990 por 990

Return of Organization Exempt From Income Tax

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

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

2022

Open to Public

OMB No. 1545-0047

Department of the Treasur

Departm	ent or tr	ne treasury	an creative confi	Assumption of the M	2005 a fasta effect		at 7 Hope	THE THE COLUMN	2/4/4/9	1 ,
A Fo	r the	2022 calend	ar year, or tax year l				and endi	ng		, 20
B Ch	eck if ap	oplicable:	C Name of organization	MAPLEWOOD	MEMORIAL LIBRARY	FOUNDATIO	N INC		D Employ	yer identification number
Ad	dress ch	nange	Doing business as	MAPLEWOOD	MEMORIAL LIBRARY	FOUNDATI				45-1733485
Na Na	me char	nge	Number and street (or	P.O. box if mail is not del	ivered to street address)		Room/suil	te	E Telepho	one number
Init	ial retur	n	51 BAKER S	TREET						(973)762-0427
Fir	al return	n/terminated	City or town, state or p	rovince, country, and ZIP	or foreign postal code				G Gross	
Ап	ended r	return	MAPLEWOOD,	NJ 07040					\$	187,107
Ap	plication	pending	F Name and address of p	orincipal officer:				H(a) Is this a	group return fo	r subordinates? Yes X No
								H(b) Are all	subordinates	s included? Yes No
1 Ta	k-exemp	ot status:	501(c)(3) 501(c)	() (insert no.) 4947(a)(1) or	527		If "No,"	attach a list	. See instructions
J W	bsite:	MAI	LEWOODMEMORIA	LLIBRARYFOUN	DATION.ORG			H(c) Group	exemption n	umber
K Fo	rm of or	ganization: X	Corporation Trust	Association 0	ther	L Year of format	tion: 201	.0 м	State of lega	l domicile: NJ
Par		Summai	У							
	1	Briefly descr	ibe the organization's	mission or most si	gnificant activities:	E MISSION	OF TH	E MAPLE	WOOD M	EMORIAL LIBRARY
ø.		FOUNDATI	ON IS TO PROV	IDE SUPPORT	FOR AND RAISE FU	NDS FOR TH	E MAPI	EWOOD 1	MEMORI.	AL LIBRARY; ALSO
n					CY AND PROVIDE L					
Lua										
Activities & Governance	2	Check this b	ox if the organiza	tion discontinued it	s operations or disposed	of more than 25	5% of its r	net assets.	G0 12	
Ö	3	Number of v	oting members of the	governing body (P	art VI, line 1a)				3	9
S	4	Number of in	ndependent voting me	embers of the gove	ming body (Part VI, line 1	b)			4	9
itie	5				ar 2022 (Part V, line 2a)				5	0
÷	6								6	
Ä					mn (C), line 12				7a	0
					90-T, Part I, line 11				7b	0
		TTO COM CIATO	a badiiiood taxabid iii		oo iii ak ii mio ii			Prior Year	-	Current Year
	8	Contribution	s and grants (Part VI	l line 1h)					5,368	181,692
o o	9								7,500	0
n n									277	
Revenue	10				and 7d)				377	5,415
2	11				9c, 10c, and 11e)					0
	12				art VIII, column (A), line 1				5,745	187,107
	13								5,995	1,045
	14									0
S	15				art IX, column (A), lines 5-				-	0
Expenses			I fundraising fees (Pa				division	EVE - 159	3,351	0
be	b		ising expenses (Part			12,286	3-2803			
ũ	17		ises (Part IX, column					56	5,496	18,805
	18	Total expens	ses. Add lines 13-17	(must equal Part IX	., column (A), line 25)			7(,842	19,850
	19	Revenue les	ss expenses. Subtra	t line 18 from line	2			394	1,903	167,257
ces							Begi	nning of Curr	ent Year	End of Year
sets	20	Total assets	(Part X, line 16)					1,452	2,302	1,626,374
Net Assets or Fund Balances	21	Total liabiliti	es (Part X, line 26)							0
	22	Net assets	or fund balances. Su	otract line 21 from I	ine 20			1,452	2,302	1,626,374
Par	t II	Signati	re Block							
					ompanying schedules and statem all information of which preparer			ledge and beli	ef, it is	
true, c	orrect, a	and complete, De	ectaration of preparer (other	than officer) is based on	all information of which preparer	nas any knowledge.				
٠.		ELLI	EN M DAVENPORT							
Sigr	1	Signature of off	icer						Date	9
Here	•	ELLI	EN M DAVENPORT	, TREASURER						
		Type or print na	ame and title							
		Print/Type pr	reparer's name	Preparer's sign	1 4 1	Date		Check	if	PTIN
Paid		DONALD	F DAVENPORT	Dance	At Denny A	06-14-2	023		nployed	P00069356
	oarei			OR GOLDRIAM	AND COMPANY, LLC			im's EIN		
	Only			CHESTNUT STE				Phone no.		
240	J.117	, Fillis addre		ON NJ 07083	Lead			TOTAL TIO.	909-6	964-5888
May	he IR	S discuss this	return with the prepare		See instructions				300-3	X Yes No
ividy L	1111	o widoudd ii lig	retain with the bleb	ALON DISCAALL BOOKE ;	OCC HIGH GOLDING			7 S S S S S	0 0 0 0 0	110

