March 12 2002 (See instructions) The books are in care of BUSINESS MANAGER Located at 19 EAST FOURTH STREET WILLIAMSPORT PA Section 4947(a)(1) nonexempt chantable trusts filing Form 990 in lieu of Form 1041- Check here		
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The books are in care of ► BUSINESS MANAGER Located at ► 19 EAST FOURTH STREET WILLIAMSPORT PA Section 4947(a)(1) nonexempt chantable trusts filing Form 990 in lieu of Form 1041- Check here		
Located at ▶ 19 EAST FOURTH STREET WILLIAMSPORT PA ZIP+4 ▶ 17701-6301 Section 4947(a)(1) nonexempt chantable trusts filing Form 990 in lieu of Form 1041- Check here	82	
Section 4947(a)(1) nonexempt chantable trusts filing Form 990 in lieu of Form 1041- Check here	-05	36
.1 1		_
and enter the amount of tax-exempt interest received or account during the tax year	ļ	▶Į
	990	

Part VII	Analysis of Income-Pro	oducing Activities	<u> (See pa</u>	ge 31 of the u	nstruction	<u>s)</u>	
Note Enter	gross amounts unless otherwise		Unrelate	d business income	Exclud	led by sec 512 513 or 51	4 (E) Related or
indicated			(A) usinėss code	(B) Amount	(C) Exclusion	(D) Amount	exempt function
93 Program	n service revenue	Ľ	usiliess code	Athoun	code	- Anount	income
a <u>LIB</u>	RARY OPERATIONS						83,866
ь		_		<u> </u>			
						<u> </u>	
							<u></u>
e				<u></u>			<u> </u>
f Medicar	e/Medicaid payments						
g Fees an	d contracts from government agen	icies					18,675
94 Member	rship dues and assessments						<u> </u>
95 Interest	Interest on savings and temporary cash investments				14		
96 Dividend	Dividends and interest from securities				14	27,95	2
97 Net rent	al income or (loss) from real estate	•					
a debt-fina	anced property						
b not debt	t-financed property					<u> </u>	
98 Net rent	al income or (loss) from personal p	property				J	
99 Other in	vestment income						
100 Gain or	(loss) from sales of assets other th	nan inventory			18	-49,89	5
101 Net inco	ome or (loss) from special events				_ _		
102 Gross p	rofit or (loss) from sales of inventor	ry [
103 Other re			·				
ь SEE	STATEMENT 9					414,95	В
			_			T	
θ							
104 Subtotal	(add columns (B), (D), and (E))				0	416,95	102,541
	dd line 104 columns (B), (D), and	(E))			,*	<u> </u>	519,496
	5 plus line 1d, Part I, should equal		Part I				
Part VIII	Relationship of Activiti			of Exempt F	Purposes	(See page 32 of	he instructions)
Line No	Explain how each activity for whi						
•	of the organization's exempt pur						
93A	PROVIDED PUBLIC					ER LIBRARY	
	RESOURCES						
93G	DISBURSEMENT AGE	ENT FOR PEND	ISYLVAI	VIA STATI	E LIBR	ARY SYSTEM	
			<u></u>				
Part IX	Information Regarding T	axable Subsidiar	ies and D	isregarded E	Entities (S	See page 32 of the	instructions)
	(A)	(B)		(C)		(D)	(E)
Name, add	dress and EIN of corporation, ship or disregarded entity	Percentage of ownership interest	\ \ \ \	lature of activities	:5	Total income	End-of-year assets
	I/A		%				<u> </u>
			%				
			%				
			%				
Part X	Information Regarding T			Personal Ber	nefit Con	tracts (See page 33	of the instructions)
	he organization during the year receive :						Yes X No
	the organization, during the year p						Yes X No
	es" to (b), file Form 8870 and Form			on a perconal b	onone contac		
11010 II I	Under penalties of perjury 1 declare that			rcomnanymo sched	dules and state	ments, and to the best of r	ny knowledge
	and belief it is true correct and comp						
							30103
						Date	
			\sim	A 14 A A		Date	
			- '	anager		 _	

SCHEDULE A '

(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust Supplementary Information-(See separate instructions)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

