

December 1, 2023

Dear Affiliate Member of PCBL:
Re: 2023 tax paperwork

Enclosed is the paperwork for filing the 990 tax return for 2023. Your prompt response is appreciated as the 990 tax return for PCBL and all affiliates is filed together, so if one affiliate is late with paperwork, we are ALL late in filing. The fee schedule remains the same this year:

Tax packet returned or postmarked on or before March 1, 2024.....\$125
Tax packet returned or postmarked on or before April 1, 2024.....\$175

Affiliate Members that have not returned/postmarked their tax packet by April 1 will have to file their taxes on their own and will lose 501(c)(3) status *

Please complete all forms listed on the included checklist, and **return using either:**

1. **Email:** Scan all paperwork and email to pcblpa@gmail.com
OR
2. **USPS:** Mail all paperwork to PCBL, PO Box 12822, Pittsburgh, PA 15241
 - a. Be sure to keep a copy for your records
 - b. We highly recommend adding tracking to your postage

As you know, being an “Affiliate Member” of the PCBL provides your local Friends organization with two highly important and valuable tax benefits:

- Through PCBL’s IRS Group Determination Letter, your group is recognized as a 501(c)(3) tax exempt charitable organization. This enables your donors (individuals, corporations, foundations, and vendors) to take a tax deduction for their contributions to you.
- Through a similar letter from the Pennsylvania Department of Revenue, your group is exempt from paying Pennsylvania sales tax on any items you purchase for your group. Our tax-exempt certificate is renewed until March 2025.

If you have any questions about your annual report, please do not hesitate to call or email us. We will be more than happy to discuss them with you.

Thank you,

Sue Miller, MSLS
Executive Secretary
pcblpa@gmail.com
1-800-870-3858

**Affiliate Members who do not return their paperwork by April 1 can appeal to the PCBL Board to retain their membership.*



CHECKLIST – PLEASE PROVIDE THE FOLLOWING:

- ___ 1. 2024 Organization Membership Form and PCBL Membership Dues - \$125/\$175
 \$125 if returned or postmarked on or before March 1, 2024
 \$175 if returned or postmarked on or before April 1, 2024
- ___ 2. Organization Contact Information Form
- ___ 3. Federal 990 Financial Report
- ___ 4. Copy of December 31, 2023 Bank Statements and Investment Account Statements
- ___ 5. Supplemental Information Sheets (pages 1 and 2)
- ___ 6. IRS Schedule G

Additional forms are available at www.pcbllpa.org - Membership



Pennsylvania Citizens for Better Libraries

Organization Membership Form 2024

Please Print Neatly

Organization Name: _____

Organization Mailing Address: _____

City: _____ State: _____ Zip: _____

Organization Email: _____

Organization Membership Levels

<input type="checkbox"/>	Patron	\$500
<input type="checkbox"/>	Corporate	\$250
<input type="checkbox"/>	Sponsor	\$125
<input type="checkbox"/>	501(c)(3) Affiliate <i>(tax paperwork returned by March 1, 2024)</i>	\$125
<input type="checkbox"/>	501(c)(3) Affiliate <i>(tax paperwork returned by April 1, 2024)</i>	\$175
<input type="checkbox"/>	Friends Group	\$50
Membership Amount:		\$ _____

Donation (Optional)

Educational and Legislative Efforts Amount:	\$ _____
----------------------------------------------------	----------

Total Amount Enclosed	\$ _____
------------------------------	----------

<i>Method of payment</i>	<input type="checkbox"/> Paypal	<input type="checkbox"/> Check # _____
--------------------------	---------------------------------	----------------------------------------

Please make checks payable to **Pennsylvania Citizens for Better Libraries**
and mail along with this form to:

PCBL
P.O. Box 12822
Pittsburgh, PA 15241

OR

Pay by **PayPal** by visiting pcblpa.org/membership-fees **AND** mail or email this form to us.



Pennsylvania Citizens for Better Libraries

Organization Contact Information

Please Print Neatly

Organization Name: _____

2023	President	<i>Name</i>	
		<i>Email</i>	<i>Phone</i>
	Treasurer	<i>Name</i>	
		<i>Email</i>	<i>Phone</i>

If different from above:

2024	President	<i>Name</i>	
		<i>Email</i>	<i>Phone</i>
	Treasurer	<i>Name</i>	
		<i>Email</i>	<i>Phone</i>

Library Director Name: _____

Library Phone Number: _____

Library Mailing Address: _____

City: _____ **State:** _____ **Zip:** _____

**Pennsylvania Citizens for Better Libraries
Federal 990 Financial Report
2023**

PCBL AFFILIATE MEMBER: _____
EIN: _____

CONTACT PERSON _____
E-MAIL: _____ **PHONE:** _____

BEGINNING ASSET BALANCE **1. December 31, 2022 Total Asset Balance** _____

INCOME	2. Donations Received	
	3. Membership Income	
	4. Gross Fundraising Revenue (Schedule G, Part II, Line 3, Column d)	
	5. Gross Gaming Revenue (Schedule G, Part III, Line 1, Column d)	
	6. Grants Received (list each donor and amount)	
	7. Interest Income	
	8. Other Income (If more than \$500, attach list)	