For Paperwork Reduction Act Notice, see the separate instructions.

	990 (2022) MAPLEWOOD MEMORIAL LIBRARY FOUNDATION INC 45-1733485 Pag
ar	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
	Briefly describe the organization's mission:
	FUNDS FOR THE MAPLEWOOD MEMORIAL LIBRARY; ALSO, ITS' MISSION IS TO PROMOTE LITERACY AND PROVIDENCE OF THE MAPLEWOOD MEMORIAL LIBRARY; ALSO, ITS' MISSION IS TO PROMOTE LITERACY AND PROVIDENCE OF THE MAPLEWOOD MEMORIAL LIBRARY; ALSO, ITS' MISSION IS TO PROMOTE LITERACY AND PROVIDENCE OF THE MAPLEWOOD MEMORIAL LIBRARY; ALSO, ITS' MISSION IS TO PROMOTE LITERACY AND PROVIDENCE OF THE MAPLEWOOD MEMORIAL LIBRARY; ALSO, ITS' MISSION IS TO PROMOTE LITERACY AND PROVIDENCE OF THE MAPLEWOOD MEMORIAL LIBRARY; ALSO, ITS' MISSION IS TO PROMOTE LITERACY AND PROVIDENCE OF THE MAPLEWOOD MEMORIAL LIBRARY; ALSO, ITS' MISSION IS TO PROMOTE LITERACY AND PROVIDENCE OF THE MAPLEWOOD MEMORIAL LIBRARY; ALSO, ITS' MISSION IS TO PROMOTE LITERACY AND PROVIDENCE OF THE MAPLEWOOD MEMORIAL LIBRARY; ALSO, ITS' MISSION IS TO PROMOTE LITERACY AND PROVIDENCE OF THE MAPLEWOOD MEMORIAL LIBRARY; ALSO, ITS' MISSION IS TO PROMOTE LITERACY AND PROVIDENCE OF THE MAPLEWOOD MEMORIAL LIBRARY.
	LIBRARY SERVICES FOR THE PUBLIC.
	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services? Yes X No
	If "Yes," describe these changes on Schedule O.
	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
1	(Code:) (Expenses \$1,045 including grants of \$) (Revenue \$)
	THE FOUNDATION PROVIDES FUNDS FOR DIGITAL ARCHIVING FOR THE LIBRARY. THIS ALLOWS CITIZENS TO
	ON LINE AND RETRIEVE DOCUMENTS FOR RESEARCH OR FOR PERSONAL INFORMATION.
_	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
)	(Code) (Expenses \$ micloding grants of \$ / (revenue \$ /)
;	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
d	Other program services (Describe on Schedule O.)
d	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

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Checklist of Required Schedules Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," x 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 3 X Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 election in effect during the tax year? If "Yes," complete Schedule C, Part II X Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, 5 assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III 5 X Did the organization maintain any donor advised funds or any similar funds or accounts for which donors 6 have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 6 x Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 x Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 X Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV x Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V 10 x If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," 11a X b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more 11b of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII X c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c X d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets 11d X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a 12a X b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 x 13 14a Did the organization maintain an office, employees, or agents outside of the United States? X Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 15 for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 x 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F. Parts III and IV x Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions 17 x Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 18 Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II X Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 X 20a 20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H X b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 x