2002

Total number of other employees paid over	Name of the or	_			Employer Identifi	cation number
Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 1 of the instructions List each one If there are none, enter "None") (a) Name and address of each employee pad more than \$50,000 (b) Tale and average hours per week, devoted to position per week. But TERACY MGR allowences and the per medical compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instruction that List each one (whether individuals or firms) If there are none, enter "None") (a) Name and address of each independent contractor pad more than \$50,000 (b) Type of service (c) Compensation (d) Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instruction of whether individuals or firms) If there are none, enter "None") (a) Name and address of each independent contractor pad more than \$50,000 (b) Type of service (c) Compensation NONE			mv		070010	0
(See page 1 of the instructions List each one if there are none, enter "None") (a) Name and address of each employee paid more than \$50,000 (b) Title and awarea bours to the \$100 (c) Compensation and employees bein plans & deferred compensation and other employees bein plans & deferred compensation and employees bein plans & def				han Officers Di		
(a) Name and address of each employee paid more than \$50 000 (b) Title and average hours per week devoted to position to the members of both and address of each independent contractor paid more than \$50 000 (c) Compensation (c)	Fairi					stees
Total number of other employees paid over S50 000 Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instr. List each one (whether individuals or firms) If there are none, enter "None") (a) Name and address of each independent contractor paid more than \$ 50 000 (b) Type of service (c) Compensation NONE	(2	Name and address of each employee paid more	(b) Title and average hours		(d) Contributions to employee ben plans &	account and other
Part # Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instr. List each one (whether individuals or firms). If there are none, enter "None.") (a) Name and address of each independent contractor paid more than \$ 50 000. (b) Type of service. (c) Compensation. NONE Total number of others receiving over \$50,000 for.				61,318	1,404	c
Part # Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instr. List each one (whether individuals or firms). If there are none, enter "None.") (a) Name and address of each independent contractor paid more than \$ 50 000. (b) Type of service. (c) Compensation. NONE Total number of others receiving over \$50,000 for.						
(See page 2 of the instr List each one (whether individuals or firms) If there are none, enter "None") (a) Name and address of each independent contractor paid more than \$ 50 000 (b) Type of service (c) Compensation NONE Total number of others receiving over \$50,000 for	Total number \$50 000					
NONE Total number of others receiving over \$50,000 for	Part II	Compensation of the Five Highest Pai (See page 2 of the instr List each one (d Independent Contra whether individuals or	ctors for Profes firms) If there ar	sional Services e none, enter "No	one ")
Total number of others receiving over \$50,000 for		(a) Name and address of each independent contractor paid	more than \$ 50 000	(b) Type	of service	(c) Compensation
	NONE					
						-
						
professional services	Total number	of others receiving over \$50,000 for				

Sch-	edule	e A (Form 990 or 990-EZ) 2002	<u>80</u>		age 2
P	art i	Statements About Activities (See page 2 of the instructions)		Yes	No
1	att or	inning the year has the organization attempted to influence national, state, or local legislation, including any tempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid incurred in connection with the lobbying activities Must equal amount on line 38,	1		х
	Or org	art VI-A, or line I of Part VI-B) ganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other ganizations checking "Yes " must complete Part VI-B AND attach a statement giving a detailed description of elobbying activities			
2	sul wit ow	Iring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any bstantial contributors trustees, directors, officers, creators, key employees, or members of their families or the any taxable organization with which any such person is affiliated as an officer, director, trustee, majority or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the insactions.)			
a		ile, exchange, or leasing of property?	2a	<u> </u>	x
b	Le	nding of money or other extension of credit?	2b		x
С	Fu	rnishing of goods, services, or facilities?	2c	_	х
d	Pa	yment of compensation (or payment or reimbursement of exp. if more than \$1,000)?	2d		х
e	Tra	ansfer of any part of its income or assets?	2e	_	x
3		es the organization make grants for scholarships, fellowships_student loans, etc ? (See Note below.) you have a section 403(b) annuity plan for your employees?	3 4	x	x
Note	Att	tach a statement to explain how the organization determines that individuals or organizations receiving grants from it in furtherance of its charitable programs "qualify" to receive payments		1	
	et l		•/		
	orga	inization is not a private foundation because it is (Please check only ONE applicable box)	-		
5 6	Н	A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i) A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)			
7		A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii)			
8	Н	A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v)			
9	Ц	A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name,	, city,		
10	П	and state An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)((1\/\&\/\ _{\\} \)		
	ш	(Also complete the Support Schedule in Part IV-A)	(1)(\(\circ\)(1\(\frac{1}{2}\)		
11a	X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)			
11b	П	A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)			
12	Ш	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross			
		receipts from activities related to its chantable, etc., functions-subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acq by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)			
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organization described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5) or (6), if they meet the test of section 509(a)(2) (See	ns		
		section 509(a)(3))			
		Provide the following information about the supported organizations (See page 5 of the instructions)	(b) Line r	umbe	
		(a) Name(s) of supported organization(s)	from a		
			_		_
14	П	An organization organized and operated to test for nublic safety. Section 500(a)(4). (See page 5 of the instructions.)			

