__ 990-EZ

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the internal Revenue Code (except private foundations)

2014

OMB No. 1545-1150

Department of the Treasury

 \blacktriangleright Do not enter social security numbers on this form as it may be made public.

ation about Form 000-E7 and its instructions is at voice ire anythin

Open to Public Inspection

		Rue Service	Filliothadon about Form 880-E2 and its insulprint is at www.ii			
A	For the	2014 calend	ar year, or tax year beginning , 2014, and	ending		, 20
В	Check if ap	oplicable:	C Name of organization		Employer id	entification number
	Address c	hange	Bernardsville Library Foundation, Inc.		2	7-4485942
	Name cha	inge	Telephone n	ımber		
닏	initial retu		91	8-766-0118		
H		n/terminated	1 Anderson Hill Road City or town, state or province, country, and ZIP or foreign postal code	F	Group Exe	
=	Amended Application		Parmondraille New James 07024	,	Number >	•
_		ting Method:	Bernardsville, New Jersey (17924 ☐ Cash ☐ Accrual Other (specify)	lu Ct	nok 🕨 🗍 i	the organization is not
	Mebsite	-	Odsi — Accidal Odici (specify) P			ch Schedule B
			at anti-max Market in Mark	 -	•)-EZ, or 990-PF).
				_1527 (F	UIII 880, 880	7-EZ, UI 880-FT).
K	Form of	organization:	☑ Corporation ☐ Trust ☐ Association ☐ Other	an if tatal as		
			7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more are \$500,000 or more, file Form 990 instead of Form 990-EZ	, or it total a:	35815	
_					<u> </u>	
P	art I		e, Expenses, and Changes in Net Assets or Fund Balances		structions	for Part I)
_			the organization used Schedule O to respond to any question in the	nis Part I.	<u> </u>	
	1		ons, gifts, grants, and similar amounte received.		. 1	107,111
	2	Program so	ervice revenue including government, tees and contracts		. 2	
	3	Membersh	ip dues and assessments		. 3	
	4	Investment	income		. 4	1963
	5a	Gross amo	unt from sale of assets other than hove heary			
	b		or other basis and sales expenses			
	c		. 5c			
	6	Gaming an	ss) from sale of assets other than the floor Subtract line so from line so d fundraising events	100000		
	a		ome from gaming (attach Schedule G if greater than			
0		\$15,000) .				
Revenue	_		<u> </u>	-4-1641		
Š	þ		me from fundraising events (not including \$ 29,356 of cor	ninipulions		
Œ			aising events reported on line 1) (attach Schedule G if the			
	1		h gross income and contributions exceeds \$15,000) . 6b		5,687	
	C		t expenses from gaming and fundralsing events 6c		5,687	
	d		e or (loss) from gaming and fundraising events (add lines 6a and 6b	and subtr	act per	
	i	line 6c) .			· 6d	0
	7a	Gross sale	s of inventory, less returns and allowances			
	b		of goods sold			
	C	Gross prof	t or (loss) from sales of inventory (Subtract line 7b from line 7a)		. 7c	
	8	Other rever	nue (describe in Schedule O)		. 8	
	9	Total reve	nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		▶ 9	109,074
	10		similar amounts paid (list in Schedule O)		. 10	70,000
	11		ald to or for members		. 11	
ø	12	-	ther compensation, and employee benefits		. 12	
enses	13		al fees and other payments to independent contractors		. 13	
<u>ē</u>	1		/, rent, utilities, and maintenance		. 14	
Ĕ	15					
144	1		ublications, postage, and shipping			2,588
	16		enses (describe in Schedule O)		16	10,162
	17	I otal expe	nses. Add lines 10 through 16			82,750
\$	18		deficit) for the year (Subtract line 17 from line 9)		. 18	26,324
8	19		or fund balances at beginning of year (from line 27, column (A)) (mi			
Net Assets		=	r figure reported on prior year's return)		<u> </u>	62,552
<u>e</u>	20		ges in net assets or fund balances (explain in Schedule O)			····
Z	21	Net assets	or fund balances at end of year. Combine lines 18 through 20	· · · ·	▶ 21	88,876

For Paperwork Reduction Act Notice, see the separate instructions.