9. Total Income (Lines 2 - 8) _____

EXPENSES	10. Dues Paid to PCBL and Other Organizations During the Year	
	11. Fundraising Direct Expense Summary (Schedule G, Part II, Line 10, column d)	
	12. Gaming Direct Expense Summary (Schedule G, Part III, Line 7, column d)	
	13. Office Expenses	
	14. Postage	
	15. Program Expenses	
	16. Contributions to the Library	
	17. Other Expenses (If more than \$500, attach list)	

18. Total Expenses (Lines 10 - 17) _____

ENDING ASSET BALANCE **19. 2023 Ending Asset Balance (Supplemental Information, Page 1, Line 1, Column e)** _____
 (Line 1 + Line 9 - Line 18)

CHECKLIST - PLEASE PROVIDE THE FOLLOWING:

1. 2024 PCBL Membership Dues
2. Federal 990 Financial Report
3. Copy of December 31, 2023 Bank Statements and Investment Account Statements
4. Supplemental Information Sheets (pages 1 and 2)
5. IRS Schedule G

Additional copies of these forms are available at WWW.PCBLPA.ORG - Membership

Supplemental Information 2023 Form 990 - Page 1

PCBL AFFILIATE MEMBER: _____

ASSETS - List checking account, savings account, CD's and investment accounts separately

Type of Account	(a) Checking	(b) Savings	(c)	(d)	(e) Total Assets
1. Ending Balance - December 31, 2023	_____	_____	_____	_____	_____
<u>Reconciliation to Bank Statement</u>					
2. Deposits in Transit	_____	_____	_____	_____	_____
3. Outstanding Checks	_____	_____	_____	_____	_____
4. Ending Balance = Year End Bank Statement (Line 1 - Line 2 + Line 3)	=====	=====	=====	=====	=====

INFORMATION ABOUT YOUR ORGANIZATION

	YES	NO
1. Does your organization provide receipts to Donors for gifts in excess of \$250?	<input type="checkbox"/>	<input type="checkbox"/>
2. Does your organization have a formal Conflict of Interest Policy?	<input type="checkbox"/>	<input type="checkbox"/>
3. Does your organization make contributions to any political campaign fund?	<input type="checkbox"/>	<input type="checkbox"/>
4. Does your organization make contributions to lobbying activities?	<input type="checkbox"/>	<input type="checkbox"/>
If YES, please provide the following:		
Total lobbying expenditures to influence public opinion	\$ _____	
Total lobbying expenditures to influence a legislative body	\$ _____	
5. Does your organization compensate any Officers or Board Members?	<input type="checkbox"/>	<input type="checkbox"/>
6. Does your organization compensate any family members of Officers or Board Members?	<input type="checkbox"/>	<input type="checkbox"/>
7. Does your organization send information about our organization to the public?	<input type="checkbox"/>	<input type="checkbox"/>
8. Does your organization disclose financial information to the public?	<input type="checkbox"/>	<input type="checkbox"/>
9. Does your organization continue to maintain the requirements for tax-exempt status?	<input type="checkbox"/>	<input type="checkbox"/>

Under penalties of perjury, I declare that the information provided to PCBL is to the best of my knowledge and belief, true, correct and complete.

Signature of Officer/Board Member

Print Name

Title

Supplemental Information 2023 Form 990 - Page 2

PCBL AFFILIATE MEMBER: _____

- | | YES | NO |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1 Did you participate in any fundraising activities during the year? If Yes, complete the attached Schedule G, Parts I* & II | | |
| 2 Did you participate in any gaming activities during the year? If yes, complete the attached Schedule G, Part III
(Gaming is raffles, bingo games, & other games of chance) | | |
| 3 Did you receive \$5,000 or more in cash or check from any one contributor (donor) during the year? If yes, provide the following details | | |

Date Received	Name, address, & zip code	Amount

- | | YES | NO |
|-----------------------------------------------------------------------------------------------|-----|----|
| 4 Did you receive any non-cash (in-kind) contributions? If yes, provide the following details | | |

Date Received	Name, address, & zip code	Fair Market Value	Description of gift

- | | YES | NO |
|---------------------------------------------------------------------------------------------------------------|-----|----|
| 5 During the tax year, did any person who is a current or former officer, director, trustee, or key employee: | | |
| a) Have a direct business relationship with the organization? | | |
| b) Have a family member with a direct business relationship? | | |
| c) Serve as an officer, director, trustee, or key employee of an entity doing business with the organization? | | |

* Part of Schedule G is only required to be completed by affiliates that paid more than \$15,000 for professional fundraising service.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				
11 Net income summary. Subtract line 10 from line 3, column (d)					

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d)					
8 Net gaming income summary. Subtract line 7 from line 1, column (d)					

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____