	You may use the worksheet in the instru									
Caler	ndar year (or fiscal year beginning in)	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total				
15	Gifts, grants, and contributions									
	received (Do not include unusual									
	grants See line 28)	2,086,907	1,743,468	1,306,673	1,267,119	6,404,167				
16	Membership fees received									
17	Gross receipts from admissions merchandise									
	sold or services performed or furnishing of									
	facilities in any activity that is related to	202 500	200 077	00 000	00 711	077 000				
	the organization's charitable etc purpose	383,508	300,877	99,992	88,711	873,088				
18	Gross and from anti-dividends amounts received from pyrnt on securities									
	loans (section 512(a)(5)), rents, royalties, &					I				
	unrelated bush taxable inc (less									
	sec 511 taxes) from businesses acquired	52,007	68,529	62,338	62,570	245,444				
40	by the organization after June 30 1975 Net income from unrelated business	52,007	08,323	02,338	02,570	243,444				
19	activities not included in line 18			ı.						
 20	Tax revn levied for the organization's ben									
20	J.									
21	& either paid to it or expended on its behalf The value of serv or fact furnished to the									
21	org by a governmental unit without charge			1						
	Do not include the value of servior factigen- erally furnished to the public without charge									
22	Other income Attach a schedule Do not									
	include gain or (loss) from sale of cap assets			[
23	Total of lines 15 through 22_	2,522,422	2,112,874	1,469,003	1,418,400	7,522,699				
24	Line 23 minus line 17	2,138,914	1,811,997	1,369,011	1,329,689	6,649,611				
25 Enter 1% of line 23 25, 224 21, 129 14, 690					14,184					
26	Organizations described on lines 10 or	11 a Enter 2% (of amount in column (e	e), line 24	▶ 26a	132,992				
					£ 1					
b	Prepare a list for your records to show the	e name of and amount	t contributed by each p	erson (other than a						
	governmental unit or publicly supported of	organization) whose to	tal gifts for 1998 throug	gh 2001 exceeded the						
	amount shown in line 26a. Do not file the	=		hese excess amounts	▶ 26b	19,118				
C	Total support for section 509(a)(1) test				▶ 26c	6,649,611				
d	Add Amounts from column (e) for lines	18245								
		22	26b	19,118	▶ <u>26d</u>	264,562				
	Public support (line 26c minus line 26d to	•			▶ 26e	6,385,049				
	Public support percentage (line 26e (nu				▶ 26f	96.0214%				
27	Organizations described on line 12			1 17 that were received	•					
	person " prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person "									
	Do not file this list with your return En	er the sum of such arr	iounts for each year			N/A				
	(2001) (2	2001	(1000)		(1998)					
L	For any amount included in line 17 that w	000) van ranguad from each	(1999) Darson (other than "d		• •	ocords to				
ь	show the name of and amount received		•		•					
	(Include in the list organizations describe	•	_	• •						
	the difference between the amount receive	-		•	-					
	amounts) for each year	red and the larger and	ount described in (1) or	(Z), Citter the Sum Of t	nese dinerences (are t	N/A				
	•	000)	(1999)		(1998)	11/ 21				
С	Add Amounts from column (e) for lines	15			(1000)					
·	17				▶ 27c					
d	Add Line 27a total	20 and line 27			▶ 27d					
e	Public support (line 27c total minus line 2				▶ 27e					
f	Total support for section 509(a)(2) test E		3. column (e)	▶ 27f _		·				
g	Public support percentage (line 27e (nu					%				
_	Investment income percentage (line 18,	•	= -		▶ 27h	<u> </u>				
28	Unusual Grants For an organization des									
	prepare a list for your records to show, for		•							
	description of the nature of the grant Do									

Part V Private School Questionnaire (See page 7 of the instructions) (To be completed ONLY by schools that checked the box on line 6 in Part IV) N/A Yes Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, No other governing instrument, or in a resolution of its governing body? 29 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures catalogues and other written communications with the public dealing with student admissions, programs, and scholarships? 30 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? 31 If "Yes" please describe if "No," please explain (If you need more space attach a separate statement) Does the organization maintain the following a Records indicating the racial composition of the student body, faculty, and administrative staff? 32a b Records documenting that scholarships and other financial assistance are awarded on a radially nondiscriminatory 32b c Copies of all catalogues, brochures, announcements and other written communications to the public dealing with student admissions, programs, and scholarships? 32c 32d d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) Does the organization discriminate by race in any way with respect to Students' rights or privileges? 33a Admissions policies? 33b c Employment of faculty or administrative staff? 33c d Scholarships or other financial assistance? 33d Educational policies? 33e Use of facilities? g Athletic programs? 33g h Other extracurricular activities? 33h If you answered "Yes" to any of the above please explain (If you need more space, attach a separate statement) Does the organization receive any financial aid or assistance from a governmental agency? 34a b Has the organization's right to such aid ever been revoked or suspended? 34Ь If you answered "Yes" to either 34a or b, please explain using an attached statement

Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev

Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation

Schedule A (Form 990 or 990-EZ) 2002		ROWN LIBRA			<u>24</u> -0799	180 Page 5
					of the instructions)	
(To be completed	ONLY by an elig	<u>ible organization t</u>				<u> </u>
Check > a If the organization belo	ngs to an affiliated gre	oup Check	<u>▶ b if y</u>	you ch	ecked "a" and "limited cor	trol* provisions apply
Limits on	Lobbying Expe	nditures			(a) Affiliated group totals	(b) To be completed for ALL electing
(The term_expendit	ures" means amounts	paid or incurred)			· · · · · · · · · · · · · · · · · · ·	organizations
36 Total lobbying expenditures to influence	e public opinion (grass	sroots lobbying)	ļ	36		
37 Total lobbying expenditures to influence	e a legislative body (d	irect lobbying)	ļ	37		
38 Total lobbying expenditures (add lines	36 and 37)			38		
39 Other exempt purpose expenditures				39		
40 Total exempt purpose expenditures (ad				40		
41 Lobbying nontaxable amount Enter the		=		•		
If the amount on line 40 Is-		ontaxable amount is-	\neg			
Not over \$500,000	20% of the amo		. 6500 000	j		
Over \$500 000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,00	• •	5% of the excess over 0% of the excess over	11	. 44		
Over \$1,000,000 but not over \$1,000,0			11			
Over \$17,000,000	\$1,000 000 \$1,000 000	% of the excess over	1,300,000			
42 Grassroots nontaxable amount (enter 2	- •		7	42		
43 Subtract line 42 from line 36 Enter -0-	•	line 36	Ì	43		
44 Subtract line 41 from line 38 Enter -0-			ļ	44		
Caution If there is an amount on either	line 43 or line 44, yo	u must file Form 4720				
		ging Period Und		501(h)	
(Some organizations	that made a section 5	501(h) election do not	have to comp	olete al	I of the five columns below	v
See the ins	tructions for lines 45	through 50 on page 1	of the instru	ctions)	
		l obbying Evi	senditures D	uring	4-Year Averaging Period	
					T	
Calendar year (or	(a)	(b)	(c)		(d)	(e)
fiscal year beginning in)	2002	2001	200	10	1999	Total_
45 1 abbune acctionable account						
45 Lobbying nontaxable amount						
46 Lobbying ceiling amount (150% of			<u>}</u>		}	
line 45(e))						
47 Total lobbying expenditures						
48. Con contain a standard contains						
48 Grassroots nontaxable amount						
49 Grassroots ceiling amount (150% of line 48(e))					•	
e 40(e))	<u> </u>		<u></u>			
50 Grassroots lobbying expenditures		ls				
Part VI-B Lobbying Activity	by Nonelecting	Public Charities			 _	
• •	•			VI-A)	(See page 11 of the	instr)
During the year did the organization attempt						
attempt to influence public opinion on a legi	slative matter or refer	endum, through the us	se of		Yes No	Amount
a Volunteers					X_	
b Paid staff or management (include co	mpensation in expens	ses reported on lines o	through h)		X	
c Media advertisements					X	
d Mailings to members, legislators, or the distribution of the	•				<u> </u>	
e Publications, or published or broadcas					X	
f Grants to other organizations for lobb	• •				X	
g Direct contact with legislators, their st		=	-		X	
h Rallies, demonstrations, seminars, co		lectures, or any other	means		X	
i Total lobbying expenditures (add lines		المناول والمناول والم	-4 sh - 1-11			
If "Yes" to any of the above, also atta	on a statement giving	a detailed description	ot the lobbyii	ng acti	viues	000 000 E7\ 0002

Part VII	Information Regarding Transfers	To and Transactions a	nd Relationships	With Noncharitable
	Exempt Organizations (See page	12 of the instructions)		

	_		Exempt Organiza	ations (Se	e page 12 of the instruction	13 <i> </i>		_	
51						with any other organization described in section			
	501(0) of the	e Code (other than sec	tion 501(c)(3	3) organizations) or in section 527,	relating to political organizations?			Π
а	Trans	ifers fro	om the reporting organ	ization to a	nonchantable exempt organization	of		Yes	No
	(i)	Cash					51a(l)	├	X
	(11)	-	assets				a(li)	├	_ <u>x</u> _
b	Other						l	ł	.
	(i)				chantable exempt organization		b(i)	├	X_
	(11)				e exempt organization		b(ii)	 	X
	(iii)		l of facilities, equipmen		ssets		b(III)		X
	(iv)		oursement arrangemer	าเร			b(Iv)	 	X
	(v)		or loan guarantees		- for decision askertations		D(V)	\vdash	X
	(VI)				or fundraising solicitations		b(vi)	_	X
		-		-	ther assets, or paid employees	on (h) about district a place the few modules value a		Ь	
a			-			mn (b) should always show the fair market value of	i uie		
						zation received less than fair market value in any			
		acuon o		it snow in co	olumn (d) the value of the goods, o				
	(a)		(b)	Nama	(C)	(d) Description of transfers transactions and sharing	agrangem	onte	
N	Line no)	Amount involved	Name o	nonchantable exempt organization	Description of transfers transactions and sharing	arrangen	ÇIKS	
14	<u>/ ਨ. </u>					· - · · · · · · · · · · · · · · · · · ·			
						<u></u>	_		
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					<u> </u>				
				<u> </u>					
						<u> </u>			
2a		-	-	-	d with, or related to, one or more ta		п.,	<u> </u>	١
					than section 501(c)(3)) or in sectio	n 527? ►	_ Y	es X	No
b	If "Ye	s," con	nplete the following sc	<u>hedule</u>					
			(a)		(b)	(c)			
		ľ	Name of organization	-	Type of organization	Description of relationship			
	N/A								
						· · · · · · · · · · · · · · · · · · ·			
						<u>-</u>			
					<u>-</u>	<u> </u>			
			·						
									