(1/2)

Form 990-EZ (2014)

Cat. No. 106421

1/

Trintee

5 hours

Trustee

5 hours

Jennifer Van Beveren

Carol Wrenn

1 Anderson Hill Road, Bernardsville, New Jersey 07924

1 Anderson Hill Road, Bernardsville, New Jersey 07924

Part		in th	e	
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part		
00	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a		Yes	No
33	detailed description of each activity In Schedule O	33		1
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		7
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 8a, and 7a, among others)?	35a		7
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		~
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		>
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		~
37a	Enter amount of political expenditures, direct or Indirect, as described in the instructions ▶ 37a 0			
b 38a	Did the organization file Form 1120-POL for this year?	37b 38a		
b	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39	Section 501(c)(7) organizations. Enter:			
8	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities			
40a	Section 501(c)(3) organizations. Enter amount of tax Imposed on the organization during the year under: section 4911 ▶			
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		
C	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disquallfied persons during the year under sections 4912, 4955, and 4958			
đ	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
8	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		1
41	List the states with which a copy of this return is filed ▶ New Jersey			
42a		908-76		
	Located at ► 1 Anderson Hill Road, Bernardsville, New Jersey ZIP + 4 ►	079		
b	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)?	42b	Yes	No
	If "Yes." enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
C	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		1
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year		. I	No No
448	completed instead of Form 990-EZ	44a	8	
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	# 4		1
c d	Did the organization receive any payments for indoor tanning services during the year?	440 440		
45a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	4 5		\ \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\

Form 9	80-EZ (2	014)					Page 4	
46	to ca	he organization engage, directly or in ndidates for public office? If "Yes," c	omplete Schedule C					
Part		Section 501(c)(3) organizations All section 501(c)(3) organizations 50 and 51.	s must answer que			mplete the	e tables for lines	
		Check if the organization used Sch	nedule O to respond	to any question in	this Part VI	<u>····</u>	<u> </u>	
47		he organization engage in lobbying? If "Yes," complete Schedule C, Parl		section 501(h) electi		during the	tax 47 V	
48	•	organization a school as described in					. 48	
49a		he organization make any transfers to					. 49a 🗸	
b		es," was the related organization a se	•	_				
50	Com	plete this table for the organization's	five highest compen	sated employees (of	ther than offic	ers, direct	ors, trustees and key	
	empl	oyees) who each received more than	\$100,000 of comper	nsation from the orga	anization. If th	ere is non	e, enter "None."	
	(a)	Name and title of each employee	(b) Average hours per week devoted to position	(o) Reportable compensation (Forms W-2/1099-MISC	(d) Health contributions benefit plans, compen	to employee and deferred	(e) Estimated amount of other compensation	
			•					
					 			
	-		······································					
f 51	Com	number of other employees paid over plete this table for the organization's ,000 of compensation from the organization	s five highest comp	ensated Independen	t contractors	who each	received more than	
	(a)	Name and business address of each independ	ent contractor	(b) Type of se	rvice	(c) Compensation		
d	Total	number of other independent contra	ctors each receiving	over \$100,000 .	.▶			
52		the organization complete Schedupleted Schedule A	le A? Note. All se	ection 501(c)(3) org	anizations m	ust attach	n a .▶∐ Yes ∐ No	
Under p	penalties prect, ar	s of perjury, I declare that I have examined this rad complete. Declaration of preparer other than	eturn, including accompan officer) is based on all info	lying schedules and stater ormation of which prepare	nents, and to the r has any knowled	best of my kr Ige.	nowledge and belief, it is	
		Gennin Kans	wen			0/18/	15	
Sign Here		Signature of officer Date Date						
		Type or print name and title					T omis	
Paid		Print/Type preparer's name	Preparer's signature		Date	Check Self-emplo		
•	Only	Firm's name ▶			Firm	's EIN >		
		Firm's address ▶	obeum shares Con	Instructions	Pho	ne no.	N [] V [] 11-	
May t	ne IRS	discuss this return with the preparer	SHOWN BDOVE? See	msaucuons	<u> </u>		► 🗌 Yes 🗌 No	

SCHEDULE A (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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2014