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DESIMACIO			Yes	No
2	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	າາ	40.514.3	-
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
4a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c	No. of the last	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			in the A
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?		-	
	If "Yes," complete Schedule L, Part I	25b		х
	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			8.8
	controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II	26		x
8.	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		х
	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,			
	Part IV, instructions, for applicable filing thresholds, conditions, and exceptions):		1.0	
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	1		100
	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		x
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		x
)	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		x
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			1
	conservation contributions? If "Yes," complete Schedule M	30		x
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		x
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32	lane.	x
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
1	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			1397
	or IV, and Part V, line 1	34		x
ā	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b)	
6	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			16-
	related organization?/f "Yes," complete Schedule R, Part V, line 2	36		x
7	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
В	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O	38	x	
)a	rt V Statements Regarding Other IRS Filings and Tax Compliance			
a	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	100		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	57191357		
b	Did the organization comply with backup withholding rules for reportable payments to vendors and			
C	reportable gaming (gambling) winnings to prize winners?	1c	x	
_	reportable garring (garrolling) withings to prize withers:		m 990	(202

Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Chatamente filed for the colondar year anding with as within the year covered by this rature 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		x
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	96	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	ADMICIRED AND DAY	X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	进潮色		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	4-1	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	2 2 30	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	-	-	
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	3102.2	Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	6b		
	gifts were not tax deductible?	OD C	THE RES	100000
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	7a	W. S. S.	v
	and services provided to the payor?	7b	- CN	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7.5		-
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		x
	If "Yes," indicate the number of Forms 8282 filed during the year		NAC:	
d	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
e	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		x
f	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
•	sponsoring organization have excess business holdings at any time during the year?	8		3200
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	The state of the s	, TELEBRICATIONS,
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	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.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	1000	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40		26.5
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		Sitte
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
C 14a	The state of the s	14a	And Andrew Walker	x
14a b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		1
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
.5	excess parachute payment(s) during the year?	15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.			1066
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	10 at	x
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

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X

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A Governing Rody and Management

			V	
	Enter the number of voting members of the governing body at the end of the tax year		Yes	No
	Enter the number of voting members of the governing body at the end of the tax year			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
-	any other officer, director, trustee, or key employee?	2	PERSONAL COST	x
3	Did the organization delegate control over management duties customarily performed by or under the direct			
•	supervision of officers, directors, trustees, or key employees to a management company or other person?	3	100	x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	er en	х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		x
6	Did the organization have members or stockholders?	6	x	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			BAY 1
	one or more members of the governing body?	7a	х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	100		
	stockholders, or persons other than the governing body?	7b	х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	x	
b	Each committee with authority to act on behalf of the governing body?	8b	x	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			100
16	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	-	Τ	F
		F	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	401		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	-	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	12033
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	120		3596651
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	-	100
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12c		
	describe on Schedule O how this was done	13	X	x
13	Did the organization have a written whistleblower policy?	14		x
14	Did the organization have a written document retention and destruction policy?	100000	a and a	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The state of the property of t	15a	SERIES - 1455	X
a		15b		x
b	Other officers or key employees of the organization	136		
40	and the state of t			
16a	with a taxable entity during the year?	16a	Lite overline and a series of	x
	and the second s			1100
b	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	161		TECHNOLOGIC
Se	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)			
10	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website Don request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
. 5	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records.			
	FILEN M. DAVENDORT (973)762-0427, 106 DURAND ROAD, MAPLEWOOD, NJ 07040			

	(2022)	

MAPLEWOOD MEMORIAL LIBRARY FOUNDATION INC

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

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

Section A Officers Directors Trustees Key Employees and Highest Companyated Employees

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

See instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/	(E) Reportable compensation from related organizations (W-2/	(F) Estimated amount of other compensation from the	
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)	organization and related organizations	
(1) AKSHATHA GOPAL SHETTY	6.00										
DIRECTOR		x	G - 22 - 2			-	-	0	0	0	
(2) EVA BACON DIRECTOR		x						0	0	0	
(3) JONATHAN BRUDNER DIRECTOR	4.00	x						0	0	0	
(4) IBI ZOBOI	1.00	x						0	o	0	
(5) ROBERT LADD	2.00	x						0	0	0	
(6) ROWLAND BENNETT DIRECTOR	1.00	x						0	0	0	
(7) DIANE HAASE DIRECTOR	6.00							0	0	0	
(8) BENJAMIN COHEN PRESIDENT	12.00			x				0	0	0	
(9) ELLEN M DAVENPORT TREASURER	24.00			x				0	0	0	
(10)											
(11)											
(12)											
<u>(13)</u>											
(14)											