_						<u></u>			
		-			·				
	··								
									
					_				

990/990-P	F			er Notes Payable		2002
Name	For caler	ndar year 2002 or tax y	ear beginning	, and ending	Employer Identific	ation Number
JAMES V.						
OF WILLI	AMSPORT	& LYCOMING	COUNTY		24-079918	<u> </u>
FORM 990	, PART I	V, LINE 64B	- ADDITION	AL INFORMATION		
	Nam	e of lender		Relationship to d	lisqualified person	
(1) WILLIA	MSPORT N	ATIONAL BAN	K			
				 	_	
(8)				<u></u>		
			_	 		
(10)						
Origina borr	al amount rowed	Date of loan	Maturity date	Repayment terms		Interest rate
1) 1	190,000	11/09/01	11/09/06	ANNUAL PAYMENTS		7.000
(2)						
3)				 		
4)						
5)		 				
6)		 				
8)		 				
(9)						
(10)					· · · · · · · · · · · · · · · · · · ·	
			 	T		
		provided by borrower		Purpose		
(1) BOOKMO	BI <u>LE</u>			BOOKMOBILE PURCHAS	<u> </u>	
(2)						
(3)				 		
(4) (5)						
(6)						
7)						
(8)			_ _			
(9)				 		
(10)						
	Consideration	furnished by lender		Balance due at beginning of year	Balance end o	due at f year
(1)		<u> </u>		190,000		L57,020
(2)						
(3)				<u></u>	-	
(4)				 	 -	
(5)					 	
<u>(6)</u>				 	 	
(7) (8)	 _					
(9)						
(10)					 _	
Totals				190,000		<u>157,020</u>

4562

Depreciation and Amortization

(Including Information on Listed Property)

► See separate instructions

Attach to your tax return

OMB No 1545-0172

2002

Attachment Sequence No

Internal Revenue Service Name(s) shown on return

Department of the Treasury

JAMES V. BROWN LIBRARY

OF WILLIAMSPORT & LYCOMING COUNTY

Identifying number

24-0799180 Business or activity to which this form relates INDIRECT DEPRECIATION Part I Election To Expense Certain Tangible Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I 24,000 1 Maximum amount. See page 2 of the instructions for a higher limit for certain businesses. 1 2 Total cost of section 179 property placed in service (see page 2 of the instructions) 2 3 200,000 Threshold cost of section 179 property before reduction in limitation 3 4 Reduction in limitation. Subtract line 3 from line 2, if zero or less, enter -0-4 5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less enter -0. If married filing separately see pg. 2 of the instr 5 (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 Listed property. Enter the amount from line 29 7 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2001 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2003 Add lines 9 and 10 less line 12 13 Note Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property) 14 Special depreciation allowance for qualified prop. (other than listed prop.) placed in service during the tax year (see pg. 3 of the instr.) 14 15 Property subject to section 168(f)(1) election (see page 4 of the instructions) 15 127,687 16 Other depreciation (including ACRS) (see page 4 of the instructions) 16 Part III MACRS Depreciation (Do not include listed property) (See page 4 of the instructions) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2002 17 18 if you are electing under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2002 Tax Year Using the General Depreciation System (b) Month and year placed in service (c) Basis for depreciation (business/investment use (d) Recovery (e) Convention (f) Method (a) Classification of property (a) Depreciation deduction репод only see instructions) 19a 3-year property 5-year property 7-year property d 10-year property 15-year property 20-year property S/L 25-year property 25 yrs S/L h Residential rental 27 5 yrs MM MM S/L property 27 5 yrs ММ Nonresidential real S/L 39 yrs ММ S/L property Section C-Assets Placed in Service During 2002 Tax Year Using the Alternative Depreciation System 20a Class life 12-vear S/L 12 yrs S/L 40-year 40 vrs MM Summary (see page 6 of the instructions) Part IV 21 Listed property. Enter amount from line 28 21 22 Total Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 127,687 Enter here and on the appropriate lines of your return. Partnerships and S corporations-see instr. 22 For assets shown above and placed in service during the current year enter the portion of the basis attributable to section 263A costs