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Employer Identification number Name of the organization Bernardsville Library Foundation, Inc. Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross Investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. ☐ Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations . . Provide the following information about the supported organization(s). (i) Name of supported organization (II) EIN (III) Type of organization (iv) is the organization (v) Amount of monetan (vi) Amount of support (see (described on lines 1-9 listed in your governing other support (see document? above or IRC section. (enorthursteni instructions) (see instructions)) Yae Nο Bernardsville Public Library 22-3307351 170(b)(1)(A)(vi) 70,000 (B) (C) (D) (E)

Part							
	(Complete only if you checked to Part III. If the organization fails to						alify under ————
Secti	on A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		74,747	80,100	132,245	109,074	396,166
2	Tax revenues levied for the organization'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		74,747	80,100	132,245	109,074	396,166
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)						
6	Public support. Subtract line 5 from line 4.						
	on B. Total Support	·	r			· · · · · · · · · · · · · · · · · · ·	
Calen	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4		74,747	80,100	132,245	109,074	396,166
8	Gross income from interest, dividends, payments received on securities toans, rents, royalties and income from similar sources				ti.		
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other Income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						396,166
12 13	Gross receipts from related activities, etc First five years. If the Form 990 is for the	he organization	n's first, secon	d, third, fourth	, or fifth tax ye		
04	organization, check this box and stop he			<u> </u>		• • • • •	🕨 🗖
	on C. Computation of Public Support Public Support percentage for 2014 (line			1 ookumn (6)		14	%
14 15	Public support percentage for 2014 (inteller Public support percentage from 2013 Sc	b, coluinii (i) u bedule A. Part	IVICIECIO DY III 18 1 Il line 14	i, column (ij)		15	
16a	331/2% support test—2014. If the organi box and stop here. The organization qua	ization dld not	check the box	on line 13, and	d line 14 is 331	3% or more, c	neck this
b	331/a% support test—2013. If the organ check this box and stop here. The organ	nization did no	ot check a box	on line 13 or	16a, and line		
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization me Part VI how the organization meets the "torganization	ets the "facts- facts-and-circ	and-circumsta umstances" tes	nces" test, che t. The organiz	eck this box ar ation qualifies	nd stop here. E as a publicly s	line 14 is Explain in
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organization in Part VI how the organization is supported organization.	tion meets the neets the "fact	e "facts-and-ci s-and-circumst	rcumstances" tances" test. T	test, check th he organizatio	nls box and ston n qualifies as a	and line op here. publicly
18	Private foundation. If the organization d						

Schedule	A (Form 990 or 990-EZ) 2014						Pa	
Part I								
Sectio	n A. Public Support							
1 .	ar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not Include any "unusual grants.")	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Tota	
2	Gross receipts from admissions, merchandise sold or services performed, or facilities							

VUICE	dui your for noom your boginging my)=/=0.0	12, 23	10,			
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise	ļ 					
_	sold or services performed, or facilities furnished in any activity that is related to the						1
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						İ
	organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .			<u> </u>			ļ
b	Amounts included on lines 2 and 3 received from other than disqualified	ļ				1	}
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year			<u></u>			<u> </u>
•	Add lines 7a and 7b						<u> </u>
8	Public support (Subtract line 7c from						
Sacti	on B. Total Support						R
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6					<u>`</u>	
10a	Gross income from Interest, dividends,						
	payments received on securities loans, rents,	<u>'</u>					
	royalties and income from similar sources .						ļ <u>.</u>
b	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975	1				i	Ì
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether	,					
	or not the business is regularly carried on		 				ļ
12	Other income. Do not include gain or				-		
	loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the						
· .	organization, check this box and stop he			<u></u>	<u> </u>	· · · ·	<u> ▶ □</u>
	on C. Computation of Public Support Public support percentage for 2014 (line			(A) column (f)		15	%
15 16	Public support percentage for 2014 (fine Public support percentage from 2013 Sc					16	
	on D. Computation of Investment In			<u> </u>	<u> </u>		
17	Investment income percentage for 2014			y line 13, colu	mn (f))	17	%
18	Investment income percentage from 201	3 Schedule A,	Part III, line 17			18	%
1 9 a	331/2% support tests-2014. If the organ	nization did not	check the bo	x on line 14, a	nd line 15 is m	ore than 331/	%, and line
	17 is not more than 331/s%, check this box						
b	331n% support tests—2013. If the organialine 18 is not more than 331n%, check this	zation did not d	INFCK & DOX ON INFO. The order	ization muslifled	i sa, and ine 16 : as a miblich c	upported oma	331/a%, and nization ▶ 🔲
20	Private foundation. If the organization d						
40	TO THE PERSON OF						