Page 8

	(A)	(B)	(do n	ot che	Pos	C) sition ore th	an one		(D)	(E)		(F)
		hours per week					/trustee)		compensation from the organization (W-2/	compensation from related organizations (W-2/	com	of other pensation om the
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)	organ	ization and organizations
(15)												
(16)												
(17)						e an						7
(18)												
(19)												
(20)												
(21)												
(22)							-11-7-00-1					
(23)												
(24)												
(25)												
1b c	Subtotal			• •			• • •					
d	Total (add lines 1b and 1c)								0	0		0
2	Total number of individuals (including but not limit reportable compensation from the organization	ed to those li	sted at	oove) wh	ю ге	ceived	mor	re than \$100,000 o	f		
3	Did the organization list any former officer, director	or, trustee, ke	ey emp	loyee	e, or	high	nest co	mpe	ensated			Yes No
	employee on line 1a? If "Yes," complete Schedule										3	X
4	For any individual listed on line 1a, is the sum of roganization and related organizations greater tha											
	individual										4	X
5	Did any person listed on line 1a receive or accrue								ation or individual			
Cooti	for services rendered to the organization? If "Yes, on B. Independent Contractors	" complete S	chedu	le J f	for s	uch	persor	7		• • • • • • • •	5	х
1	Complete this table for your five highest compens	sated indener	ndent c	ontr	acto	rs th	at rece	eivec	more than \$100.0	100 of		
•	compensation from the organization. Report comp	A STATE OF THE STA										
	(A)							I	(B)		(C)	
	Name and business addre	ess							Description of service	ces	Compens	ation
						-		-				
-			-10-10-		-	-		-				-
-			- treat	- Comme	-		alliners 2					
2	Total number of independent contractors (including	ng but not lim	ited to	thos	e lis	ted	above)) who)	122		
	received more than \$100,000 of compensation fr	127			113			, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				

45-1733485 Form 990 (2022) MAPLEWOOD MEMORIAL LIBRARY FOUNDATION INC Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) (B) Total revenue Unrelated Revenue excluded Related or exempt sections 512-514 Federated campaigns 1b Contributions, Gifts, Grants and Other Similar Amounts 1d Related organizations Government grants (contributions) . . f All other contributions, gifts, grants, and similar amounts not included above 1f 181,692 Noncash contributions included in lines 1a-1f 1g h Total. Add lines 1a-1f 181,692 **Business Code** 2a Program Service f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 5,415 5,415 Income from investment of tax-exempt bond proceeds (i) Real (ii) Personal 6a Gross rents 6a 6b b Less: rental expenses . . c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7a Gross amount from sales of assets 7a other than inventory b Less: cost or other basis Other Revenue and sales expenses . . 7b c Gain or (loss) 7c 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 8a b Less: direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities, See Part IV, line 19 9a 9b b Less: direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances . 10a 10b b Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** Miscellanous Revenue 11a d All other revenue

e Total. Add lines 11a-11d

.