37

43

DAA

Total Add amounts in column (f) See page 9 of the instructions for where to report

Form 4562 (2002) Page 2 Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement) Note For any vehicle for which you are using the standard mileage rate or deducting lease expense complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. Section A-Depreciation and Other Information (Caution See page 8 of the instructions for limits for passenger automobiles.) No 24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes (b) (f) (1) (e) (a) (d) Business/ Type of prop Date placed in Cost or other Elected Basis for depreciation Recovery Method/ Degreciation investment (list vehicles service basis (business/investment period Convention deduction section 179 percentage first) use only) cost Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see page 7 of the instructions) 25 Property used more than 50% in a qualified business use (see page 7 of the instructions) Property used 50% or less in a qualified business use (see page 7 of the instructions) S/L-S/L-Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1. 28 28 29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29 Section B-Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person If you provided vehicles to your employees first answer the guestions in Section C to see if you meet an exception to completing this section for those vehicles Total business/investment miles driven during **(f)** (a) (b) (d) (c) (e) Vehicle 2 the year (do not include commuting miles-Vehicle 1 Vehicle 3 Vehicle 4 Vehicle 5 Vehicle 6 see page 2 of the instructions) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32 34 Was the vehicle available for personal Yes No Yes No Yes No Yes Nο Yes No Yes No use during off-duty hours? Was the vehicle used primarily by a 35 more than 5% owner or related person? Is another vehicle available for personal use? Section C-Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see page 8 of the instructions) Yes No Do you maintain a written policy statement that prohibits all personal use of vehicles including commuting by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See page 8 of the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? Do you meet the requirements concerning qualified automobile demonstration use? (See page 9 of the instructions.) Note If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles Part VI <u>Amortization</u> (e) (c) (d) (b) Amortization (a) Date amortization Amortizable Code Amortization for period or Description of costs begins section this year percentage Amortization of costs that begins during your 2002 tax year (see page 9 of the instructions) Amortization of costs that began before your 2002 tax year 43

44

Statement 1 - Form 990, Part I, Line 8c - Sale of Assets Other Than Inventory - Securities

Desc			How Rec'd	Whom Sold		
Date Acquired	Date Sold	Sale Price	Cost & Expense	Deprec		Gaın/ -Loss
AK STEEL HODING CO		DON	IATION		_	
ANGLO AMERICAN PLC	11/15/02 \$		ATION	\$	\$	-36
BP PLC	11/21/02	2,097 DON	2,122 IATION			-25
BT GROUP PLC	11/21/02	5,260 DOM	5,313 ATION			-53
	11/21/02	3,298	3,315			-17
BLACK AND DECKER CORP	11/21/02	16,419	16,932			-513
COCA COLA COMPANY	11/21/02	9,285	IATION 10,246			-1,961
COMPUWARE CORP	11/21/02	DON 437	IATION 485			-48
DANA CORP	11/21/02		NOITA			-379
DTE ENERGY COMPANY		DON	ATION			
DELPHI CORPORATION	11/21/02		4,490 IATION			-120
EASTMAN CHEMICAL CO	11/21/02	1,007 DON	1,059 MATION			-52
ELECTRONIC DATA SYSTMEMS	11/21/02	408 DON	460 ATION			-52
EASTMAN KODAK	11/21/02	1,420	1,476 MATION			-56
	11/21/02	1,861	1,926			-65
FORD MOTOR COMPANY	11/21/02	2,995	CHASE 3,085			-90
HANSON PLC	11/21/02	DON 8,505	ATION 8,269			236
LONGS DRUGS STORES	11/21/02	DON 25,56 5	ATION 26,304			-739
MMO2 PLC	11/21/02		ATION 851			-91
MILLENIUM CHEMICALS INC		DON	ATION			
MONSANTO CO	11/21/02		2,363 ATION			-126
MCDONALDS CORP	11/21/02	3,703 DON	3,839 ATION			-136
PHARMACIA CORP	11/21/02	70,251 DON	69,180 ATION			1,071
RITE AID CORPORATION	11/21/02	60,602				-484
	11/21/02	1,819	1,975			-156
RYDER SYSTEM INC	11/21/02	2,270	ATION 2,387			-117
ST PAUL COS	11/21/02	DON 12,595	ATION 12,743			-148
TRAVELERS PROPERTY CASUALTY	11/21/02	DON 171	ATION 229			-58
TELENORTE LES PART	11/21/02		ATION 156			-36
VISTEON CORP		DON	ATION			
	11/21/02	272	313			-41

<u>Statement 1 - Form 990, Part I, Line 8c - Sale of Assets Other Than Inventory - Securities (continued)</u>