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and If you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- C Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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Part	V Supporting Organizations (continued)			
		District Co.	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		神学
ь	A family member of a person described in (a) above?	11b		1
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		1
	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.			
Cooks		2		<u> </u>
Secu	on C. Type II Supporting Organizations			
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	Charles	Yes	No
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1	e managh.	
Secti	on D. All Type III Supporting Organizations			
_		COSCUSA	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		35.33
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
•	the organization maintained a close and continuous working relationship with the supported organization(s).	2	NT OF PARTIES	enterioral
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant volce in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Section	on E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see I	nstruc	tions	s).
8	The organization satisfied the Activities Test. Complete line 2 below.			<i>y</i> .
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (s	ee inst	ructio	ons).
2	Activities Test. Answer (a) and (b) below.	F	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI Identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
L	that these activities constituted substantially all of its activities.	28		ggreens
þ	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b	355	
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	1	

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	gan	izations	
Check here if the organization satisfied the Integral Part Test as a qualifying other Type III non-functionally integrated supporting organizations must contain the property of the content of the			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	****	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		Three control of the
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	8		
7 Check here if the current year is the organization's first as a non-functionall instructions).		egrated Type III supporting	ng organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continued)	
Secti	on D - Distributions	Current Year		
1	Amounts paid to supported organizations to accomplish	 _		
2	Amounts paid to perform activity that directly furthers exe	erted		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4_	Amounts paid to acquire exempt-use assets			
5_	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			<u></u>
	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is res	sponsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	1	an	(III)
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, If any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3_	Excess distributions carryover, if any, to 2014:			
a				
ь				
<u>C</u> _				
d				
<u>e</u>	From 2013			
f_	Total of lines 3a through e			
<u> 9</u>	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2014 distributable amount Carryover from 2009 not applied (see instructions)			
<u>¦</u> -	Remainder. Subtract lines 3g, 3h, and 3l from 3f.			
	Distributions for 2014 from Section			
4	D, line 7: \$			
а	Applied to underdistributions of prior years			
<u>b</u>	Applied to 2014 distributable amount			- Property of the second secon
c	Remainder, Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, If			
•	any. Subtract lines 3g and 4a from line 2 (If amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а				
b				
C				
d	Excess from 2013			
е	Excess from 2014			

schedule A (F	omi 990 or 990-E2) 2014 Page o
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions.)
The eventure	tion supports the Bernardsville Public Library, which is a municipal library and, therefore, a governemental entity.
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

reprie of the organization	Employer restraincement manuser		
Bernardsville Library Foundation, Inc.	27-4485942		
Line 10 Grants and Similar Amounts Paid:			
Bernardsville Public Library, 1 Anderson Hill Road, Bernardsville, NJ 07924			
Amount of Grant - \$70,000 for the Library's general uses and purposes			
Relationship - Publically Supporeted Organization			
Line 16. Other Expenses:	***************************************		
Business Registration Fee's - S224	······································		
Insurance (Liability, D&O) - \$919			
Miscellaneous - \$735			
Credit Card Expenses - \$333			
Homes of Distinction - \$6,965			
Special Events - \$985			

Part III, Statement fo Program Servie Accomplishments.			
Organization's Primary Exempt Purpose: To raise money for, and make grants to, The Bernardsville Public Library, Bernardsville. New Jersey			
Part IV	***************************************		
Pat Wry Trustee 5 Hours 0 0 0			
Bob Frawley Trustee 5 Hours 0 0 0			
Cindy Feeley Trustee 5 Hours 0 0 0	***************************************		
Eva Bostek-Brady Trustee 5 Hours 0 0 0			
Kathleen Palmer Trustee 5 Hours 0 0 0			
Sheila Miller Trustee 5 Hours 0 0 0			
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Schedule O (Form 990 or 990-EZ) (2014)	Page 2
tame of the organization	Employer identification number
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