187,107

45-1733485

Part IX Statement of Functional Expenses

Sect	tion 501(c)(3) and 501(c)(4) organizations must complete all col		ations must complete co	olumn (A).	
	Check if Schedule O contains a response or note to				
٠٠.	not include emounts reported on lines 6h. 7h	(A)	(B)	(C)	(D)
8b, 5	9b, and 10b of Part VIII.	(otal oxponsos	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations			The Drivers of	
	and domestic governments. See Part IV, line 21	1,045	1,045		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
а	Management				
t					
c					
C			ACCUMATION OF THE PROPERTY OF		
E	Professional fundraising services. See Part IV, line 17				
f	to a programment from the contract and t				
ç	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)				
12		560		560	
13	Office expenses	880		880	9
14		650		650	
15		1/2-8/0			
16	Occupancy				
17	Travel				
18				Property of the second	
	for any federal, state, or local public officials	The state of the s	100 C		
19					
20			-		
21	The state of the s				
22		TO THE REAL PROPERTY.		24.5	
23		816		816	
24	From the State of the Control of the			15-27-6-75-6-75	
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
	a PAYPAL	1,142		1,142	12,286
	b PRINTING AND MAILING	12,286		0.120	12,286
	C SECRETARIAL EXPENSE	2,138		2,138	
	d FILING FEES	333		333	
	e All other expenses	Access Control			10 000
25		19,850	1,045	6,519	12,286
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if				
	following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X		٠.	
			(A) Reginaling of year		(B)
T	1	Cash - non-interest-bearing	513,094	1	370,619
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	262,002	3	116,738
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	and the second s	5	
1	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	ZZDROWNOW CETA XXX - SAN CETOTO NO.	6	A CHE SELECTION AND AND A CHEST OF THE SELECTION AND A CHEST OF THE SELECT
	7	Notes and loans receivable, net		7	
ets	8	Inventories for sale or use		8	
Assets	9	Prepaid expenses and deferred charges		9	
1	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation	Editoria Seria Incresione establica establica	10c	The state of the s
	11	Investments - publicly traded securities	677,206	11	1,139,017
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11	The state of the s	13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	1,452,302	16	1,626,374
-	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
10	22	Loans and other payables to any current or former officer, director,			
Liabilities	22	trustee, key employee, creator or founder, substantial contributor, or 35%			
pill		controlled entity or family member of any of these persons		22	THE WASHINGTON THE ANALYSIS ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED.
Lia	22	Secured mortgages and notes payable to unrelated third parties		23	
	23	Unsecured notes and loans payable to unrelated third parties		24	
	24	Other liabilities (including federal income tax, payables to related third			
	25	parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
	26	Organizations that follow FASB ASC 958, check here			
S		and complete lines 27, 28, 32, and 33.			
Ce	07	Net assets without donor restrictions		27	SE DOMESTICA DE LA CALACTERISTICA DE LA CONTRACTION DEL CONTRACTION DE LA CONTRACTIO
ala	27	Net assets with donor restrictions		28	
B	28	Organizations that do not follow FASB ASC 958, check here			
Ĕ		and complete lines 29 through 33.			
Net Assets or Fund Balances	20	Capital stock or trust principal, or current funds	1,452,302	29	1,626,374
S	29	Paid-in or capital surplus, or land, building, or equipment fund		30	
set	30	Retained earnings, endowment, accumulated income, or other funds		31	
As	31	Total net assets or fund balances	1,452,302	-	
Net	32	Total liabilities and net assets/fund balances	1,452,302	_	
	33	Total liaulilities and thet assets/fund balances			Form 990 (2022)

orm !	990 (20		5-1733485	Ľ	Pa	ge 12
Par	t XI	Reconciliation of Net Assets				
		Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total re	venue (must equal Part VIII, column (A), line 12)	1		187,	107
2	Total Av	nenses (must equal Part IX column (A) line 25)	2		10	250
3	Revenu	e less expenses. Subtract line 2 from line 1	3		167,	257
4	Net ass	ets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,	452,	302
5	Net unr	ealized gains (losses) on investments	5			
6	Donate	d services and use of facilities	6		nia - Tent	
7	Investn	nent expenses	7			
8	Prior pe	riod adjustments	8	2.0		
9	Other o	hanges in net assets or fund balances (explain on Schedule O)	9		6,	815
10	Net ass	ets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, col	ımn (B))	10	1,	626,	374
Par	t XII	Financial Statements and Reporting				
		Check if Schedule O contains a response or note to any line in this Part XII				Ш
					Yes	No
1	Accour	iting method used to prepare the Form 990: Cash Accrual Other				
	If the o	rganization changed its method of accounting from a prior year or checked "Other," explain on				
	Sched	ıle O.				
2a	Were t	ne organization's financial statements compiled or reviewed by an independent accountant?		2a		х
	If "Yes	" check a box below to indicate whether the financial statements for the year were compiled or				
	review	ed on a separate basis, consolidated basis, or both:				
	∏ Se	parate basis Consolidated basis Both consolidated and separate basis				
b	Were t	he organization's financial statements audited by an independent accountant?		2b		x
		" check a box below to indicate whether the financial statements for the year were audited on a				
		te basis, consolidated basis, or both:	· ·			
		parate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes	to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of		1 1 2		
	the au	dit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
		rganization changed either its oversight process or selection process during the tax year, explain on				
	Sched					
3a		esult of a federal award, was the organization required to undergo an audit or audits as set forth in the				
		m Guidance, 2 C.F.R. Part 200, Subpart F?		3a	100	х
h	If "Yes	" did the organization undergo the required audit or audits? If the organization did not undergo the		-	1	
~	roquir	ed audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
	1 EUU					(2022