	Desc				How Rec'd	Whom Sold		
	Date Acquired	Date Sold		Sale Price	Cost & Expense	Deprec	•	Gaın/ -Loss
VODAFONE GROUP			_	DON	ATION			
WEST PHARMACEUTICAL	SVCS	11/21/02	\$	5,014	\$ 5,072 IATION	\$	\$	-58
	5165	9/10/02		221	293			-72
WYETH		11/21/02		DON 57,592	IATION 55,963			1,629
AOL TIME WARNER INC					CHASE			
AMERICAN INTERNATIO		12/02/02		5,748	14,812 CHASE			-9,064
	8/29/00	3/19/02		1,855	2,149			-294
ADP INC	9/27/01	3/19/02		PUR 856	CHASE 671			185
BANK OF NEW YORK				PUF	CHASE			
CITIGROUP INC	9/18/01	3/19/02		3,325	2,446 CHASE			879
CITIGROOF INC	8/29/00	3/20/02		2,979	3,482			-503
CITRIX SYSTEMS INC	7/27/00	2/28/02		PUR 5,700	10,064			-4,364
DTE ENERGY CO	1/2//00	2/20/02		-	CHASE			-
TECHNOLOGY SELECT S.	3/22/02	5/14/02		4,508	4,445 CHASE			63
TECHNOLOGI SELECI S.	4/06/00			8,340				-13,425
DANAHER CORP	2/11/00	1/08/02		PUR 18,632	CHASE 12,364			6,268
DUPONT E I DE NEMOU		1/00/02			CHASE			
DUKE ENERGY CORP	8/29/00	3/14/02		3,559	3,443 CHASE			116
DORE ENERGI CORP	9/27/01	3/15/02		3,523	3,608			-85
EMC CORP	12/01/99	3/20/02		PUR 1,453	CHASE 5,635			-4,182
E PIPHANY INC	12/01/99			•	CHASE			·
EL PASO CORP	4/30/01	5/28/02		4,226	14,271 CHASE			-10,045
ED PASO CORP	3/21/02	11/29/02		1,393	7,689			-6,296
FED HOME LOAN MTGE	CORP 7 36% 11/19/99			PUR 50,000	CHASE 50,000			
FED HOME LOAN MTGE		0/05/02			CHASE			
FED NATL MTGE ASSN	8/01/02	10/28/02		25,403	25,313 CHASE			90
FED NATE MIGE ASSN	3/31/00	VARIOUS		7,152				1,436
FLEETBOSTON FINANCIA	AL CORP 8/29/00	3/19/02		PUR 1,297	CHASE 1,401			-104
HOME DEPOT INC					CHASE			
ICN PHARMACEUTICAL	7/06/01	3/20/02		2,999	2,702 CHASE			297
	3/21/02	9/05/02		2,485	7,903			-5,418
INTEL CORP	6/02/99	12/02/02		PUR 1,067	1,283			-216
MCDONALDS CORP				PUF	CHASE			
MEDTRONIC INC	3/21/02	6/25/02		7,967 PUR	7,887 CHASE			80
	8/29/00	3/19/02		2,754	3,145			-391

<u>Statement 1 - Form 990, Part I, Line 8c - Sale of Assets Other Than Inventory - Securities (continued)</u>

	Desc				low ec'd	Whom Sold	
	Date Acquired	Date Sold	_	Sale Price	Cost & Expense	Deprec	 Gain/ -Loss
MICROSOFT CORP				PURC	HASE		
PPG INDUSTRIFS INC	6/02/99	3/20/02	\$	1,815 \$ PURC	2,312 HASE	\$	\$ -497
PHARMACIA CORP	7/01/94	2/28/02		15,600 PURC	11,378 HASE		4,222
PITT DES MOINES INC	VARIOUS	3/14/02			11,322		-2,882
AMES FINANCIAL SELEC	9/13/01 CT PDR	2/22/02		10,803 PURCI	10,075 HASE		728
SUN MICROSYSTEMS INC	8/29/00	2/28/02		9,005 PURCI	-		-693
TEXTRON INC	3/23/99	3/20/02		1,451 PURCI	•		-854
TRAVELERS PROPERTY O	9/28/00 CASUALTY	3/15/02		12,135 PURCI	14,292 HASE		-2,157
US TREASURY BILLS	VARIOUS	VARIOUS		306 PURCI	526 HASE		-220
UNITED TECHNOLOGIES	8/08/01 CORP	2/07/02		24,577 PURCI	24,577 HASE		
WASHINGTON MUTUAL IN	8/29/00 JC	3/19/02		2,597 PURCI	2,202		395
		12/02/02		1,797 PURCI	1,648		149
	9/27/01	3/15/02		2,234			 -320
TOTAL			\$_	568,236 \$	618,131	\$ 0	\$ -49, <u>895</u>

Statement 2 - Form 990, Line 20 - Other Changes in Net Assets or Fund Balances

Description	Amount
UNREALIZED INVESTMENT LOSSES	\$ -115,319
TOTAL	\$ -115,319

Statement 3 - Form 990, Part II, Line 43 - Other Functional Expenses

Description		otal enses	Program Service	 Mgt & General	Fund- Raising
	\$		\$	\$	\$
EXPENSES					Į.
AUDIO VISUAL		81,419	81,419		
BINDING & MENDING		381	381		
BOOKS	2	49,848	249,848		
BUILDING REPAIRS & MAINT		8,708	8,708		
CHANGE IN SPLIT INT AGREEMENT		4,310		4,310	
DUES & MEMBERSHIP		4,535		4,535	
ELECTRIC		40,999	40,999		
FURNITURE & MINOR EQUIPMENT		36,059	36,059		
HEAT		5,346	5,346		
INSURANCE		21,091	21,091		
INVESTMENT MANAGEMENT FEES		5,142		5,142	
LINKS PROJECT EXPENSES		29,944	29,944		
MARKET RESEARCH		10,012	10,012		•
MEALS		11,225	11,225		
MERCHANDISE PURCHASED		194	194		
MISCELLANEOUS		16,258	16,258		
OCLC TERMINAL		13,352	13,352		
PERIODICALS & NEWSPAPERS		10,714	10,714		
PROGRAM EXPENSES		37,726	37,726		
PUBLICITY & PROMOTION		29,424	29,424		
STORAGE RENTAL		2,889	2,889		
TRAINING WORKSHOPS		11,227	11,227		
UNEMPLOYMENT BENEFITS		6,736	6,736		
VEHICLE GAS & OIL		4,198	4,198		
VEHICLE REPAIRS		7,681	7,681		
VIDEOCONFERENCING EXPENSES		11,351	11,351		
WATER		1,124	 1,124	 	
TOTAL	\$ 6	61,893	\$ 647,906	\$ 13,987	\$0

24-	0	79	91	18	0
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Statement 4 - Form 990, Part IV, Line 54 - Investments in Securities

Description	Beginning of Year	End of Year	Basis of Valuation
US AND STATE GOVERNMENT	131,661	107,375	MARKET
CORPORATE STOCK	610,445	415,940	MARKET
CORPORATE BONDS	52,112	51,300	MARKET
	794 218	574,615	

Statement 5 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

Description

	Beginning of Year	Accum Deprec	End of Year	Accum Deprec
BOOKMOBILES	A 255 514 A	25 405		41 057
BUILDING & IMPROVEMENTS	\$ 355,514 \$	35,405	\$ 355,514 \$	41,957
BUILDING & IMPROVEMENTS	2,877,834	308,774	2,895,005	361,927
FURNITURE & EQUIPMENT	540 550	00	005 405	510 500
LAND	740,560	446,529	886,495	510,502
LAND	137,327		140,327	
LEASEHOLD IMPROVEMENTS	23.732.		,	
	2,400	130	2,400	190
VEHICLES				
	27,989	14,171	27,989	<u>18,120</u>
TOTAL	\$ 4,141,624 \$	805,009	\$ 4,307,730 \$	932,696

Statement 6 - Form 990, Part IV, Line 58 - Other Assets

Description	Begi of \	nning Year	End of Year		
ACCRUED INTEREST RECEIVABLE	\$	808	\$	829	
TOTAL	\$	808	\$	829	

Statement 7 - Form 990, Part IV, Line 65 - Other Liabilities

Description	Beginning of Year	_	End of Year		
CAPITAL LEASE OBLIGATION GIFT ANNUITY LIABILITY	\$ 12,734 36,180	•	6,649 36,610		
TOTAL	\$ 48,914	-	43,259		

24-0799180

Federal Statements

Statement 8 - Form 990, Part IV-A - Other Revenue Included on Return

Description	Amount			
UNREALIZED LOSSES ON INVESTMENTS	\$	115,319		
TOTAL	\$	115,319		

24-0799180	Federal Statements							
Form 990, Part VI, Question 80 - Relation to other organizations Name of related organization(s)								
LYCOMING COUNTY LIB								

24-0799180

Federal Statements

Statement 9 - Form 990, Part VII, Line 103 - Other Revenue

Description	Business Code	_	nrelated Amount	Exclusion Code	_	Exclusion Amount	_	Related Income
ADMINISTRATIVE FEES REIMBURSED PAYROLL FROM LYCOMING COUNTY LITERACY PROJECT		\$		41 41	\$	3,000 4 05,788	\$	
GRANT ASSISTANCE FEES VIDEOCONFERENCING FEES WORKSHOP INCOME				25 25 25	_	2,210 875 3,085		
TOTAL		\$	0		\$_	414,958	\$_	0